

Governor Steve Sisolak
Chairman

Susan Brown
Clerk of the Board



Attorney General Aaron D. Ford
Member

Secretary of State Barbara K. Cegavske
Member

STATE OF NEVADA BOARD OF EXAMINERS

209 E. Musser Street, Room 200 / Carson City, NV 89701-4298
Phone: (775) 684-0222 / Fax: (775) 684-0260
<http://budget.nv.gov/Meetings>

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: September 8, 2020, 10:00 AM

Location:

Pursuant to the Governor's Emergency Directive 006, as extended, there will be no physical location for this meeting. This meeting can be viewed on YouTube. The link will not go live until 10:00 am

https://www.youtube.com/channel/UCF8zpKli9VhMDNVq_GsEYuQ/live

**Please do not call for the collaboration code if you have not been contacted by your Executive Branch Budget Officer to do so.
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AGENDA

- 1. Call to Order / Roll Call**
- 2. Public Comment** (The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).
- 3. Approval of the July 14 and August 11, 2020 Minutes** (For possible action)

4. Authorization to Contract with a Current and/or a Former State Employee (For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirements of NRS Chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Brian Bracken to perform administrative duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

5. Approval of Master Lease Agreements (For possible action)

The Department of Administration, Division of Enterprise Information Technology Services, seeks approval for the seventh amendment to the existing master lease agreement with International Business Machines. This amendment extends the termination date from May 31, 2022 to September 30, 2023 and increases the maximum amount from \$12,045,136.35 to \$12,244,220.35 due to the purchase/lease of hardware and software for the mainframe server.

6. Approval of Proposed Leases (For possible action)

7. Approval of Proposed Contracts (For possible action)

8. Approval of Work Plan (For possible action)

9. Approval of Proposed Master Service Agreements (For possible action)

10. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from July 21, 2020 through August 17, 2020.

11. Information Item Reports

A. Statewide Quarterly Overtime Report – Fiscal Year 2020 4th Quarter

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. The Budget Division submits the 4th Quarter Overtime Report and analysis for Fiscal Year 2020.

B. Stale Claims Account, Emergency Accounts, Statutory Contingency Accounts

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of August 27, 2020.

The TORT Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency supplement funding for eligible agencies within statutory authority.

Below is the available balance for each account prior to any projected outstanding claims. **The below numbers where updated on September 2, 2020.**

TORT Claim Fund	\$ 5,382,032.83
Statutory Contingency Account	\$ 2,165,837.60
Stale Claims Account	\$ 646,088.73
Emergency Account	\$ 115,552.00
Disaster Relief Account	\$ 6,904,023.21
IFC Unrestricted Contingency Fund General Fund	\$17,859,684.44
IFC Unrestricted Contingency Highway Fund	\$ 1,638,068.35
IFC Restricted Contingency Fund General Fund	\$14,772,194.00
IFC Restricted Contingency Highway Fund	\$ 2,346,784.00

12. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

13. Adjournment (For possible action)

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body will limit public comments to three minutes per speaker and may place other reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Dale Ann Luzzi at (775) 684-0223 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail her at daluzzi@finance.nv.gov. Supporting materials for this meeting are available posted on the Board of Examiner's website and by contacting Dale Ann Luzzi at (775) 684-0223 or by email at daluzzi@finance.nv.gov

Agenda Posted at the Following Locations: Notice of this meeting was posted on the Internet:
<http://budget.nv.gov/Meetings/Meetings-new/> and <https://notice.nv.gov>

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MINUTES

Date and Time: July 14, 2020, 10:00 AM

Location:

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MEMBERS PRESENT:

Governor Steve Sisolak
Secretary of State Barbara Cegavske – on the phone
Attorney General Ford – on the phone

STAFF PRESENT:

Susan Brown, Clerk of the Board
Rosalie Bordelove, Board Counsel, Deputy Attorney General
Dale Ann Luzzi, Board Secretary

OTHERS PRESENT:

Zach Conine, Nevada State Treasurer
Tara Hagan, Chief Deputy, State Treasurer's office
Dennis Perea, Deputy Director, Department of Employment, Training and Rehabilitation
Shelley Hendren, Administrator for the Rehabilitation Division, Department of Employment, Training and Rehabilitation

1. Call to Order / Roll Call

Governor: Good morning. I would like to call today's meeting for July 14, 2020, at 10:00 a.m. of the State of Nevada Board of Examiners to order. Could I ask the Board Secretary to take the role, please?

Board Secretary: Yes. Governor Sisolak?

Governor: Here.

Board Secretary: Secretary of State Cegavske?

Secretary of State: I'm here.

Board Secretary: Attorney General Ford?

Attorney General: Here.

Board Secretary: Let the record reflect, we do have a quorum.

Governor: We have a quorum. Thank you.

2. Public Comment (The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).

Governor: Moving on to item number two, public comment. Do we have a call-in line or are there any written public comments?

Board Secretary: We do have a call-in line but we don't have anyone for public comment.

Governor: Do we have anybody on the phone for public comment? Do we have any written public comments to be entered into the record? Seeing none, we'll move on.

3. Approval of the June 9, 2020 Minutes (For possible action)

Governor: Agenda item three, approval of the June 9, 2020 minutes. Do we have a motion regarding the minutes?

Attorney General: So moved, Mr. Governor.

Governor: Thank you. We have a motion for approval. Any discussion? All in favor signify by saying aye. [ayes around] motion passes, item number three. Moving on to item number four, Authorization to Contract with a Current and/or Former State Employee. My understanding is we are pulling one of these items.

4. Authorization to Contract with a Current and/or a Former State Employee (For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirements of NRS Chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 4, the Department of Administration, Purchasing Division seeks a favorable recommendation regarding the Division's determination to use the emergency provision to contract with former employee Brian Bracken to perform administrative duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Don Soderberg to perform hearings duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Clerk of the Board Good morning. Under item four we have, two requests here to contract with a current and/or former state employee. The first item is being withdrawn. That will be put forward at a future Board of Examiners meeting. The second item is for the Department of Administration Purchasing Division to contract with a former employee under NRS 333.705, subsection 1. This person will conduct hearings related to unemployment benefits and they will be employed through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower. Are there any questions on this item?

Governor: I think everyone understands the urgency of getting more people handling unemployment claims, so anything we can do to get more folks in there is greatly appreciated. The first request has been delayed. The second one for the Department of Employment, Training and Rehabilitation is being moved forward. Do we have any discussion on this item? Do we have a motion?

Attorney General: So moved. Move approval.

Governor: We have a motion for approval. Any discussion on the motion? Hearing and seeing none, all in favor signify by saying aye. [ayes around] Motion passes. Next item, Request for Designation of Bad Debts.

5. Request for Designation of Bad Debts (For possible action)

Office of the State Controller

Pursuant to NRS 353C.220, the Office of the State Controller requests the Board of Examiners to write-off bad debts deemed uncollectible on behalf of the following state departments:

Department	Division	Number of Accounts	Total Amount
1. Administration	Purchasing	1	\$114.82
2. Administration	Central Payroll	39	\$19,048.55
3. Attorney General	Administration	75	\$49,641.99
4. Attorney General	Private Investigator's Licensing Board	4	\$8,825.00
5. Agriculture	Agriculture	37	\$2,639.15
6. Business and Industry	Dairy Commission	1	\$3,824.75
7. Business and Industry	Insurance	52	\$16,500.00
8. Business and Industry	Transportation Authority	4	\$3,623.44
9. Conservation and Natural Resources	Environmental Protection	51	\$301,110.02
10. Conservation and Natural Resources	Forestry	8	\$28,562.09
11. Corrections	Corrections	4,971	\$336,209.83
12. Health and Human Services	Welfare and Supportive Services	36	\$10,213.90
13. Health and Human Services	Child and Family Services	4	\$97.67
14. Health and Human Services	Healthcare Finance and Policy	54	\$9,719.11
15. Health and Human Services	Public and Behavioral Health	89	\$1,856.65
16. Health and Human Services	Health Care Quality Compliance	3	\$92.00
17. Health and Human Services	Welfare and Supportive Services	166	\$185,180.26
18. Motor Vehicles	Motor Carrier	78	143,140.90
19. Motor Vehicles	Motor Vehicles	7,143	\$4,349,614.33
20. Motor Vehicles	Records	1	\$48.00
21. Governor's Office	Energy	6	\$11,869,080.00
22. Judicial Discipline Commission	Judicial Discipline Commission	1	\$10,845.87
23. Office of Veterans Services	Veteran's Home	1	\$15,883.71
24. Public Employees Benefit Program	Public Employees Benefit Program	194	\$117,792.89
25. Public Safety	Records, Communications and Compliance	8	\$2,070.69
26. Public Safety	Parole and Probation	1,810	\$584,394.75
27. Public Safety	Records and Technology	5	\$553.75
28. Public Safety	Fire Marshall	116	\$16,137.38
29. Public Utilities	Public Utilities Commission	1	\$1,000.00
30. Secretary of State	Secretary of State	292	\$33,161.81

31. Transportation	Transportation	8	\$23,931.10
32. Western Interstate Commission for Higher Education	Western Interstate Commission for Higher Education	30	\$791,603.85
33. Wildlife	Wildlife	1	\$44.98
Grand Total		15,290	\$18,936,563.24

Clerk of the Board: This item has been withdrawn. We are requesting additional information and it will be place back on the agenda when we have the information.

Governor: Thank you. Item number six, Approval of Proposed Leases.

6. Approval of Proposed Leases (For possible action)

Clerk of the Board: We have seven leases under agenda item six today for approval by the Board this morning. Are there any questions on any of these items?

Governor: No. I appreciate that you answered all my questions at my briefing. Do we have any questions on item number six? Do we have a motion?

Attorney General: Move approval.

Governor: We have a motion for approval. Any discussion on that motion? Hearing and seeing none, all in favor signify by saying aye. [ayes around] Motion passes. Item number seven, Approval of Proposed Contracts.

7. Approval of Proposed Contracts (For possible action)

Clerk of the Board: There are 25 contracts in agenda item seven for approval by the Board this morning. Are there any questions on any of these items?

Governor: I do have questions on this one. Who do we have from the Treasurer's office? Is Mr. Conine with us? Do we have anyone from the Treasures' Office?

Attorney General: I heard someone sign in.

Chief Deputy Hagan: Yes, Governor. This is Tara Hagan, Chief Deputy with the Treasurer's office.

Governor: Okay, Tara. I've got questions on two, three, four and five. They are for a little over two million dollars in consulting contracts. Are these all-new? Was a Request for Proposal (RFP) done? Are these services that your office can't provide without these consultants?

Chief Deputy Hagan: Yes. So, let me start with FHN Financial which is a manager that we utilized to manage the Local Government Investment Pool (LGIP). That manager has been with us almost-I think this is the second time. I think with these contracts there are fees obviously that the state-that we receive from these and they are passed through to local governments. We have seen the expertise with FHN Financial increase the rate of return or yield for local government fairly substantially and a lot of that is through some additional investments in credit or corporate securities which, you know, candidly, we don't have the back-office expertise to really ensure that when we look at those corporate securities that we have the most up to date information or we don't have all the tools and resources that financial manager can utilize. As I've indicated, we have seen improved performance which means increased yield or interest distribution to local government since we've contracted with FHN Financial.

Governor: Okay. My concern is that my understanding is under NRS you are greatly limited as to the vehicles you can invest this money in. Am I correct?

Chief Deputy Hagan: You are correct, Governor, in terms of credit securities at an A or better and then treasuries, agencies. But it really is the expertise in the credit security that our small investment team and resources are really lacking. As you can imagine when you look at credit securities, today a lot of those larger A+ corporations do have a lot of debt on the books and so just ensuring that you have the most up to date information to know whether to buy those securities, maintain those securities and that's really the expertise that our, investment team, our small shop of four people is really missing for that.

Treasurer Conine: Governor, this is Zach Conine. I can answer any questions on here as well. Sorry, we've got a board of Finance meeting taking place at the same time.

Governor: The concern is, Zach, that we're looking at a half a million dollars a year, and my understanding is I know you invest a lot in treasuries and TIPs and very highly secured vehicles and while it's a pass-through, I get that. That's just taking money from the local jurisdictions where I worked for a long time and I know that there was always a complaint about the amount of money that's spent managing these funds. I just don't know why you couldn't hire somebody or two people at half a million dollars a year you're spending on outside consultants which are all out of town firms.

Treasurer Conine: Yeah and so to speak to that a little bit. On the LGIP side, specifically in Fiscal Year 20, we spent about \$155,000 on outside firms plus the state made about \$39,000. And that was to manage about 1.8 billion dollars and returned about 28 million dollars in returns. So, from a cost to result standpoint, we feel pretty good about it. I think at some point we would love to pull LGIP back in-house and look at managing it internally, but frankly, sir, the staff does not have the capacity to manage the type of corporate investments we need to look at in order to get this kind of yield for the local communities at this point.

Governor: Was an RFP done or do you have a list you work off of? How are these selected?

Treasurer Conine: So, the FHN which is the LGIP, was the LGIP. We did a full RFP process through Purchasing. Tara probably has the number on how many, but north of 10, to look at historical results, types of reporting they provided and experience working in local government, etcetera.

Governor: Okay. What about the other three?

Treasurer Conine: The other three were also through the RFP process and that, of course, is at the discretion of the local communities who choose to join into the program, so that's basically us vetting the potential options for them to invest in. And also, worth mentioning that within that it is the decision just like LGIP, but instead of being pooled, it's an individual relationship that the Treasurer's office simply helps facilitate with the local governments. Because there is mechanically no way that those fees would be—that all three of those fees would be paid in their entirety. That's based on this—all of the assets moved into each account which is, uh, it can't be each of them, right? It's a triple counted number.

Governor: So, it's a common issue of an RFP in relationships?

Treasurer Conine: No. It's an RFP with the historical knowledge of having worked with, FHN since 2015 or so. But for our fee, we have companies from all over the country come in, big and small. FHN won of those on their experience, on their very low fee count and their relationships with the individual counties. So, with LGIP the state has an active role, but in some ways, it's hands-off. FHN handles all of the, or a vast portion of the client management pieces so they're answering questions from different counties who are party to it which saves us a lot of time and effort as well.

Governor: Okay, I'm fine with it, but once I get a few minutes I would like to go offline with you as it relates to these selections and get a better understanding of the process.

Treasurer Conine: I very much look forward to it, sir. You know I love talking about investments.

Governor: Thank you. Does anyone else have any questions on this item, item number seven, Approval of Proposed Contracts? Do we have a motion?

Attorney General: Move approval.

Governor: We have a motion for approval on item number 7. Any discussion? Hearing and seeing none, all in favor signify by saying aye. [ayes around] Motion passes. Thank you. Item number eight, Approval of Work Plan.

8. Approval of Work Plan (For possible action)

Clerk of the Board: There is one Work Plan under agenda item eight for approval by the Board this morning. Are there any questions on this item?

Governor: I have a question on the Colorado Center for the Blind.

Clerk of the Board: Governor, that's on the next agenda item.

Governor: Oh, the next one. I'm sorry. Then I don't have one on this one. Do we have any questions on item number eight? Do we have a motion on item number eight?

Attorney General: Move approval.

Governor: We have a motion for approval. Any discussion? All in favor, signify by saying aye. [ayes around] Do we get you in this, secretary? I think I heard Secretary Cegavske vote aye.

Attorney General: Just momentarily let me get her back on the line. Hold on just a moment.

Governor: I don't know if we will get the Secretary back. I'm pretty sure I heard her vote aye. Let's mark her as an aye and if that has to change, we'll come back to that item number eight. Moving on to item number nine. If we get Secretary Cegavske could you please speak up? Okay. Item nine.

9. Approval of Proposed Master Service Agreements (For possible action)

Clerk of the Board: There are four Master Service Agreements under agenda item nine for approval by the Board this morning and there is a question on the Colorado Center for the Blind and I believe they are available.

Governor: Secretary?

Secretary of State: Yes, I'm back on. I apologize. I was disconnected.

Governor: I thought I heard you vote aye on number eight. Is that correct?

Secretary of State: Yes.

Governor: Yes, so we're three ayes on that one. On item number nine, the Colorado Center for the Blind is the \$300,000 contract. And while I am supportive of the contract and being able to assist this demographic, I'm not totally understanding why the Nevada Center for the Blind can't handle this. So, do we have somebody from the Nevada Center on the phone?

Shelley Hendren: Governor, this is Shelley Hendren, Administrator for the Rehabilitation Division for Department of Employment, Training and Rehabilitation (DETR) with oversight of services to the blind.

Governor: Okay. Shelley, are these services not performed in Nevada?

Shelley Hendren: That's correct. This program is very unique. It's an immersive, comprehensive program of instruction that has a residential component and we do not have anything comparable in the State of Nevada, unfortunately.

Governor: Okay. I just hate to keep sending all of this out of state but if we don't have another option, we don't have a choice. Do I have any discussion? Did I hear a comment?

Shelley Hendren: I'm sorry, Governor. Shelley Hendren. Yes. I just wanted to let you know we are talking to Blind Connect which is in Las Vegas and we hope to have a program. It won't be the same because it's not as immersive, but we'll have a residential component and we're looking at 2022. So, certainly, we're trying to deliver as many services within Nevada as we can, but this program in Colorado is very unique to individuals who are losing their sight or are newly blind and need to learn independent living in order to move on to employment.

Governor: Okay. Well, I appreciate that explanation and hopefully, Nevada will be able to provide the same type of service in the state in the future. So, are there any questions on any of these other items? Do I have a motion on the other items?

Attorney General: I move approval.

Governor: We have a motion for approval. Any discussion on the motion. Hearing and seeing none, all in favor signify by saying aye. [ayes around] Motion passes. Item number 10, Information Item – Clerk of the Board of Contracts.

10. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from May 19, 2020 through June 22, 2020.

Clerk of the Board There were 58 contracts under the \$50,000 threshold that were approved by the Clerk between May 19, 2020, and June 22, 2020. There has not been any additional information requested on these items by the Board members that I am aware of.

Governor: No. I received the information that I requested on these contracts. We had a question on contract 55 with McDonald Carano, LLP. Are they currently involved in any litigation with the state that you know?

Rachel Anderson: This is Rachel Anderson from the Office of the Attorney General. We have asked them to provide this information and they are doing a review of their office not only of anything current, but also checking to see if they have anything prospective, but we do not have the information in hand yet. And in part that is due to the fact that their computer system does not collect a prospective one, so they had to contact all of their attorneys to ensure that they give us full information and as soon as we have that in hand we will provide that to your office.

Governor: The problem I've got is I am getting the information subsequent to the approval of the contract.

Attorney General: Mr. Governor. This is Aaron Ford. Let me be clear. I know of at least one action in which an attorney at McDonald Carano is representing entities against the state if that's your question.

Governor: Okay. That's my question.

Attorney General: Okay. That said, Mr. Governor, there is no conflict per se from a legal perspective, we do screen and check for that to ensure that there is no ethical conflict or legal conflict that we need to be concerned about. But there is at least that one particular action, and just so you know, that may be the case with several of the vendors that we utilize outside. There are legal parameters that attorneys can engage in or can abide by and where it's allowed to take place. I just wanted to mention that out loud.

Governor: Is there a time sensitivity to this one?

Clerk of the Board This contract has already been approved.

Governor: It's what?

Clerk of the Board It's already been approved. This is an information item.

Governor: It's just information?

Clerk of the Board Yes.

Governor: If I can get more feedback on this one, I know they are one of the more powerful, large lobbying firms in the state. We'll work on this one offline too, okay? And it's under \$50,000. They come right under the threshold so they don't need approval which always raises my specter when these outside contractors do that.

Attorney General: Well, Mr., Mr. Governor, if I could just alert you to a future contract coming down the pike which we are also utilizing McDonald Carano in other matters where they're representing the state employees in DETR matters where my office is conflicted out. And those are substantially more than the \$46,800 so you will see additional contracting coming forward reflecting that, just for your information.

Governor: Okay. I will get with my legal folks and determine how we can move forward on that. It just raises my specter when they're suing you with one hand and we're paying them with the other hand to sue somebody else. That was for information. Do we have any further questions on item number 10? Okay. Item number 11 is the second time set aside for public comment. Do we have any other?

11. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

Do we have any public comment on the phone? There's none in person that I can see in Las Vegas or in Carson. Or do we have any written public comments?

Clerk of the Board: We do not have any written public comment

12. Adjournment (For possible action)

Governor: We do not. Do I have a motion for adjournment?

Attorney General: So moved.

Governor: Do we have any discussion? Hearing and seeing none, all in favor signify by saying aye. [ayes around] We are adjourned. Thank you very much, appreciate it. Have a great day.

Governor Steve Sisolak
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MEMBERS PRESENT:

Governor Steve Sisolak – Present in Las Vegas
Secretary of State Barbara Cegavske – on the phone
Attorney General Ford – on the phone

STAFF PRESENT:

Susan Brown, Clerk of the Board
Rosalie Bordelove, Board Counsel, Deputy Attorney General
Dale Ann Luzzi, Board Secretary

OTHERS PRESENT:

Amelia Green, the law firm of Neufeld, Scheck and Brustin

1. Call to Order / Roll Call

Governor: I would like to call today's meeting to order for the State of Nevada Board of Examiners for Tuesday, August 11, 2020 to order. Could I ask the Clerk to take the roll, please?

Board Secretary: Governor Sisolak?

Governor: Here.

Board Secretary: Secretary of State Cegavske?

Secretary of State: Here.

Board Secretary: Attorney General Ford?

Attorney General: Here.

Board Secretary: Let the record reflect we do have a quorum.

Governor: We do have a quorum. Thank you.

2. Public Comment (The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).

Governor: Item number two, Public Comment. This is the first time set aside for public comment. Anyone wishing to address the board on any item on today's agenda, items on the agenda, please identify yourself for the record and comments will be limited to three minutes. Do we have anybody on the phone or any written comments?

Board Secretary: We did not receive any written comments and I do not know if there's any public on the phone.

Governor: Who can tell if we have any on the phone?

Board Secretary: Not hearing any.

Amelia Green: My name is Amelia Green. I'm a lawyer for DeMarlo Barry. I'm from the law firm of Neufeld Scheck & Brustin. I am on the phone though I do not have a public comment.

Governor: I'm sorry. You do not have a public comment or what?

Amelia Green: I do not have a specific public comment but I just wanted to let you know I'm on the phone.

Governor: Great. Thank you. Anybody else?

3. Approval of the June 30, 2020 Minutes (For possible action)

Governor: Item number three, Approval of the June 30th, 2020 minutes. Do we have a motion on the approval of the minutes?

Attorney General: General Ford with approval.

Governor: We have a motion on the floor from General Ford. Any discussion on that motion? Hearing and seeing none, all in favor signify by saying aye. [Ayes around]. Motion passes. Item number four, Authorization to Contract with a Current and/or Former State Employee.

4. Authorization to Contract with a Current and/or a Former State Employee (For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirements of NRS Chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Evan Dale to perform fiscal duties for the Department of Administration, Administrative Services Division through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Timothy Maguire to perform uniformed security guard duties for various agencies through Master Service Agreement #19049 with Universal Protection Service LLP, dba Allied Universal Security.

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Kelli Baratti to perform resource and incident management coordination duties for the Department of Public Safety, Division of Emergency Management (DEM) through Master Service Agreement # 18406 with Talent Framework LLC.

Clerk of the Board: Item four includes three requests to contract with former employees pursuant to NRS 333.705 subsection 1. All three of these requests are

from the Department of Administration, Purchasing Division. The first is to contract with a former employee to perform fiscal duties for the Department of Administration, Administrative Services Division through Master Services Agreement 18404 with Manpower. The second is for a former employee to perform uniformed security guard duties for various agencies through Master Service Agreement 19049, doing business as Allied Universal Security and the third is to contract with a former employee to perform resource and incident management coordination duties for the Department of Public Safety, Division of Emergency Management. This individual will be employed through Talent Framework, LLC, with Master Service Agreement 18406. Are there any questions on any of these items?

Governor: I do not have any questions on those. General Ford or Secretary Cegavske, do you have any questions?

Attorney General: None here.

Secretary of State: None.

Governor: Do I have a motion on item number four?

Attorney General: Move approval.

Governor: I have a motion for approval. Any discussion on that motion? Hearing and seeing none, all in favor signify by saying aye. [Ayes around]. Motion passes. Item number five, Authorization for An Emergency Contract With a Current and/or Former State Employee.

5. Authorization for an Emergency Contract with a Current and/or Former State Employee (For possible action)

Pursuant to NRS 333.705, subsection 4, the Department of Administration seeks on behalf of the Employment, Training and Rehabilitation a favorable recommendation regarding the Department's determination to use the emergency provision to contract with former employee Brian Bracken to perform administrative duties through Master Service Agreement #18404 between Department of Administration, Purchasing Division and HAT Limited Partnership, dba Manpower.

Clerk of the Board: Pursuant to subsection 4 of NRS 333.705, an agency may contract with a former employee, without first obtaining Board of Examiners approval if the term of the contract is for less than four months and the head of the agent-using agency determines that an emergency exists. If a using agency contracts with an individual pursuant to this exception, they must submit a copy of the contract and a description of the emergency to the Board of Examiners who shall review the contract and description of the emergency and notify the agency whether or not they would

have approved the contract had it not been entered into under the emergency provision. There's one item under this, or one request under this item for the Department of Employment, Training and Rehabilitation and they are seeking favorable recommendation from the Board on their use of the emergency provisions to contract with a former employee. The Department contracted through Manpower with a former employee from May 25, 2020 through September 25, 2020 to assist with unemployment insurance programs. This individual will assist with the development and implementation of the federally mandated Pandemic Unemployment Assistance Program. Are there any questions on this item?

Governor: Do we have any questions on item number five?

Attorney General: None here.

Governor: Do we have a motion on item number five?

Attorney General: I move approval.

Governor: We have a motion for approval. Any discussion on that motion? Hearing none. All in favor signify by saying aye. [Ayes around]. Motion passes. Item number six, Requests for a Recommendation Of Approval to the Interim Finance Committee for an Allocation Amount From the Contingency Account.

6. Request for a recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account (For possible action)

A. Office of the Attorney General

Pursuant to NRS 353.268, the Office of the Attorney General requests the Board's recommendation to the Interim Finance Committee for an allocation of \$3,551 from Interim Finance Committee Contingency Account to cover a projected shortfall.

B. Governor's Finance Office

Pursuant to NRS 353.268, the Governors Finance Office requests the Board's recommendation to the Interim Finance Committee for an allocation of \$3,467,578 from Interim Finance Committee Contingency Account to cover a projected shortfall.

Clerk of the Board: This item includes two requests for a positive recommendation to the Interim Finance Committee Pursuant to NRS 353.268. The General Fund contingency account has an approximate balance of \$16.4 million to cover unanticipated costs for the remainder of the 19-21 biennium. If these items are approved the remaining balance in the account will be approximately \$12.9 million.

The first request is from the Office of the Attorney General for an allocation of \$3,551 to cover a projected shortfall in the Crime Prevention account, which is due to lower than projected license plate revenues. The second request is from the Governor's Finance Office for an allocation of \$3,467,578 to cover a projected shortfall in the Statutory Contingency account. With the passage of Assembly Bill 267 of the 2019 legislative session, which provides for the compensation of certain persons who were wrongfully convicted, it is anticipated that this account will be exhausted before the October IFC meeting due to pending claims. Are there any questions on either of these items?

Governor: Do Secretary Cegavske or General Ford have a question?

Attorney General: I do not.

Secretary of State: None.

Governor: Okay. Do I have a motion?

Attorney General: Move approval.

Governor: We have a motion for approval. Any discussion on that motion? All in favor signify by saying aye. [Ayes around]. Motion passes. Item number seven, Request for Approval of the Tort Claim Pursuant To NRS 41.036.

7. Request for Approval to Pay a Tort Claim Pursuant to NRS 41.036 (For possible action)

Pursuant to NRS 41.036, the Office of the Attorney General submits the following Tort Claim request for approval:

Claimant:	Daniel Vargas/ Christiansen Law Offices
Claim No:	TC17846
Settlement Amount:	\$175,000
Date of Loss:	November 30, 2013

Clerk of the Board: This item is a claim for \$175,000 for which the Office of the Attorney General recommends approval of this payment from the Tort Claims fund to Christensen Law Offices, in the matter of Daniel Vargas, for attorney fees and costs. Are there any questions on this item?

Governor: No. And, I appreciate it. I just want to acknowledge, Susan, that you did a great job answering all my questions leading up to this meeting so thank you very much. Do we have any questions on this item? Seeing none. Do I have a motion on item number seven?

Attorney General: Move approval.

Governor: We have a motion for approval. Any discussion on that motion? All in favor signify by saying aye. [Ayes around]. Motion passes. Item number eight, request for Approval of Payment from the Statutory Contingency Account.

8. Request for Approval of Payment from the Statutory Contingency Account (For possible action)

Pursuant to NRS 41.950 and NRS 41.970, the Governor's Finance Office requests the Board of Examiners to approve a payment of \$2,275,000 from the Statutory Contingency Account, to DeMarlo Berry representing compensation for his wrongful conviction.

Clerk of the Board: Pursuant to NRS 41.950 and NRS 41.970, the Governor's Finance Office is requesting the Board of Examiners to approve a payment of \$2,275,000 from the statutory contingency account to DeMarlo Barry representing compensation for his wrongful conviction. As I said earlier, the 2019 Legislature approved Assembly Bill 267 which provides for the compensation and other properly related matters to certain persons who were wrongfully convicted. The legislation requires a court order to enter a Certification of Innocence and determine the proper amount of the award. A Certificate of Innocence and a stipulation of relief were granted to Mr. Barry by the Eighth Judicial Court. Pursuant to NRS 41.950 the amount of the award is \$2,250,000 plus \$25,000 for attorney's fees. I would just note that the current balance in the statutory contingency account is \$4,447,000. If this item is approved the remaining amount in the account would be \$2.1 million. Are there any questions on this item?

Governor: The question I had is the same and I want to put it on the record. Is there anything that we are doing to provide Mr. Barry with some financial consulting or advising after he gets this check so that he can get the benefit of living off this money? Does the state provide that or is that not part of this?

Attorney General: Mr. Governor, Aaron Ford here. I don't recall the statute actually requiring that type of provision, although, I'm pretty confident that he's been advised by probably his own lawyers but certainly those of us engaged with him as I have been over the course of time of the importance of trying to engage someone to help with the financial advice perspective.

Governor: We've got his attorney on the phone. Has he been advised as it relates to this money?

Amelia Green: Hi. This is Amelia Green. I'm DeMarlo Barry's lawyer. He does have a private financial advisor. I don't think anything has been provided by the state but, yes, he has retained a private financial advisor.

Governor: Okay. Thank you. I appreciate that, because obviously, well deserving of the money and I want to make sure that it lasts for him. Do we have any questions on item number eight?

Attorney General: I have no questions, Mr. Governor, but I would like to comment after the motion.

Governor: Sure. Secretary Cegavske? Questions?

Secretary of State: Nothing, no.

Governor: Okay. Go ahead, General Ford.

Attorney General: I move approval.

Governor: Okay. Do you want to make a comment before we vote?

Attorney General: Yes, sir. I'd like to say I've been looking forward to voting in favor of this for a long time now. A few years back, I suggested to Steve Wilson that he create a conviction integrity unit. He did that and I had no clue, obviously, at that time that the first person to go through that conviction integrity unit and to be exonerated would be Mr. DeMarlo Barry. I also had no clue that I'd walk up during the middle of a press conference at my building and see him there on the day he had been released and that I'd shake his hand, hug him and congratulate him on being exonerated. And, then fast-forward to last year when the passage of this bill came about and I was able to testify and sit next to him in support of this. I'm so proud of this state for actually stepping up and doing the right thing and that's paying this man for time that obviously he can never get back but of recognizing the exoneration, the importance of this exoneration and the payment of monies to him I think is well past due. I just wanted to say to Mr. Barry, thank you again for being so kind and generous during this time period and I want to apologize again on the behalf of the state for your wrongful conviction.

Governor: Very well said. Thank you, General Ford. We have a motion on the floor for approval. Any discussion? All in favor signify by saying aye. [Ayes around]. Did we get you, Secretary Cegavske?

Secretary of State: You should have. I said yes.

Governor: I'm sorry. Motion passes. Item number nine.

9. Approval of Proposed Contracts (For possible action)

Clerk of the Board: There are 25 contracts in agenda item nine for approval by the Board this morning. Are there any questions on any of these items?

Governor: Does anyone have any questions on the contracts that are before us?

Attorney General: None here.

Governor: Okay. Do I have a motion?

Attorney General: Move approval.

Governor: Okay. We have a motion for approval. Any comments? Seeing none. All in favor signify by saying aye. [Ayes around]. Motion passes. Item number 10, the approval of Work Plan.

10. Approval of Work Plan (For possible action)

Clerk of the Board: There are three Work Plan Summaries in agenda item 10 for approval by the Board this morning. Are there any questions on any of these items?

Governor: I do not have any questions on these items. Anybody else, General Ford, Secretary Cegavske?

Attorney General: None here.

Secretary of State: None.

Governor: Do I have a motion on item number 10?

Attorney General: I move approval.

Governor: We have a motion for approval. Any discussion on the motion? Seeing none. All in favor signify by saying aye. [Ayes around]. Motion passes. Item number 11, Approval of Proposed Master Service Agreements.

11. Approval of Proposed Master Service Agreements (For possible action)

Clerk of the Board: There are four Master Service Agreements in agenda item 11 for approval by this Board this morning. Are there any questions on any of these items?

Governor: I do not have any questions on these items. Again, thank you for the briefing. Any questions?

Attorney General: None here.

Governor: Do I have a motion?

Attorney General: Move approval.

Governor: We have a motion for approval. Any discussion? Seeing none. All in favor signify by saying aye. [Ayes around]. Motion passes. Item number 12, Information Item - Clerk of the Board Contracts.

12. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from June 23, 2020 through July 20, 2020.

Clerk of the Board: There were 52 contracts under the \$50,000 threshold approved by the Clerk between June 23, 2020 and July 20, 2020. Are there any questions on any of these items?

Governor: I do not have any questions on those. Does anybody have any questions on these contracts?

Attorney General: Not I.

Secretary of State: None.

Governor: Okay. That's an information item. Item number 13, Information Item Reports. Department of Conservation and Natural Resources, State Lands.

13. Information Item Reports

A. Department of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS 321.5954, Subsection 4, the State Land Registrar is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. Pursuant to Chapter 355, Statutes of Nevada, 1993, on page 1153, the agency is to report quarterly on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program. This submittal reports on program activities for the 4th quarter of Fiscal Year 2020.

B. Department of Motor Vehicles – Complete Streets

Pursuant to NRS 482.1825, Subsection 2, the Department of Motor Vehicles shall certify to the State Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents and that the money has been distributed as provided in statute. This is the third quarter of State Fiscal Year 2020 report for the period beginning January 1, 2020 and ending March 31, 2020.

Pursuant to NRS 482.1825, Subsection 2, the Department of Motor Vehicles shall certify to the State Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agent, and that the money has been distributed as provided in statute. This is the fourth quarter of State Fiscal Year 2020 report for the period beginning April 1, 2020 and ending June 30, 2020.

Clerk of the Board: There are two informational reports under this item. The first is an informational report regarding lands or interests in lands transferred, sold, exchanged or leased under the Tahoe Basin Act Program as well as a quarterly report on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program which are required pursuant to NRS 321.5954 and Chapter 355, Statutes of Nevada, 1993 respectively. This report is for the quarter ending June 30, 2020. There were no acquisitions of land during this quarter. There were two transactions under the Lake Tahoe Mitigation Program resulting in 1,436 square feet of restored land coverage and an increase of \$6,042 for the Nevada Land Bank. Are there any questions on that?

Governor: No questions on the Division of State Lands.

Clerk of the Board: Okay.

Governor: Department of Motor Vehicles, Complete Streets.

Clerk of the Board: The second item is a report from the Department of Motor Vehicles on the voluntary contributions collected by a county pursuant to NRS 482.480 or the Complete Streets program, for the period January 1, 2020 through March 31, 2020.

During the 3rd quarter, the Department collected \$86,108.51 compared to \$89,186 in the same period last year and \$78,314 in the previous quarter. Of the amount collected, approximately 78.6% was from Clark County, 15.73% from Washoe County, 3% from Carson City and about 2.6% from Douglas County. After deducting the 1% to administer the collection and distribution of contributions, the department distributed \$85,247.42 for this quarter. Approximately 12.2% of those registering a vehicle during the quarter contributed to the Complete Streets Program ranging from 9.78% in Douglas County to 15.28% in Clark County. Are there any questions on this item?

Governor: Any questions on Complete Streets?

Attorney General: None here.

Governor: None here. Thank you. That's another information item. Moving on, item number 14 is public comments the second time.

14. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

Governor: Is there anyone wishing to address the Board on any item, either on the phone or in writing? Do we have anyone up north?

Clerk of the Board: We do not.

Governor: Nobody on the phone? Do we have anybody on the phone? You guys are all muted, I think. I'm assuming you have nobody for public comment then.

Clerk of the Board: We don't have anybody for public comment.

Governor: Okay. Now I hear you. Thank you. Okay.

15. Adjournment (For possible action)

Governor: Item number 15 is adjournment. Do I have a motion to adjourn?

Attorney General: So moved.

Governor: We have a motion on the floor. Any discussion? All in favor signify by saying aye. [Ayes around]. Motion passes. We are adjourned. Thank you all.

Attorney General: Thanks, everybody.

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 11, 2020

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Shauna Tilley, Executive Branch Budget Officer
Governor's Finance Office *ST*

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

DEPARTMENT OF ADMINISTRATION – PURCHASING DIVISION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Brian Bracken to perform administrative duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Additional Information:

Mr. Bracken retired from the Department of Employment, Training and Rehabilitation (DETR) as Business Process Analyst 3 on August 6, 2019. His skills and experience are needed to implement the Pandemic Unemployment Assistance (PUA) program as created by the Coronavirus Aid, Relief, and Economic Security (CARES) Act related to unemployment insurance benefits for DETR. The Department contracted with him under the emergency provision of NRS 333.705 (4) from May 25, 2020 through September 25, 2020; this request is for approval to continue his services through June 30, 2021.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: *[Signature]*
ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

August 11, 2020

MEMORANDUM

To: Shauna Tilley

From: Annette Morfin, Purchasing Officer

Subject: CETS Contract 18404 – HAT LTD Partnership dba Manpower.
RFP 3296 – Temporary Employment Services

Please find attached a copy of the "Authorization to Contract with a Former Employee" for Brian Bracken who Manpower wants to hire. This needs to go to the September BOE.

Brian Bracken recently left state service and is within the two (2) year window. He is currently receiving benefits from PERS.

If you have any questions, please contact me at 684-0185 or amorfin@admin.nv.gov



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Former Employee

Employee Information				
Former Employee Name:	Brian Bracken			
Former Employee ID Number:	12612			
Former Job Title:	BP AIII,			
Former Employee Agency:	DETR			
Former Class and Grade:	Class:	7.655	Grade:	38-10
Former Employment Dates:	From:	02/21/1995	To:	08/05/2019
Requesting Agency:	DETR			
Vendor:	ManPower			

Please mark which of the following applies and complete Sections 'A' through 'M' below:

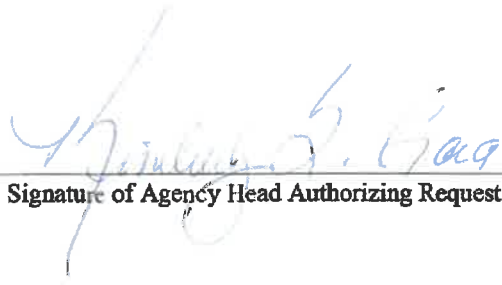
	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
	Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
A	Summarize scope of contract work. The position was needed to provide leadership, coordination, and direction necessary for development and implementation of the federally mandated Pandemic Unemployment Assistance Program (PUA) enacted by law (CARES Act). Additionally, the contractor is responsible for ensuring achievement of mandated program goals and objectives pursuant to CARES Act requirements.
B	Document former job description. Business Process Analysts apply an in-depth knowledge of the agency's program areas to define and implement solution to a given problem that requires an individually tailored response for end-user requirements. Analyze business processes by maintaining documentation of agency business processes, developing procedural alternatives in the absence of properly operating software, identifying work processes that may be automated, researching and evaluating computer hardware and software needs, defining potential benefits of proposed system or deficiencies to be corrected in the existing system, proposing business process improvements, and defining and documenting data definitions and relationships to be used in the foundation of systems development.

	<p>Develop requirements by participating in agency program planning; determining business function and end-user requirements through consultation with end-users, technicians, vendors, management, and others; conducting detailed alternative analyses; developing written requirements for proposed systems and applications; writing technical requirements for grant proposals as required; and preparing documentation for the computer system manual.</p> <p>Monitor financial aspects of system development by participating in recommending and justifying resource allocations and expenditure decisions, participating in budgeting, preparing purchase requests, tracking and recording expenditures, and tracking project progress and costs.</p> <p>Test systems functionality by preparing test plans and participating in quality assurance.</p> <p>Monitor system implementation by participating in procedure development and evaluation, preparing end user procedures, devising and implementing procedure modifications, developing transition plans, developing training material, and participating in training development and presentation for a variety of agency programs and applications.</p>
C	<p>Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?</p> <p>Yes, the contractor has 25 years of experience in the Nevada UI Program which included 10 years of experience in management level positions with oversight responsibilities for program operations. Former titles with the agency were ESD Manager II, ESD Manager III, ESD Program Chief, Appeals Chief, BPA III.</p>
D	<p>Explain why existing State employees within your agency cannot perform this function.</p> <p>This position type has never existed and is essential to administering the Federal PUA program. Mr. Bracken has been involved in the upper layers of the PUA program since its inception in March. Since then he has been involved in all layers and has the most understanding of the program along with the best fitting credentials to ensure the success of the PUA program.</p>
E	<p>Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.</p> <p>N/A</p>
F	<p>List contractors' hourly rate.</p> <p>\$52.61</p>
G	<p>List the range of comparable State employee rates.</p> <p>\$34.90 - \$52.61</p>
H	<p>Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result?</p> <p>N/A</p>
I	<p>Document justification for hiring contractor.</p> <p>Position is only needed temporarily.</p>
J	<p>Will the employee be collecting PERS at any time during the contract?</p> <p>Yes</p>
K	<p>What is the duration of the contract with the former employee? (Include start and end date)</p>

	9/26/2020 – 06/30/2021
L	Will the former employee be working full time or part time? If part time, how many hours?
	Full-time, 40 plus hours per week
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No

Comments – Provide any additional comments:

Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request

8/11/2020

Date

Purchasing Administrator Signature (if a Statewide Contract)

Date

Budget Analyst Signature

Date

Clerk of the Board of Examiners Signature

Date


Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request Date



Purchasing Administrator Signature (if a Statewide Contract) Date



Budget Analyst Signature Date

Clerk of the Board of Examiners Signature Date



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 20, 2020

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: David Lenzner, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

**DEPARTMENT OF ADMINISTRATION
DIVISION OF ENTERPRISE INFORMATION TECHNOLOGY SERVICES**

Agenda Item Write-up:

The Department of Administration, Division of Enterprise Information Technology Services, seeks approval for the seventh amendment to the existing master lease agreement with International Business Machines. This amendment extends the termination date from May 31, 2022 to September 30, 2023 and increases the maximum amount from \$12,045,136.35 to \$12,244,220.35 due to the purchase/lease of hardware and software for the mainframe server.

Additional Information:

This service controls web traffic and ensures that security and maintenance requirements are met. The state runs the risk of not being able to provide adequate or secure state mainframe infrastructure without these services.

Statutory Authority:

Relates to CETS contract #18409 (A7).

REVIEWED: _____

ACTION ITEM: _____

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18409**Amendment
Number: **7**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Legal Entity
Name: **INTERNATIONAL BUSINESS MCHNS**Agency Code: **180**Contractor Name: **INTERNATIONAL BUSINESS MCHNS**Appropriation Unit: **1385-27**Address: **CORP DBA IBM CORPORATION**Is budget authority
available?: **Yes****PO BOX 534151 LOCKBOX 534151**If "No" please explain: **Not Applicable**City/State/Zip **ATLANTA, GA 30353-4151**Contact/Phone: **John Stransky 702-612-3684**Vendor No.: **PUR0000395E**NV Business ID: **NV2031004664**To what State Fiscal Year(s) will the contract be charged? **2017-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % **X** Fees **100.00 % USER**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **2338051**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **02/14/2017**
Examiner's approval?Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **05/31/2022**

Termination Date:

Contract term: **6 years and 228 days**4. Type of contract: **Lease/Purchase Agreement**Contract description: **Mainframe Storage**

5. Purpose of contract:

This is the 7th amendment to the master lease agreement which provides IBM Mainframe storage Equipment required to upgrade the IBM FlashSystem 5000 Refresh. This amendment extends the termination date from May 31, 2022 to September 30, 2023 and increases the maximum amount from \$12,045,136.35 to \$12,244,220.35 due to the purchase/lease of hardware and software for the mainframe server.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$91,035.77	\$91,035.77	\$91,035.77	Yes - Action
a. Amendment 1:	-\$973.17	-\$973.17	-\$973.17	No
b. Amendment 2:	\$934,904.58	\$933,931.41	\$933,931.41	Yes - Action
c. Amendment 3:	\$9,234,996.00	\$9,234,996.00	\$9,234,996.00	Yes - Action
d. Amendment 4:	\$165,951.36	\$165,951.36	\$165,951.36	Yes - Action
e. Amendment 5:	\$1,291,761.76	\$1,291,761.76	\$1,291,761.76	Yes - Action
f. Amendment 6:	\$327,460.05	\$327,460.05	\$327,460.05	Yes - Action
2. Amount of current amendment (#7):	\$199,084.00	\$199,084.00	\$199,084.00	Yes - Action
3. New maximum contract amount:	\$12,244,220.35			

II. JUSTIFICATION

7. What conditions require that this work be done?

The current equipment will not fulfill the requirements of the IRS audit of Health and Human Services which requires that all data leaving the State IBM mainframe via Wide Area Network (WAN) or Local Area Network (LAN) be encrypted by October 1, 2013, a deadline established by Obama Healthcare for data at rest to be stored.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of expertise.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 170102

Approval Date: 01/25/2017

c. Why was this contractor chosen in preference to other?

WSCA contract terms have been competitively bid and the operating lease terms are better than the contract WSCA prices, the competitive bid is not necessary.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

2013 to current, DOA - Enterprise IT Services, satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	08/07/2020 13:55:02 PM
Division Approval	ddav12	08/07/2020 13:55:11 PM
Department Approval	ddav12	08/07/2020 13:55:21 PM
Contract Manager Approval	ddav12	08/07/2020 13:55:32 PM

AMENDMENT No. 7 to MASTER LEASE AGREEMENT BETWEEN THE
STATE OF NEVADA
and IBM CREDIT LLC

1. AMENDMENTS. For and in consideration of mutual promises and other valuable consideration, all provisions of the original Master Lease Agreement No. **067808063G**, with an effective date as of **March 2017**, attached hereto as Exhibit A, remain in full force and effect with adding the following documents:

Exhibit 1, consisting of IBM Credit LLC Lease/Purchase Supplement No. 078646, together with IBM Credit LLC Certificate of Acceptance No. 078646001, IBM Credit LLC Lessee's Certificate and IBM Credit LLC Lease Payment Schedule, for prepaid maintenance and software for Carson City as described therein; and

Exhibit 2, consisting of IBM Credit LLC Lease/Purchase Supplement No. 078644, together with IBM Credit LLC Certificate of Acceptance No. 078644001, IBM Credit LLC Lessee's Certificate and IBM Credit LLC Lease Payment Schedule, for prepaid maintenance and software for Las Vegas as described therein; and

Exhibit 3, consisting of IBM Credit LLC Master Lease Agreement Schedule No. 078646, together with IBM Credit LLC Certificate of Acceptance No. 07864001, for one 2072 3H4 5030 SFF Control and one 2072 24G 5000 SFF Expansion Carson City as described therein; and

Exhibit 4, consisting of IBM Credit LLC Master Lease Agreement Schedule No. 078644, together with IBM Credit LLC Certificate of Acceptance No. 078644001, for one 2072 3H4 5030 SFF Control and one 2072 24G 5000 SFF Expansion for Las Vegas as described therein; and

2. INCORPORATED DOCUMENTS. Exhibit A (Master Lease Agreement, including previous amendments) is attached hereto, incorporated by reference herein and made a part of this amended contract.

3. REQUIRED APPROVAL. This amendment to the original Master Lease Agreement shall not become effective until and unless approved by the Nevada State Board of Examiners.

Lessee/Borrower Name ("Client") and Address:
STATE OF NEVADA
575 E THIRD ST
ENTERPRISE INFO TECH SERVICE
CARSON CITY NV 89701-4763

Lessor Name and Address:
IBM Credit LLC
7100 Highlands Parkway
Smyrna, GA 30082
est@br.ibm.com

The Client certifies and agrees that the information contained in the following table(s) is correct and relates to item(s) leased or financed under the terms and conditions of the above referenced Schedule/Agreement with IBM Credit LLC.

Client Reference:
Payment Period: Monthly
Payment Type: Advance

Lease(s)		
Qty.	Product Description	Initial Payment Term (months)
1	2072 3H4 5030 SFF Control	36
1	2072 24G 5000 SFF Expansion	36

Client represents and certifies that the item(s) listed in the above table(s) are in compliance with Client's specifications ("Accepted Item(s)"). Client hereby accepts the Accepted Item(s) listed in the above table(s) on the Acceptance Date and authorizes IBM Credit LLC to make payments to the Supplier(s) for the Supplier's Invoice(s) for the Accepted Item(s) and to commence the leasing or financing of these Accepted Item(s) under the Schedule/Agreement.

Since this Certificate of Acceptance ("COA") is being issued prior to Lessor's receipt of an invoice, Lessor, upon its receipt of this COA duly executed by Lessee and the Supplier's invoice, will either issue i) a confirmation document in order to confirm Lessor's acceptance of the COA or ii) an updated COA which requires Lessee's signature in order to confirm any changes. In order for IBM Credit LLC to make payment to your listed Suppliers, all Equipment must include serial number information. Accordingly, Client hereby authorizes IBM Credit LLC to complete or update any manufacturer serial number information for any Accepted Item(s) accepted, without Client's further action or consent.

Capitalized terms not otherwise defined herein shall have the meanings ascribed to them in the Agreement referenced in the Schedule listed above.

This COA may be sent to Client by IBM Credit LLC in soft copy format, such as a PDF file. Client represents and warrants that no changes have been made to the text of this COA, except for IBM Credit LLC authorized alterations to the Product Description (including without limitation, changes to any other information listed on the product information tables herein). If there are any conflicts between the version delivered by IBM Credit LLC to Client and the version delivered by Client to IBM Credit LLC, or if the Supplier's Invoice does not match the information listed on the COA, IBM Credit LLC reserves the right not to accept the transaction and to send a replacement COA to Client. Any copy of this COA made by reliable means (for example photocopy, image or facsimile) shall in all respects be considered equivalent to an original.

For the purposes of the transaction commencement provisions specified in the Agreement referenced in the Schedule listed above, Client hereby represents, warrants and certifies that as of the following date, Client has accepted the Accepted Item(s) listed in the product information tables herein:

_____ ("Acceptance Date" for Accepted Item(s)) REQUIRED FIELD
(MM/DD/YYYY)

Agreed to:
STATE OF NEVADA

By: _____

Authorized signature

Name (type or print): _____

Title (type or print): _____

Date: _____

Agreed to:
STATE OF NEVADA

By: _____

Authorized signature

Name (type or print): _____

Title (type or print): _____

Date: _____

Agreed to:
STATE OF NEVADA

By: _____

Authorized signature

Name (type or print): _____

Title (type or print): _____

Date: _____



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	100802 (20)

200803 (20)

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>EITS</i>		
	<i>Kathleen McLaughlin, Mainframe Systems ITM</i>	<i>(775) 684-4325</i>	<i>kfmclaug@admin.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Sirius Computer Solutions</i>
	Contact Name:	<i>John Stransky</i>
	Complete Address:	<i>10100 Reunion Place, Suite 500, San Antonio, TX 78216</i>
	Telephone Number:	<i>(702) 612-3684</i>
	Email Address:	<i>John.stransky@sirius.com</i>
1b	Vendor Information:	
	Identify Vendor:	<i>IBM Global Financing</i>
	Contact Name:	<i>Jelita Holmes/John Belanger</i>
	Complete Address:	<i>Lockbox 534121, Atlanta, GA 30353</i>
	Telephone Number:	<i>(714) 270-3437/(714) 815-8049</i>
	Email Address:	<i>jelita@us.ibm.com/jrbelanger@us.ibm.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>X</i>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes		No
	Amendment:	#7		
	CETS:	#18409		

*~~200802~~
200803

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	08/01/2017	End Date:

1f	Funding:	
	State Appropriated:	Internal service funds
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

1g	Total Estimated Value of this Service Contract, Amendment or Purchase: \$19.5 mll (over 4 years)	
	AIX Hardware including maintenance/support	\$1.1 million
	Mainframe Hardware including maintenance/support	\$3 million
	Software (including ELA of \$9 million)	\$15 million
	Services implementation/enhancements	\$350,000

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>Purchasing upgrade and/or replacement hardware for the North and South Mainframe enterprise CPU, direct access storage, and virtual tape libraries. Procuring associated installation services required for successfully completing Mainframe hardware upgrades and refreshes. Obtaining ne and replacement IBM Mainframe product software licenses.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>The IBM business model requires customers go through their business partners to purchase their hardware because they do not sell hardware directly to customers. Sirius is a value added reseller whom EITS has a long history collaborating with to provide the State of Nevada hardware equipment refreshes at pricing levels lower than the State Government standard pricing. They have historically and continue provide the EITS datacenter with exceptional customer service. Their technical staff is composed of highly skilled industry experts, who expeditiously respond. When EITS needs assistance resolving problems or requests technical assistance with the EITS Mainframe hardware and software enterprise they are our number one support vehicle.</i>
	<i>The EITS North and South Mainframe enterprise is composed of a highly complex and intricate IBM hardware configuration. To successfully function, the EITS Mainframe hardware configuration must have its Internal software and the EITS specific enterprise configurations correctly co-defined at time of hardware installation. Sirius has worked diligently to comprehensively understand EITS' configuration and learn EITS' operation flow.</i>
	<i>The Mainframe platform's core operating system is IBM's z/OS which can only be purchased either directly from IBM or through an IBM business partner.</i>

#200802 (C)
200803 (C)

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>When service providers provide a proposal for hardware costs the pricing is based with the consideration, they will be completing the entire project including performing the necessary services detailed in their submitted Scope of Work. To educate an outside vendor on the intricacies of EITS' Mainframe hardware enterprise would be exhaustive and counterproductive to business and result in an increase of the overall project cost.</i>
	<i>The operating system for Mainframe technology can only be purchased directly from IBM or from an IBM business partner. Supplemental operating system software products which enhance mainframe functionality are sold by other vendors, yet their pricing is oftentimes greater than IBM's.</i>

5	Were alternative services or commodities evaluated? Check One.	Yes:	No:
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.		
	<i>EITS periodically reevaluates its Mainframe supplemental software seeking the lowest priced equitable products available; however, non-IBM Mainframe products are frequently priced higher than IBM's.</i>		
	b. <u>If not</u> , why were alternatives not evaluated?		
	<i>Over the past six plus years, EITS has built a complex Mainframe enterprise, and Sirius has a comprehensive knowledge of the required purchases specific to upgrading EIT's hardware to keep the enterprise supported and current.</i>		

Purchasing Use Only:

Approval #:

~~200803~~
200803

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.</i>				Yes:	X	No:	
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)			
	08/01/2017	07/31/2021	\$19.5 mil	Over 4 years	170704			
			\$					
			\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>Not using a vendor who comprehensively understands the complexities of the EITS Mainframe enterprise can result in extensive delays, as the other vendor would require being meticulously educated on our hardware configuration. Using a different vendor puts EITS at risk of getting an improperly and/or incompatible hardware solution and a mismatched software operating system. Hardware and software installation delays can potentially place the entire Mainframe Infrastructure at risk for an enterprise-wide cataclysmic failure if the upgrade is not accurately configured and completed before reaching its end-of-life.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>Going outside of the IBM Mainframe hardware and/or software solution would require an entire conversion and replacement of existing Mainframe related CPU's, disk arrays, and virtual tape subsystems. When service providers provide a proposal for hardware costs the pricing is based with the consideration, they will be completing the entire project including performing the necessary services detailed in their submitted Scope of Work. Sirius continues to negotiate pricing to a level that is lower than the State of Government standard pricing. Allowing another vendor to complete the Statement of Work services for hardware installations, will most likely result in an overall increase to project cost.</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. <i>If yes, please provide details regarding future obligations or needs.</i> <i>The State will be obligated to purchase future upgrade equipment and operating system software from IBM to replace existing equipment and products, as support will eventually expire. Additionally, the directive for acquiring this type of hardware equipment has been to process via an operating lease.</i>				

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Purchasing Use Only:

Approval #:

~~200802~~ 200802 (2)

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Sean Montierth
Agency Representative Initiating Request

Print Name of Agency Representative Initiating Request

8-20-2020

Date

Signature of Agency Head Authorizing Request

DAVE HAWES ERS Admin
Print Name of Agency Head Authorizing Request

8/24/20

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

* Please include email of 08/21/2020, D. Haws to
Name of agency or entity who provided information or review
K. Doty as an attachment in CETS * (2)

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:

Kevin D. Doty ***
Administrator, Purchasing Division or Designee

8/21/2020

Date

Per the Administrator:
* Agency advised must amend this waiver for all future purchases/work orders, etc. associated with this contract *** (2)
Revised: January 2020

LEASES SUMMARY

BOE #	LESSEE		LESSOR	AMOUNT
1.	DEPARTMENT OF ADMINISTRATION – ENTERPRISE IT SERVICES		CHARLES H. CHESTER PLUMBING AND HEATING, INC.	\$106,560
		This lease is an extension of the existing lease.		
		Term of Lease:	11/01/2020 – 10/31/2025	Located in Elko
2.	DEPARTMENT OF BUSINESS AND INDUSTRY – DIRECTOR'S OFFICE – HOUSING DIVISION		CHARTER OAK PRODUCTION CO., LLC	\$3,170,645
		This is an amendment to the current lease to consolidate the Manufactured Housing Division into the Housing Division.		
		Term of Lease:	04/01/2020 – 11/30/2026	Located in Carson City
3.	DEPARTMENT OF BUSINESS AND INDUSTRY – TAXICAB AUTHORITY		FLAMINGO OAKWOOD, LLC	\$2,222,607
		This lease is an extension of the existing lease.		
		Term of Lease:	01/01/2020 – 07/30/2028	Located in Las Vegas
4.	DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION		HANKE FAMILY TRUST B	\$355,179
		This lease is an extension of the existing lease.		
		Term of Lease:	10/01/2020 – 09/30/2025	Located in Carson City
5.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF WELFARE AND SUPPORTIVE SERVICES		O'FLAHERTY RENTALS, LLC	\$176,993
		This lease is an extension of the existing lease.		
		Term of Lease:	09/01/2020 – 08/31/2025	Located in Ely
6.	DEPARTMENT OF PUBLIC SAFETY – DIVISION OF EMERGENCY MANAGEMENT, HOMELAND SECURITY		THE AMERICAN NATIONAL RED CROSS	\$86,646
		This lease is to store Personal Protective Equipment due to COVID-19. This will be a month to month sub-lease.		
		Term of Lease:	07/29/2020 – 07/31/2020	Located in McCarran
7.	DEPARTMENT OF PUBLIC SAFETY – HIGHWAY PATROL DIVISION		J&J LAND DEVELOPMENT FERNLEY, LLC	\$119,700
		This is a relocation lease to better accommodate the needs of the agency.		
		Term of Lease:	09/07/2020 – 06/30/2025	Located in Fernerly

LEASES SUMMARY

BOE #	LESSEE		LESSOR	AMOUNT
8.	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS – DIVISION OF MUSEUMS AND HISTORY		BARTOSZ INVESTMENTS, LLC	\$135,707
		This lease is an extension of the existing lease.		
		Term of Lease:	10/01/2020 – 09/30/2025	Located in Carson City
9.	NEVADA GAMING CONTROL BOARD		BKM HAC 222, LLC	\$1,288,058
		This lease is an extension of the existing lease.		
		Term of Lease:	06/01/2020 – 05/31/2026	Located in Las Vegas

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	<i>[Signature]</i> 8/17/20
Reviewed by:	<i>[Signature]</i> 8/17/20
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Administration Enterprise IT Services 209 East Musser Street #304 Carson City, Nevada 89701 Patrick Sheehan T: 775.684.5854 E: pmsheehan@admin.nv.gov						
Remarks:	Leasing Services negotiated this five year lease renewal at the current rate for the first year and with a 2% increase in year two and four.						
Exceptions/Special notes:							
2. Name of Lessor:	Charles H. Chester Plumbing and Heating, Inc.						
3. Address of Lessor:	P.O. Box 278 2950 Mountain City Highway Elko, Nevada 89803						
4. Property contact:	Chris J. Johnson T: 775.738.6125 F: 775.738.6954 E: chrisjohnson@frontiernet.net						
5. Address of Lease property:	2950 Mountain City Highway Elko, Nevada 89803						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 1,500						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
Increase %	\$ 1,740.00	12	\$ 20,880.00	November 1, 2020 - October 31, 2021	\$0.00	\$0.00	\$1.16
2%	\$ 1,770.00	12	\$ 21,240.00	November 1, 2021 - October 31, 2022	\$0.00	\$0.00	\$1.18
0%	\$ 1,770.00	12	\$ 21,240.00	November 1, 2022 - October 31, 2023	\$0.00	\$0.00	\$1.18
2%	\$ 1,800.00	12	\$ 21,600.00	November 1, 2023 - October 31, 2024	\$0.00	\$0.00	\$1.20
0%	\$ 1,800.00	12	\$ 21,600.00	November 1, 2024 - October 31, 2025	\$0.00	\$0.00	\$1.20
c. Total Lease Consideration:	60		\$ 106,560.00				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		365	Renewal terms:	One (1) identical term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5%/90		
g. Term:	Five (5) years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input checked="" type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)						
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
l. Comparable Area Market Rate Average:	None available						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1388						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities <input type="checkbox"/> A relocation <input type="checkbox"/> A new location <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

RECEIVED

AUG 17 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET


Authorized Agency Signature

4/25/20
Date


For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV19731002898	Exp:	6/30/2020	3
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input checked="" type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	T28004013			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO


Authorized Signature
Public Works Division

8/14/20
Date

W/z
For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	8/7/20
Reviewed by:	8/8/20
Reviewed by:	

**STATEWIDE LEASE INFORMATION
FIRST AMENDMENT**

RECEIVED

AUG 03 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

1. Agency:

Department of Business and Industry
Director's Office, Housing Division
1830 College Parkway, Suite 100
Carson City, Nevada 89706
Terry Reynolds
T: 775.684.2995 F: 775.687.4040 E: treynolds@business.nv.gov

Remarks:

This lease amendment was negotiated to consolidate the Manufactured Housing Division into the Housing Division.

Exceptions/Special notes:

No Change in Rent or Lease terms

2. Name of Lessor:

Charter Oak Production Co., LLC

3. Address of Lessor:

13929 Quail Pointe Drive
Oklahoma City, OK 73134

4. Property contact:

NAI Alliance
Jennifer Hilderbrand
T: 775.546.2890 F: 775.434.2998 E: JHilderbrand@naialliance.com

5. Address of Lease property:

1830 College Parkway
Carson City, Nevada 89706

a. Square Footage:

<input checked="" type="checkbox"/> Rentable	1,633	Manufactured Housing - Effective April 1, 2020 - November 30, 2020 (\$2,743.44 mo)				
	19,917	B&I - Effective April 1, 2020 - November 30, 2021 (\$34,456.41 mo)				
<input type="checkbox"/> Usable	21,550	Consolidation - Effective December 1, 2020 - November 30, 2026				
cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
\$ 37,199.85	8	\$ 297,598.80	April 1, 2020 - November 30, 2020	0.00	\$0.00	\$1.71
2% \$ 37,928.00	12	\$ 455,136.00	December 1, 2020 - November 30, 2021	0.00	\$0.00	\$1.76
2% \$ 38,790.00	12	\$ 465,480.00	December 1, 2021 - November 30, 2022	0.00	\$0.00	\$1.80
2% \$ 39,436.50	12	\$ 473,238.00	December 1, 2022 - November 30, 2023	0.00	\$0.00	\$1.83
2% \$ 40,298.50	12	\$ 483,582.00	December 1, 2023 - November 30, 2024	0.00	\$0.00	\$1.87
2% \$ 41,160.50	12	\$ 493,926.00	December 1, 2024 - November 30, 2025	0.00	\$0.00	\$1.91
2% \$ 41,807.00	12	\$ 501,684.00	December 1, 2025 - November 30, 2026	0.00	\$0.00	\$1.94

Increase %

c. Total Lease Consideration:

80 \$ 3,170,644.80

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☒ Yes ☐ No 365 Renewal terms: One (1) Identical Term

f. Holdover notice:

of Days required 30 Holdover terms: 5%/90

g. Term:

Amendment to existing lease

h. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

i. Utilities:

☒ Landlord ☐ Tenant

j. Janitorial:

☒ Landlord ☐ Tenant ☐ 3 day ☒ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)

k. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

l. Comparable Area Market Rate Average:

\$1.77

m. Specific termination clause in lease:

Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number:

3838, 3841, 3845, 4865, 4681, 4683

6. This lease constitutes:

- ☐ An extension of an existing lease
- ☐ An addition to current facilities (requires a remark)
- ☐ A relocation (requires a remark)
- ☐ A new location (requires a remark)
- ☐ Remodeling only
- ☒ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

 41-30-20
Authorized Agency Signature Date


For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20171240489	Exp:	4/30/2020	70
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	T29039284			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO


Authorized Signature
Public Works Division

7/13/20
Date

For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	PC 7/23/20
Reviewed by:	7/24/20
Reviewed by:	

STATEWIDE LEASE INFORMATION

RECEIVED

JUL 16 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

1. Agency:

Department of Business and Industry
Taxicab Authority
1830 College Parkway, Suite 100
Carson City, Nevada 89706
Terry Reynolds
T: 775.684.2922 F: 775.668.4001 E: treynolds@business.nv.gov

Remarks:

Leasing Services negotiated a reduction in current rent, creating a savings of \$11,896.20 for the remaining term and extended the lease for an additional seven years.

Exceptions/Special notes:

2. Name of Lessor:

Flamingo Oakwood, LLC

3. Address of Lessor:

1620 South Los Angeles Street, Unit C
Los Angeles, California 90015

4. Property contact:

Newmark Knight Frank
3930 Howard Hughes Parkway, Suite 180
Las Vegas, Nevada 89169
Meaghan Levy
T: 702.405.1703 E: meaghan.levy@ngfk.com

5. Address of Lease property:

2090 East Flamingo Road, Suite 200
Las Vegas, Nevada 89119

a. Square Footage:

☒ Rentable
☐ Usable 11,015

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
\$ 20,377.75	6	\$ 122,266.50	January 1, 2020 - June 30, 2020			\$1.85
0% \$ 20,377.75	12	\$ 244,533.00	July 1, 2020 - June 30, 2021			\$1.85
2% \$ 20,818.35	12	\$ 249,820.20	July 1, 2021 - June 30, 2022			\$1.89
2% \$ 21,258.95	12	\$ 255,107.40	July 1, 2022 - June 30, 2023			\$1.93
2% \$ 21,589.40	12	\$ 259,072.80	July 1, 2023 - June 30, 2024			\$1.96
2% \$ 22,030.00	12	\$ 264,360.00	July 1, 2024 - June 30, 2025			\$2.00
2% \$ 22,470.60	12	\$ 269,647.20	July 1, 2025 - June 30, 2026			\$2.04
2% \$ 23,021.35	12	\$ 276,256.20	July 1, 2026 - June 30, 2027			\$2.09
2% \$ 23,461.95	12	\$ 281,543.40	July 1, 2027 - June 30, 2028			\$2.13

Increase %

lease extension

c. Total Lease Consideration:

102 \$ 2,222,606.70

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☒ Yes ☐ No 365 Renewal terms: One (1) Identical Term

f. Holdover notice:

of Days required 30 Holdover terms: 5%/90

g. Term:

Eight Years (8) Six (6) Months

h. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

i. Utilities:

☒ Landlord ☐ Tenant

j. Janitorial:

☒ Landlord ☐ Tenant ☐ 3 day ☒ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)

k. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

l. Comparable Area Market Rate Average:

\$2.22

m. Specific termination clause in lease:

Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number:

4130

6. This lease constitutes:

- ☒ An extension of an existing lease
☐ An addition to current facilities
☐ A relocation
☐ A new location
☐ Remodeling only
☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes b No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

 4/9/20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20191584461	Exp:	9/30/2020	70
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	T32009072			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

 7/13/20
Authorized Signature Date
Public Works Division

//
For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Laura Freed
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

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JUL 16 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Date: July 15, 2020
To: David Lenzner, Budget Analyst
From: Jennifer Zampanti, Leasing Services
jlzampanti@admin.nv.gov 775-684-1815
Subject: Review and Signatures

Projected BOE Date: September 8, 2020 BOE Deadline Date: August 4, 2020

Lessor: FLAMINGO OAKWOOD, LLC
Tenant: B&I, Taxicab
Property Location: 2080 E Flamingo Rd, Ste 319, Las Vegas

This retroactive lease was negotiated with a rent reduction and extension of an existing lease.

Current cost per square foot is \$1.91, with the new cost at \$1.85 sf. This renegotiation created a savings of \$11,896.20 for the remainder of the existing lease.

LoopNet's current 'grossed-up' advertised average market rate, without improvements, for this area is \$2.22 per square foot.

No State space in Las Vegas is available.

Thank you,

Jennifer Zampanti

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	DBS/5/2020
Reviewed by:	CB 8/11/2020
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Employment, Training and Rehabilitation 500 E. Third Street Carson City, Nevada 89713 Brandon Taylor: (775) 684-3901; Fax: (775) 684-3908; bataylor@detr.nv.gov						
Remarks:	Leasing Services negotiated this lease renewal for an additional five (5) years to include a rate reduction equalling \$3,709.44 savings in the first year.						
Exceptions/Special notes:							
2. Name of Lessor:	Hanke Family Trust B						
3. Address of Lessor:	1008 North Curry Street Carson City, Nevada 89706						
4. Property contact:	Nevada Premier Commercial 1817 North Stewart Street, Suite 35 Carson City, Nevada 89706 Keith Howell T: 775-883-2290 F: 775-883-2289 E: keith@nevadapremierproperties.com						
5. Address of Lease property:	751 Basque Way Carson City, Nevada 89706						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 3,864						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
Increase %	\$ 5,796.00	12	\$ 69,552.00	October 1, 2020 - September 30, 2021	\$0.00	\$0.00	\$1.50
0%	\$ 5,796.00	12	\$ 69,552.00	October 1, 2021 - September 30, 2022	\$0.00	\$0.00	\$1.50
3%	\$ 5,950.56	12	\$ 71,406.72	October 1, 2022 - September 30, 2023	\$0.00	\$0.00	\$1.54
0%	\$ 5,950.56	12	\$ 71,406.72	October 1, 2023 - September 30, 2024	\$0.00	\$0.00	\$1.54
3%	\$ 6,105.12	12	\$ 73,261.44	October 1, 2024 - September 30, 2025	\$0.00	\$0.00	\$1.58
c. Total Lease Consideration:	60		\$ 355,178.88				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		365	Renewal terms:	One (1) identical term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5%/90		
g. Term:	Five (5) years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant		Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
l. Comparable Area Market Rate Average:	Carson City area \$1.73						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3253, 3265, 3268						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities <input type="checkbox"/> A relocation <input type="checkbox"/> A new location <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						

a. Estimated Expenses: Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

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AUG 04 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Kayla B. Desoer 8-4-20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20141498594</u>	Exp:	<u>8/31/2021</u>	12
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>T27035532</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Patrick 8/4/20
Authorized Signature Date

Public Works Division

bm
For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Welfare and Supportive Services 1470 College Parkway Carson City, Nevada 89706 Patrick Smorra Phone: 775-684-0652 Fax: 775-684-0681 Email: pxsmorra@dwss.nv.gov						
Remarks:	This is an extension of an existing lease.						
Exceptions/Special notes:	Lessor to run fiber optic conduit in coordination with NDOT Great Basin Highway replacement at no charge to Tenant. Details to be included in Lease.						
2. Name of Lessor:	O'Flaherty Rentals, LLC						
3. Address of Lessor:	965 Pioche Highway Ely, Nevada 89301						
4. Property contact:	John O'Flaherty 775.289.2801 fax: 775.289.8183 oflahertyph@sbcglobal.net						
5. Address of Lease property:	725 Avenue K Ely, Nevada 89301						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 2,128						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	improvement cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
Increase %	\$ 2,903.19	12	\$ 34,838.28	September 1, 2020 - August 31, 2021	\$0.00	\$0.00	\$1.36
0%	\$ 2,903.19	12	\$ 34,838.28	September 1, 2021 - August 31, 2022	\$0.00	\$0.00	\$1.36
2%	\$ 2,961.25	12	\$ 35,535.00	September 1, 2022 - August 31, 2023	\$0.00	\$0.00	\$1.39
0%	\$ 2,961.25	12	\$ 35,535.00	September 1, 2023 - August 31, 2024	\$0.00	\$0.00	\$1.39
2%	\$ 3,020.48	12	\$ 36,245.76	September 1, 2024 - August 31, 2025	\$0.00	\$0.00	\$1.42
c. Total Lease Consideration:	60		\$ 176,992.32				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		365	Renewal terms:	One identical term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5% / 90		
g. Term:	Five (5) years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input checked="" type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)						
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
l. Comparable Area Market Rate Average:	None Available						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3233						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities <input type="checkbox"/> A relocation <input type="checkbox"/> A new location <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Doc Unit: _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

[Signature]
Authorized Agency Signature

07/13/2020
Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20071746105</u>	Exp:	<u>11/30/2020</u>
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>		
c. Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO
d. Is the Contractor's Name the same as the Legal Entity Name? *If no, please explain in exceptions section	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO
e. Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO
f. Is the Legal Entity active and in good standing with the Nevada Secretary of State's Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>T80692380</u>		
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. We have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. We have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

[Signature]
Authorized Signature
Public Works Division

7/17/20
Date

* For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Laura Freed
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

Date: August 19, 2020

To: Bessie Wooldridge, Budget Analyst

From: Leanne Lima, Public Works Division, Leasing Services
llima@admin.nv.gov 775-684-1824

Subject: For placement on BOE agenda

Projected BOE Date: September 8, 2020

BOE Deadline Date: August 4, 2020

Lessor: O'FLAHERTY RENTALS, LLC
Tenant: Department of Health and Human Services, Division of Welfare and Supportive Services
Property Location: 725 Avenue K, Ely

This lease will be a retroactive with a start date of September 1, 2020.

Leases require signatures from the Lessor, the Tenant (program Administrator and Director), the Attorney General's office, and the Administrator of Public Works prior to submittal and final execution of the lease at the Board of Examiner's meeting. Each signer has their own review process which can cause a delay from the date the lease is prepared, to submission for BOE. If a review from a party takes over two weeks, it will delay the process, COVID-19 protocols may have also delayed the signature process.

There are no comparable rental rates in the area.

No State space is available.

Best Regards,

Leanne Lima

STATEWIDE LEASE INFORMATION

1. Agency:

Department Public Safety
Division of Emergency Management, Homeland Security
2478 Fairview Drive
Carson City, Nevada 89701
Arsenio Escudero
T: 775.687.0304 E: aescudero@dps.state.nv.us

Remarks:

Due to the world wide pandemic of COVID-19, the State of Nevada Emergency Management Division is in need of immediate warehouse space to store Personal Protective Equipment. This lease is a month to month sub-lease.

Exceptions/Special notes:

Department of Public Safety occupied the State owned Purchasing Warehouse in Reno. They needed to be relocated due to the fact that they needed more square footage.

2. Name of Lessor:

The American National Red Cross

3. Address of Lessor:

9450 SW Gemini Drive, #75048
Beaverton, Oregon 97008-7105

4. Property contact:

Cushman/Wakefield
6121 Lakeside Drive, Suite 160
Reno, Nevada 89511
Tony Machabee
T: 775.954.0106 C: 775.848.1594 E: tony.machabee@cushwake.com

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BUDGET DIVISION

5. Address of Lease property:

2555 USA Parkway, Suite 100
McCarran, Nevada 89434

a. Square Footage:

☒ Rentable
☐ Usable 125,875

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Approx. cost per square foot
\$ 7,645.19	3 days	\$ 7,645.19	July 29, 2020 - July 31, 2020	\$0.00	\$0.00	\$0.06
\$ 79,000.00	1	\$ 79,000.00	Month to Month	\$0.00	\$0.00	\$0.63
	1	\$ 86,645.19				

Increase %

c. Total Lease Consideration:

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☐ Yes ☒ No 365 Renewal terms: NA

f. Holdover notice:

of Days required NA Holdover terms: NA

g. Term:

Month to Month not to exceed December 31, 2020

h. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

i. Utilities:

☒ Landlord ☐ Tenant

j. Janitorial:

☒ Landlord ☐ Tenant ☐ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)

k. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

l. Comparable Area Market Rate Average:

\$1.08 for warehouse space in that area

m. Specific termination clause in lease:

Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number:

3602

6. This lease constitutes:

- ☐ An extension of an existing lease
☐ An addition to current facilities
☒ A relocation
☐ A new location
☐ Remodeling only
☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.
 Yes _____ No X Dec Unit WP 509548 52247 BA 3602 is NON Legislative

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

JT. La 8-24-2020
 Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20101352745</u>	Exp:	<u>5/31/2021</u>	7
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>PUR0001957</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Paul Patrick 8/25/20
 Authorized Signature Date
 Public Works Division

bm
 For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Nevada Department of
Public Safety
DEDICATION PRIDE SERVICE

**Division of Emergency Management
Homeland Security**

2478 Fairview Drive
Carson City, Nevada 89701
Telephone (775) 687-0300 / Fax (775) 687-0322
DEM Website – <http://dem.nv.gov>

George Togliatti
Director

Sheri Brueggemann
Deputy Director

Justin Luna
Chief

RECEIVED

AUG 25 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Memorandum

DATE: August 24, 2020
TO: Governor's Finance Office
FROM: Arsenio Escudero, ASO III
SUBJECT: Retroactive Memo- Agreement with The American Red Cross

To Whom It May Concern,

The Department of Public Safety, Division of Emergency Management requests a retroactive agreement between our division and The American Red Cross for the warehouse property at 2555 USA Parkway, Suite 100, Reno, NV 89511. The Division of Emergency Management requests this retroactive agreement in order for us to store Personal Protective Equipment (PPE) and Testing supplies.

To ensure that we can receive and store these supplies for the COVID-19 response, we respectfully request that the agreement be retroactively effective to July 29, 2020. Thank you for your time and consideration on this matter.

Respectfully,

Arsenio Escudero

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	<i>[Signature]</i>
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Public Safety Highway Patrol Division 555 Wright Way Carson City, Nevada 89701 Charlene Boegle T: 775.684.4698 F: 775.684.4809 E: c.boegle@dps.state.nv.us						
Remarks:	Leasing Services was requested to secure a new location to better accommodate the needs of Highway Patrol. NHP has requested to relocate from a mobile office trailer to a retail location with quick access to Interstate 80.						
Exceptions/Special notes:	NHP will be responsible for the contracting of and costs to provide a minimum standard of janitorial services.						
2. Name of Lessor:	J&J Land Development Fernley, LLC						
3. Address of Lessor:	c/o Scolari's Warehouse Markets, Inc. 6880 South McCarran Boulevard Reno, NV 89509						
4. Property contact:	R. Poltl and Associates, Inc. Shopping Center Development, Leasing and Management 1328 Madonna Road San Luis Obispo, California 93405 Randall P. Poltl T: 805.781.9100, ext. 14 F: 805.781.9101 E: randy@rpoltl.com						
5. Address of Lease property:	1380 US Highway 95A North, Suite 2 Fernley, Nevada 89408						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 1,200						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
Increase %	\$ -	24 days	\$ -	September 7, 2020 - September 30, 2020	\$0.00	\$0.00	\$0.00
	\$ 2,100.00	9	\$ 18,900.00	October 1, 2020 - June 30, 2021	\$0.00	\$0.00	\$1.75
0%	\$ 2,100.00	12	\$ 25,200.00	July 1, 2021 - June 30, 2022	\$0.00	\$0.00	\$1.75
0%	\$ 2,100.00	12	\$ 25,200.00	July 1, 2022 - June 30, 2023	\$0.00	\$0.00	\$1.75
0%	\$ 2,100.00	12	\$ 25,200.00	July 1, 2023 - June 30, 2024	\$0.00	\$0.00	\$1.75
0%	\$ 2,100.00	12	\$ 25,200.00	July 1, 2024 - June 30, 2025	\$0.00	\$0.00	\$1.75
c. Total Lease Consideration:	57		\$ 119,700.00				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		365	Renewal terms:	One (1) pre-negotiated term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5% / 90		
g. Term:	Five (5) years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant		<input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day	<input checked="" type="checkbox"/> Other (see special notes)			
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant		Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
l. Comparable Area Market Rate Average:	\$1.96						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	4713						
6. This lease constitutes:	<input type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities <input checked="" type="checkbox"/> A relocation <input type="checkbox"/> A new location <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$TBD		Furnishings: \$TBD		Data/Phones: \$TBD		

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JUL 16 2020
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

L. Hartman 6/13/20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20051409894	Exp:	6/30/2020	8
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	T80906937			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

[Signature]
Authorized Signature
Public Works Division

7/13/20
Date

//

For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Nevada Department of
Public Safety
Office of Traffic Safety

George Togliatti
Director

Sheri Brueggemann
Deputy Director

Amy Davey
Administrator

107 Jacobsen Way
Carson City, Nevada 89711-0525
Telephone (775) 684-7470 Fax (775) 684 7482

MEMORANDUM

DATE: August 19, 2020

TO: Susan Brown, Director, Governor's Finance Office

THRU: Jim Rodriguez, Executive Branch Budget Officer, Governor's Finance Office

FROM: Curtis Palmer, DPS Fiscal Manager

RE: Retroactive Lease

Attached is a lease renewal between the Department of Public Safety (DPS), Highway Patrol (NHP) and J & J Land Development Fernley, LLC, for which we are requesting retroactive approval. This lease begins on September 7, 2020 and will be placed on the September 8, 2020 B.O.E. agenda.

Due to negotiation delays, the lease was unable to be signed and delivered to the G.F.O. office prior to the September 2020 B.O.E. deadline. The lease is currently slated to be placed on the September 2020 B.O.E. agenda.

Your consideration in approval of this lease is greatly appreciated. Please contact me if you have questions or if I can be of any assistance.

Sincerely,

A handwritten signature in blue ink, appearing to read "Curtis Palmer".

Curtis Palmer
ASO IV, Fiscal Manager

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	<i>[Signature]</i> 7/24/20
Reviewed by:	<i>[Signature]</i> 7/29/20
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:

Department of Tourism and Cultural Affairs
Division of Museums and History
401 North Carson Street
Carson City, Nevada 89701
Carrie Edlefsen
T: 775.687.7340 Ext. 302 F: 775.687.4333 E: cedlefsen@nevadaculture.org

Remarks:

This is a renewal of a current lease. The Lessor agreed to reduce the rate, which created a savings of \$695.04 in the first year.

Exceptions/Special notes:

2. Name of Lessor:

Bartosz Investments, LLC

3. Address of Lessor:

3 Canyon Drive
Carson City, Nevada 89703

4. Property contact:

David Bartosz
T: 775.883.2792 C: 775.232.1906 E: Bartoszcont@ymail.com

5. Address of Lease property:

412 East Musser Street, Suite 2
Carson City, Nevada 89701

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JUL 20 2020

**GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION**

a. Square Footage:

☒ Rentable

☐ Usable 1,448

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
\$ 2,143.04	12	\$ 25,716.48	October 1, 2020 - September 30, 2021	\$0.00	\$0.00	\$1.48
3% \$ 2,200.96	12	\$ 26,411.52	October 1, 2021 - September 30, 2022	\$0.00	\$0.00	\$1.52
3% \$ 2,258.88	12	\$ 27,106.56	October 1, 2022 - September 30, 2023	\$0.00	\$0.00	\$1.56
3% \$ 2,316.80	12	\$ 27,801.60	October 1, 2023 - September 30, 2024	\$0.00	\$0.00	\$1.60
3% \$ 2,389.20	12	\$ 28,670.40	October 1, 2024 - September 30, 2025	\$0.00	\$0.00	\$1.65

Increase %

c. Total Lease Consideration:

60 \$ 135,706.56

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☒ Yes ☐ No 365 Renewal terms: One (1) identical term

f. Holdover notice:

of Days required 30 Holdover terms: 5%/90

g. Term:

Five (5) years

h. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

i. Utilities:

☒ Landlord ☐ Tenant

j. Janitorial:

☒ Landlord ☐ Tenant ☒ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)

k. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

l. Comparable Area Market Rate Average:

\$1.73

m. Specific termination clause in lease:

Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number:

2941

6. This lease constitutes:

- ☒ An extension of an existing lease
☐ An addition to current facilities
☐ A relocation
☐ A new location
☐ Remodeling only
☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

 7-16-20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20091447715	Exp:	9/30/2020	4
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES			<input checked="" type="checkbox"/> NO
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	T32003852			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

 7/16/20
Authorized Signature Date
Public Works Division

 For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	LA 7/23/20
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:

Nevada Gaming Control Board
1919 College Parkway
Carson City, Nevada 89706
Mary Ashley
T: 775.684.7701 F: 775.684.5817 E: mashley@gcb.nv.gov

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JUL 18 2020

Remarks:

Leasing Services negotiated this renewal of an existing lease.

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Exceptions/Special notes:

2. Name of Lessor:

BKM HAC 222, LLC

3. Address of Lessor:

c/o BKM Management Company
1701 Quail Street, Suite 100
Newport Beach, California 92660
Attention: Regional Asset Manager

4. Property contact:

BKM Management Company
680 Pilot Road, Suite B-2
Las Vegas, Nevada 89119
Christine Overbay
T: 702.273.3612 E: coverbay@bkmmgmt.com

5. Address of Lease property:

750 Pilot Road, Suite I
Las Vegas, Nevada 89119

a. Square Footage:

☒ Rentable

☐ Usable 8,791

b. Cost:

	cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
Increase %	\$ 16,966.63	12	\$ 203,599.56	June 1, 2020 - May 31, 2021	\$0.00	\$0.00	\$1.93
3.6%	\$ 17,582.00	12	\$ 210,984.00	June 1, 2021 - May 31, 2022	\$0.00	\$0.00	\$2.00
0%	\$ 17,582.00	12	\$ 210,984.00	June 1, 2022 - May 31, 2023	\$0.00	\$0.00	\$2.00
3.5%	\$ 18,197.37	12	\$ 218,368.44	June 1, 2023 - May 31, 2024	\$0.00	\$0.00	\$2.07
0%	\$ 18,197.37	12	\$ 218,368.44	June 1, 2024 - May 31, 2025	\$0.00	\$0.00	\$2.07
3.4%	\$ 18,812.74	12	\$ 225,752.88	June 1, 2025 - May 31, 2026	\$0.00	\$0.00	\$2.14

c. Total Lease Consideration:

72 \$ 1,288,057.32

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☒ Yes ☐ No 365 Renewal terms: One (1) identical term

f. Holdover notice:

of Days required 30 Holdover terms: 5%/90

g. Term:

Six (6) Years

h. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

i. Utilities:

☒ Landlord ☐ Tenant

j. Janitorial:

☒ Landlord ☐ Tenant ☐ 3 day ☒ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)

k. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

l. Comparable Area Market Rate Average:

\$2.22

m. Specific termination clause in lease:

Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number:

4061

6. This lease constitutes:

- ☒ An extension of an existing lease
☐ An addition to current facilities
☐ A relocation
☐ A new location
☐ Remodeling only
☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Mary Ashley 07/08/20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20181037775</u>	Exp:	<u>1/31/2021</u>	24
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	<u>T27042134</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	

8. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

W. David Patrick 7/13/20
Authorized Signature Date
Public Works Division

//
For Board of Examiners ☒ YES ☐ NO

RETRO MEMO

Date: July 23, 2020

To: Lynnette Aaron, Executive Branch Budget Officer 2
Governor's Finance Office
209 E Musser St, Room 200
Carson City, NV 89701

From: Jaime Black, Chief of Administration
Gaming Control Board
1919 College Parkway
Carson City, NV 89706

Pursuant to the lease agreement between the Nevada Gaming Control Board (Board) and BKM Management Company, the Board is asking to have the approval of the lease be retroactive, dating back to the June 1, 2020 start date as listed on the lease. The late submittal of this lease was due to questions and difficulties in negotiating terms and timeframes for all parties involved.

Thank you,

A handwritten signature in black ink, appearing to read 'J. Black', with a stylized, cursive script.

Jaime Black

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	MCDONALD CARANO WILSON, LLP	OTHER: STATUTORY CONTINGENCY FUNDS	\$329,325	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides services for outside counsel for case number A-19-787004-B. This amendment extends the termination date from December 30, 2020 to December 31, 2021 and increases the maximum amount from \$85,000 to \$414,325 due to the addition of services through post-trial representation in the scope of work.				
		Term of Contract:	02/21/2020 - 12/31/2021	Contract # 23083		
2.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	SOROKAC LAW OFFICE, PLLC DBA REISMAN SOROKAC	GENERAL	\$17,850	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides outside counsel for representation in conjunction with deposition preparation, deposition attendance and response to request for records related to an employee of the Department of Taxation. This amendment increases the maximum amount from \$42,500 to \$60,350 due to the continued need for these services.				
		Term of Contract:	10/01/2019 - 12/31/2020	Contract # 22537		
3.	030	ATTORNEY GENERAL'S OFFICE - SPECIAL LITIGATION FUND	ADAMS NATURAL RESOURCES	GENERAL	\$120,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides ongoing outside legal and consulting services in support of the Attorney General's Yucca Mountain legal efforts. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$120,000 to \$240,000 due to ongoing litigation.				
		Term of Contract:	10/01/2019 - 09/30/2021	Contract # 22253		
4.	050	TREASURER'S OFFICE - STATE TREASURER	BUCKHEAD CAPITAL MANAGEMENT, LLC	OTHER: INVESTMENT EARNINGS	\$1,044,000	
	Contract Description:	This is a new contract to provide investment management services for securitized assets in the State General Portfolio - Core which must be invested in accordance with NRS Chapter 355.				
		Term of Contract:	10/01/2020 - 06/30/2024	Contract # 23159		
5.	050	TREASURER'S OFFICE - STATE TREASURER	WESTERN ASSET MANAGEMENT COMPANY, LLC	OTHER: INVESTMENT EARNINGS	\$2,000,000	
	Contract Description:	This is a new contract to provide investment management services for corporate assets in the State General Portfolio - Core which must be invested in accordance with NRS Chapter 355.				
		Term of Contract:	10/01/2020 - 06/30/2024	Contract # 23170		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	CHEMA AQUA, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$69,277	
	Contract Description:	This is a new contract to provide chemical water treatment to protect heating, ventilation and air conditioning equipment for facilities in southern Nevada.				
		Term of Contract:	09/01/2020 - 08/31/2024	Contract # 23341		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	DEL SOL LANDSCAPE CONSTRUCTION, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$150,000	
	Contract Description:	This is a new contract to provide landscaping services for the Department of Motor Vehicles Flamingo location.				
		Term of Contract:	Upon Approval - 08/31/2024	Contract # 23395		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	DEL SOL LANDSCAPE CONSTRUCTION, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$190,000	
	Contract Description:	This is a new contract to provide landscaping services for the Department of Motor Vehicles Sahara location.				
		Term of Contract:	Upon Approval - 08/31/2024	Contract # 23396		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	DEL SOL LANDSCAPE CONSTRUCTION, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$265,000	
	Contract Description:	This is a new contract to provide landscaping services for the Grant Sawyer Building.				
		Term of Contract:	Upon Approval - 08/31/2024	Contract # 23397		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	ARCHITECTS + LLC	GENERAL	(\$163,500)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Division of Forestry Advance Planning - Elko Heavy Equipment Shop & Renovation CIP project, to include design through construction documents for a new heavy equipment repair and fabrication shop: CIP Project No. 19-P08; SPWD Contract No. 113234. This amendment decreases the maximum amount from \$213,800 to \$50,300 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.				
		Term of Contract:	02/11/2020 - 06/30/2023	Contract # 22710		
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	BLAKELY JOHNSON & GHUSN, INC. DBA BJG ARCHITECTURE & ENGINEERING	GENERAL 92% OTHER: 8%	(\$241,800)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Great Basin College - Welding Lab Expansion Advance Planning CIP project, to include design through construction documents for a new 4,000 square foot welding lab addition and renovation of the existing welding shop: CIP Project No. 19-P70; SPWD Contract No.113233. This amendment decreases the maximum amount from \$310,000 to \$68,200 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.				
		Term of Contract:	02/11/2020 - 06/30/2023	Contract # 22709		
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	CORE CONSTRUCTION SERVICES OF NEVADA, INC.	GENERAL	(\$236,060)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Grant Sawyer Office Building Remodel CIP project, to include design construction and bid documents to provide advance planning through construction documents for the remodel of the interior spaces of the Grant Sawyer building in Las Vegas: CIP Project No. 19-P01; SPWD Contract No. 113359. This amendment decreases the maximum amount from \$295,075 to \$59,015 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.				
		Term of Contract:	04/14/2020 - 06/30/2023	Contract # 22927		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	KITTRELL GARLOCK & ASSOCIATES	GENERAL	(\$3,720,000)	
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Grant Sawyer Office Building Remodel CIP project to include advance planning through construction documents to remodel the interior spaces of the Grant Sawyer Office Building: CIP Project No. 19-P01; Contract No. 113077. This amendment decreases the maximum amount from \$4,612,500 to \$892,500 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.				
	Term of Contract:	12/10/2019 - 06/30/2023	Contract # 22586			
14.	111	DEPARTMENT OF INDIGENT DEFENSE SERVICES	PS TECHNOLOGIES, INC.	GENERAL	\$104,425	Sole Source
	Contract Description:	This is a new contract to provide a data collection platform for uniform reporting by indigent defense providers in rural counties.				
	Term of Contract:	Upon Approval - 12/31/2021	Contract # 23485			
15.	111	DEPARTMENT OF INDIGENT DEFENSE SERVICES	SOVAL SOLUTIONS, LLC	GENERAL	\$51,040	
	Contract Description:	This is a new contract to provide analysis, development and evaluation of data.				
	Term of Contract:	Upon Approval - 06/30/2021	Contract # 23441			
16.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	ROBERT F. NYCEK	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	\$117,960	Sole Source
	Contract Description:	This is a new contract to provide ongoing chaplain services.				
	Term of Contract:	08/01/2020 - 07/31/2024	Contract # 23406			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
17.	300	DEPARTMENT OF EDUCATION - EDUCATOR EFFECTIVENESS	TEACHERS HEALTH TRUST	FEDERAL	\$13,245,513	
	Contract Description:	This is a new contract to provide COVID-19 testing, outreach and monitoring for Nevada educators.				
		Term of Contract:	Upon Approval - 12/30/2020	Contract # 23534		
18.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - EARLY INTERVENTION SERVICES	UNIVERSITY OF UTAH SCHOOL OF MEDICINE	GENERAL 90% OTHER: INSURANCE 10%	\$133,200	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing physician services including metabolic clinics and function as an on-call consultant for Division staff and Nevada medical providers.				
		Term of Contract:	07/01/2020 - 06/30/2022	Contract # 23470		
19.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	COVENTRY HEALTH CARE OF NEBRASKA, INC.	OTHER: NO COST	\$0	
	Contract Description:	This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.				
		Term of Contract:	01/01/2021 - 12/31/2022	Contract # 23296		
20.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	HEALTH PLAN OF NEVADA, INC.	OTHER: NO COST	\$0	
	Contract Description:	This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.				
		Term of Contract:	01/01/2021 - 12/31/2022	Contract # 23292		
21.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	HMO NEVADA	OTHER: NO COST	\$0	
	Contract Description:	This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.				
		Term of Contract:	01/01/2021 - 12/31/2022	Contract # 23267		
22.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	REGIONAL TRANSPORTATION COMMISSION OF SOUTHERN NEVADA	GENERAL 29.9% FEDERAL 70.1%	\$542,802	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing assessments for paratransit services for eligible Medicaid recipients for non-emergency transportation services in southern Nevada.				
		Term of Contract:	07/01/2020 - 06/30/2021	Contract # 23412		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	SILVERSUMMIT HEALTHPLAN, INC.	OTHER: NO COST	\$0	
	Contract Description:	This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.				
		Term of Contract:	01/01/2021 - 12/31/2022	Contract # 23291		
24.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - LOW-LEVEL RADIOACTIVE WASTE FUND	US ECOLOGY NEVADA, INC.	FEE: HAZARDOUS WASTE BURIAL	\$1,180,550	Sole Source
	Contract Description:	This is a new contract to provide additional soil on top of the existing cap at the closed Beatty Low-Level Radioactive Waste site.				
		Term of Contract:	09/11/2020 - 08/01/2021	Contract # 23408		
25.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - IMMUNIZATION PROGRAM	SAGE PURSUITS, INC. DBA ENVISION TECHNOLOGY PARTNERS	FEDERAL	\$480,000	Sole Source
	Contract Description:	This is a new contract to provide implementation of an approved technology investment for ongoing enhancements to the Nevada WebIZ system.				
		Term of Contract:	Upon Approval - 06/30/2024	Contract # 23425		
26.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - MATERNAL CHILD AND ADOLESCENT HEALTH SERVICES	NEVADA DEPARTMENT OF EDUCATION	FEDERAL	\$69,944	Exempt
	Contract Description:	This is a new interlocal agreement to provide a School Wellness Program Coordinator that will support existing collaborations between Maternal, Child and Adolescent Health and the Nevada Department of Education.				
		Term of Contract:	07/01/2020 - 06/30/2021	Contract # 23163		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
27.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH – RURAL CLINICS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO, DEPARTMENT OF PSYCHIATRY	GENERAL	\$99,235	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing telemedicine services to children, adolescents and outpatient rural clinic clients.				
		Term of Contract:	07/01/2020 - 06/30/2021	Contract # 23342		
28.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES – CHILD SUPPORT ENFORCEMENT PROGRAM	8TH JUDICIAL DISTRICT COURT OF CLARK COUNTY	OTHER: STATE SHARE OF COLLECTIONS 10% FEDERAL 90%	\$304,000	Exempt
	Contract Description:	This is a new interlocal agreement that continues ongoing mediation services, supervised visitation and formulation of parenting plans to include establishment and administrating programs to support and facilitate non-custodial parents' access to and visitation of their children.				
		Term of Contract:	10/01/2020 - 09/30/2024	Contract # 23347		
29.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES – CHILD SUPPORT ENFORCEMENT PROGRAM	MAXIMUS HUMAN SERVICES, INC.	OTHER: STATE SHARE OF COLLECTIONS 34% FEDERAL 66%	\$250,000	Sole Source
	Contract Description:	This is a new contract to provide ongoing web hosting and maintenance of the web based electronic system for the Nevada Child Support Employer Services Center.				
		Term of Contract:	10/01/2020 - 09/30/2022	Contract # 23414		
30.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES – CHILD SUPPORT ENFORCEMENT PROGRAM	WASHOE COUNTY SECOND JUDICIAL DISTRICT COURT	OTHER: STATE SHARE OF COLLECTIONS 10% FEDERAL 90%	\$124,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing mediation services, supervised visitation and formulation of parenting plans to include establishment and administrating programs to support and facilitate non-custodial parents access to and visitation of their children.				
		Term of Contract:	10/01/2020 - 09/30/2024	Contract # 23348		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
31.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	GREENSCAPES OF NEVADA, LLC	GENERAL 66% FEDERAL 34%	\$150,000	
	Contract Description:	This is a new contract to provide ongoing grounds maintenance and landscaping services.				
		Term of Contract:	09/09/2020 - 08/31/2023	Contract # 23230		
32.	440	DEPARTMENT OF CORRECTIONS - OFFENDERS' STORE FUND	FIRST CLASS VENDING, INC.	OTHER: REVENUE	\$336,782	
	Contract Description:	This is the second amendment to the original contract which provides vending machine services at correctional visiting and employee break rooms in southern Nevada. This amendment increases the maximum amount from \$647,935.75 to \$984,718.00 due to an increased need for these services.				
		Term of Contract:	07/01/2016 - 12/31/2020	Contract # 17677		
33.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	SCROLL K VAAD HAKASHRUS OF DENVER	GENERAL	\$108,456	Sole Source
	Contract Description:	This is the third amendment to the original contract which provide ongoing kosher certification of Common Fare kitchens and rabbinical supervision of kosher food preparation at the department facilities. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$420,938 to \$529,394 due to the continued need for these services.				
		Term of Contract:	07/01/2016 - 09/30/2021	Contract # 17433		
34.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	ASIAN FOOD SOLUTIONS, INC.	FEDERAL	\$719,658	
	Contract Description:	This is the fourth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$2,527,143 to \$3,246,801 due to the continued need for these services.				
		Term of Contract:	10/01/2016 - 09/30/2021	Contract # 17999		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
35.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	JENNIE-O TURKEY STORE SALES, LLC	FEDERAL	\$51,331	
	Contract Description:	This is the fifth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$2,810,000 to \$2,861,331 due to the continued need for these services.				
	Term of Contract:	10/01/2016 - 09/30/2021	Contract # 18004			
36.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	LAND O' LAKES, INC.	FEDERAL	\$156,106	
	Contract Description:	This is the third amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$512,971 to \$669,077 due to the continued need for these services.				
	Term of Contract:	10/01/2016 - 09/30/2021	Contract # 18018			
37.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	LET'S DO LUNCH, INC. DBA INTEGRATED FOOD SERVICE	FEDERAL	\$4,299,435	
	Contract Description:	This is the fourth amendment to the original contract which provides breakfast and lunch products for the National School Lunch Program using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$5,107,205 to \$9,406,640 due to the continued need for these services.				
	Term of Contract:	10/01/2016 - 09/30/2021	Contract # 18019			
38.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	OUT OF THE SHELL, LLC DBA YANG'S 5TH TASTE	FEDERAL	\$1,194,050	
	Contract Description:	This is the fourth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$3,613,000 to \$4,807,050 due to the continued need for these services.				
	Term of Contract:	10/01/2016 - 09/30/2021	Contract # 18022			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
39.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	TYSON PREPARED FOODS, INC.	FEDERAL	\$4,119,518	
	Contract Description:	This is the fifth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$13,000,000 to \$17,119,518 due to the continued need for these services.				
		Term of Contract:	10/01/2016 - 09/30/2021	Contract # 18023		
40.	550	DEPARTMENT OF AGRICULTURE - NUTRITION EDUCATION PROGRAMS	TYSON PREPARED FOODS, INC.	FEDERAL	\$957,649	
	Contract Description:	This is the sixth amendment to the original contract which provides breakfast and lunch products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$1,381,068 to \$2,338,717 due to the continued need for these services.				
		Term of Contract:	10/01/2016 - 09/30/2021	Contract # 17996		
41.	658	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY PLAN AND ADMINISTRATION	AGATE SOFTWARE, INC.	FEDERAL	\$299,153	
	Contract Description:	This is a new contract to provide ongoing support, maintenance and hosting of the agency's existing grants management system.				
		Term of Contract:	10/01/2020 - 10/31/2024	Contract # 23286		
42.	702	DEPARTMENT OF WILDLIFE - HERITAGE - NON-EXEC	ENVIRONMENTAL SYSTEMS RESEARCH INSTITUTE, INC.	OTHER: HERITAGE TRUST FUND 95% FEDERAL 5%	\$75,000	
	Contract Description:	This is a new contract to provide services to provide a mobile solution for data collection and storage during aerial surveys of big game wildlife.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23312		
43.	702	DEPARTMENT OF WILDLIFE - LAW ENFORCEMENT	NATIONAL PARK SERVICE	OTHER: BOATING PARTNERSHIP PROGRAM	\$400,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing services for water safety patrols/assistance, educational campaigns and safety awareness for the boating public at the Lake Mead National Recreation Area.				
		Term of Contract:	Upon Approval - 12/31/2024	Contract # 22985		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
44.	702	DEPARTMENT OF WILDLIFE - HABITAT	SOUTHERN NYE COUNTY CONSERVATION DISTRICT	FEE: HABITAT CONSERVATION FEES AND INDUSTRIAL DEVELOPMENT FUNDS	\$100,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing habitat restoration services for the Amargosa toads in Oasis Valley and Beatty.				
		Term of Contract:	Upon Approval - 07/31/2024	Contract # 23383		
45	800	DEPARTMENT OF TRANSPORTATION - ADMINISTRATION	KIMLEY-HORN & ASSOCIATES, INC.	HIGHWAY 93.7% FEDERAL 6.3%	\$600,000	
	Contract Description:	This is a new contract to provide updates and replacements to the existing Nevada Airport System Plan with the Nevada Airport and Heliport System Plan in compliance with Federal Aviation Administration Advisory Circular 150/5070-7, Change 1, "The Airport System Planning Process". NDOT Agreement Number P082-20-802.				
		Term of Contract:	Upon Approval - 09/30/2021	Contract # 23489		
46.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	LYON COUNTY SCHOOL DISTRICT	GENERAL 21.3% FEDERAL 78.7%	\$57,420	Exempt
	Contract Description:	This is the first amendment to the interlocal agreement which provides ongoing funding for a Transition Coordinator to improve post-secondary outcomes for students with disabilities. This amendment extends the termination date from September 30, 2020 to September 30, 2022 and increases the maximum amount from \$28,710 to \$86,130 due to the continued need for these services.				
		Term of Contract:	07/10/2019 - 09/30/2022	Contract # 22086		
47.	960	SILVER STATE HEALTH INSURANCE EXCHANGE - SILVER STATE HEALTH INSURANCE EXCHANGE ADMINISTRATION	BERRY DUNN MCNEIL & PARKER, LLC DBA BERRYDUNN	FEE: CARRIER	\$208,848	
	Contract Description:	This is a new contract to provide annual independent external financial and programmatic audit services.				
		Term of Contract:	11/01/2020 - 11/01/2023	Contract # 23385		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **23083** Amendment Number: **1**

Agency Name: **ATTORNEY GENERAL'S OFFICE** Legal Entity Name: **MCDONALD CARANO WILSON, LLP**

Agency Code: **030** Contractor Name: **MCDONALD CARANO WILSON, LLP**

Appropriation Unit: **1030-04** Address: **100 WEST LIBERTY STREET**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89505**

If "No" please explain: Not Applicable Contact/Phone: **775/788-2000**

Vendor No.: **T81073509B**

NV Business ID: **NV19961000027**

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Statutory Contingency Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/21/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **12/30/2020**Contract term: **1 year and 314 days**4. Type of contract: **Contract**Contract description: **Outside Counsel**

5. Purpose of contract:

This is the first amendment to the original contract which provides services for outside counsel for case number A-19-787004-B. This amendment extends the termination date from December 30, 2020 to December 31, 2021 and increases the maximum amount from \$85,000 to \$414,325 due to the addition of services through post-trial representation in the scope of work.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$85,000.00	\$85,000.00	\$85,000.00	Yes - Action
2. Amount of current amendment (#1):	\$329,325.00	\$329,325.00	\$329,325.00	Yes - Action
3. New maximum contract amount:	\$414,325.00			
and/or the termination date of the original contract has changed to:	12/31/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada is involved in ongoing litigation that requires the service of outside counsel.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise needed for this type of litigation

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

See the attached Authorization to Contract form for details.

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The OAG has used services by McDonald Carano, LLP in the past and they have been performed satisfactorily.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLP

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	08/04/2020 14:10:19 PM
Division Approval	jhoba2	08/04/2020 14:10:27 PM
Department Approval	jhoba2	08/04/2020 14:10:32 PM
Contract Manager Approval	Iramire7	08/04/2020 14:17:01 PM
Budget Analyst Approval	jcoope8	08/07/2020 16:14:00 PM
BOE Agenda Approval	hfield	08/10/2020 16:09:59 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22537** Amendment Number: **3**

Agency Name: **ATTORNEY GENERAL'S OFFICE** Legal Entity Name: **SOROKAC LAW OFFICE PLLC DBA REISMAN SOROKAC**

Agency Code: **030** Contractor Name: **SOROKAC LAW OFFICE PLLC DBA REISMAN SOROKAC**

Appropriation Unit: **1030-04** Address: **8965 SOUTH EASTERN AVE STE 382**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89123**

If "No" please explain: Not Applicable Contact/Phone: **JOSH REISMAN 702-727-6258**

Vendor No.: **T27043222**

NV Business ID: **NV20091355427**

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **12/31/2020**

Termination Date:

Contract term: **1 year and 92 days**4. Type of contract: **Contract**Contract description: **Outisde Counsel**

5. Purpose of contract:

This is the third amendment to the original contract which provides outside counsel for representation in conjunction with deposition preparation, deposition attendance, and response to request for records related to an employee of the Department of Taxation. This amendment increases the maximum amount from \$42,500 to \$60,350 due to the continued need for services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$10,000.00	\$10,000.00	\$10,000.00	Yes - Info
a. Amendment 1:	\$10,000.00	\$10,000.00	\$20,000.00	Yes - Info
b. Amendment 2:	\$22,500.00	\$22,500.00	\$42,500.00	Yes - Info
2. Amount of current amendment (#3):	\$17,850.00	\$17,850.00	\$60,350.00	Yes - Action
3. New maximum contract amount:	\$60,350.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Preparation and accompaniment to a videotaped deposition.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise for this matter

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	08/03/2020 11:17:35 AM
Division Approval	jhoba2	08/03/2020 11:17:39 AM
Department Approval	jhoba2	08/03/2020 11:17:44 AM
Contract Manager Approval	Iramire7	08/04/2020 14:17:46 PM
Budget Analyst Approval	jcoope8	08/07/2020 15:17:19 PM
BOE Agenda Approval	hfield	08/10/2020 16:51:37 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22253** Amendment Number: **1**

Agency Name: **ATTORNEY GENERAL'S OFFICE** Legal Entity Name: **ADAMS NATURAL RESOURCES**

Agency Code: **030** Contractor Name: **ADAMS NATURAL RESOURCES**

Appropriation Unit: **1031-12** Address: **CONSULTING SERVICES LLC**

Is budget authority available?: **Yes** City/State/Zip: **CARSON CITY, NV 89701-8638**

If "No" please explain: Not Applicable Contact/Phone: **775-882-4201**

Vendor No.: **T27037984**

NV Business ID: **NV20151430090**

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Consultation**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing outside legal and consulting services in support of the Attorney General's Yucca Mountain legal efforts. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$120,000 to \$240,000 due to ongoing litigation.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$120,000.00	\$120,000.00	\$120,000.00	Yes - Action
2. Amount of current amendment (#1):	\$120,000.00	\$120,000.00	\$120,000.00	Yes - Action
3. New maximum contract amount:	\$240,000.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

Efforts to block the proposed Yucca Mountain repository.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have this expertise needed for this field

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The OAG has used services by this contractor since 2015 and is satisfied with their services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	07/31/2020 11:28:43 AM
Division Approval	jhoba2	07/31/2020 11:28:47 AM
Department Approval	jhoba2	07/31/2020 11:28:51 AM
Contract Manager Approval	Iramire7	08/03/2020 10:07:11 AM
Budget Analyst Approval	jcoope8	08/07/2020 15:28:54 PM
BOE Agenda Approval	hfield	08/10/2020 16:55:10 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23159**Agency Name: **TREASURER - TREASURER'S OFFICE**Agency Code: **050**Appropriation Unit: **1080-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Buckhead Capital Management, LLC**Contractor Name: **Buckhead Capital Management, LLC**Address: **3100 Cumberland Blvd., SE, Suite 1450**City/State/Zip: **Atlanta, GA 30339**Contact/Phone: **Matt Boden 404-720-8786**Vendor No.: **T27043522**NV Business ID: **NV20201766980**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Investment Earnings**Agency Reference #: **RFP #05TO-S979TB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 273 days**4. Type of contract: **Contract**Contract description: **Investment Mgmt.**

5. Purpose of contract:

This is a new contract to provide investment management services for securitized assets in the State General Portfolio - Core which must be invested in accordance with NRS Chapter 355.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,044,000.00**

Other basis for payment: Annual fee not to exceed 0.121% on the first \$100 million in assets and 0.07% on all assets over \$100 million paid in quarterly installments within 30 days of receipt of invoice and State Treasurer's approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State Treasurer's Office must invest assets in the State General Portfolio in accordance with NRS Chapter 355.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise in longer-term securitized assets which assists in increasing yield to the State General Portfolio.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Goldman Sachs
Invesco
State Street Global Advisers

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #05TO-S979, and in accordance with NRS 333, the selected vendor was one of several of the highest scoring proposers as determined by an independently appointed evaluation committee.

d. Last bid date: 01/09/2020 Anticipated re-bid date: 01/09/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Foreign Limited-Liability Company

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	thagan	07/29/2020 10:28:07 AM
Division Approval	thagan	07/29/2020 10:28:11 AM
Department Approval	thagan	07/29/2020 10:28:13 AM
Contract Manager Approval	thagan	07/29/2020 10:28:16 AM
Budget Analyst Approval	cbrekken	08/12/2020 11:44:35 AM
BOE Agenda Approval	cbrekken	08/12/2020 11:44:38 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23170**

Agency Name:	TREASURER - TREASURER'S OFFICE	Legal Entity Name:	Western Asset Management Company, LLC
Agency Code:	050	Contractor Name:	Western Asset Management Company, LLC
Appropriation Unit:	1080-04	Address:	385 East Colorado Boulevard
Is budget authority available?:	Yes	City/State/Zip	Pasadena, CA 91101
If "No" please explain:	Not Applicable	Contact/Phone:	Mark Friedrich 626-844-9536
		Vendor No.:	T32009819
		NV Business ID:	NV20201772939

To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Investment Earnings

Agency Reference #: RFP #05TO-S979TB

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 273 days**4. Type of contract: **Contract**Contract description: **Investment Mgmt.**

5. Purpose of contract:

This is a new contract to provide investment management services for corporate assets in the State General Portfolio - Core which must be invested in accordance with NRS Chapter 355.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,000,000.00**

Other basis for payment: Annual fee not to exceed 0.20% on the first \$100 million and 0.15% on all assets over \$100 million paid in quarterly installments within 30 days of receipt of invoice and State Treasurer's approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State Treasurer's Office must invest assets in the State General Portfolio in accordance with NRS Chapter 355.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise in longer-term corporate assets which assists in increasing yield to the State General Portfolio.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #05TO-S979, and in accordance with NRS 333, the selected vendor was one of several of the highest scoring proposers as determined by an independently appointed evaluation committee.

d. Last bid date: 01/09/2020 Anticipated re-bid date: 01/09/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Foreign Limited-Liability Company

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	alaw1	06/08/2020 12:59:50 PM
Division Approval	alaw1	06/08/2020 12:59:53 PM
Department Approval	alaw1	06/08/2020 12:59:55 PM
Contract Manager Approval	rmorse	06/08/2020 13:20:28 PM
Budget Analyst Approval	cbrekken	08/12/2020 11:53:26 AM
BOE Agenda Approval	cbrekken	08/12/2020 11:53:29 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23341**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: CHEMA AQUA, INC.
Agency Code: 082	Contractor Name: CHEMA AQUA, INC.
Appropriation Unit: 1349-12	Address: 23261 NETWORK PL
Is budget authority available?: Yes	City/State/Zip: CHICAGO, IL 60673
If "No" please explain: Not Applicable	Contact/Phone: Dave Burton 702-985-3271
	Vendor No.: T29023740
	NV Business ID: NV19991172643

To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rent Income Revenue

Agency Reference #: **ASD 2834320**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Water Treatment**

5. Purpose of contract:

This is a new contract to provide chemical water treatment to protect heating, ventilation and air conditioning equipment for facilities in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$69,277.25**

Other basis for payment: contract price \$57,731.04; Extra services \$11,546.21:

II. JUSTIFICATION

7. What conditions require that this work be done?

The Buildings and Grounds Section is concerned with the safety, health, and working conditions of all State employees. Its maintenance duties include carpentry, plumbing, electrical work, heating, ventilating and air conditioning

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of Manpower

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

CCI Chemical
Western Water Technologies
Chem Aqua

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facilities Manager Ph: 702-486-4900

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/14/2020 10:37:29 AM
Division Approval	ssands	07/14/2020 10:37:32 AM
Department Approval	ssands	07/14/2020 10:37:37 AM
Contract Manager Approval	ssands	07/14/2020 10:38:05 AM
Budget Analyst Approval	nkephart	08/03/2020 13:21:35 PM
BOE Agenda Approval	tgreenam	08/10/2020 08:06:47 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23395**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Contractor Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Address: **INC**City/State/Zip: **2509 E RENO AVE
LAS VEGAS, NV 89120-1015**Contact/Phone: **702-263-6597**Vendor No.: **T32004270**NV Business ID: **NV20051136561**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Building Rent Income Revenue**Agency Reference #: **RFP #08DOA-S1087**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **LANDSCAPING**

5. Purpose of contract:

This is a new contract to provide landscaping services for the Department of Motor Vehicles Flamingo location.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$150,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Landscaping services are needed to maintain the building.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a job that requires specialized equipment and training.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Del Sol Landscaping Construction
Pro Turf International
Brightview Landscaping**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #08DOA-S1087, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/03/2020 Anticipated re-bid date: 04/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Buildings and Grounds Las Vegas. Work is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facility Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/08/2020 08:24:26 AM
Division Approval	ssands	07/08/2020 08:24:29 AM
Department Approval	ssands	07/08/2020 08:24:34 AM
Contract Manager Approval	ssands	07/08/2020 08:43:22 AM
Budget Analyst Approval	nkephart	08/13/2020 15:27:40 PM
BOE Agenda Approval	nhovden	08/14/2020 10:01:33 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23396**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Contractor Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Address: **INC**City/State/Zip: **2509 E RENO AVE
LAS VEGAS, NV 89120-1015**Contact/Phone: **702-263-6597**Vendor No.: **T32004270**NV Business ID: **NV20051136561**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Building Rent Income Revenue**Agency Reference #: **RFP # 08DOA-S1087**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Landscaping**

5. Purpose of contract:

This is a new contract to provide landscaping services for the Department of Motor Vehicles Sahara location.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$190,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Landscaping services are needed to maintain the building

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a job that requires specialized equipment and training.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Brightview Landscaping
Pro Turf International
Del Sol Landscaping Construction**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #08DOA-S1087, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/03/2020 Anticipated re-bid date: 04/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Buildings and Grounds Las Vegas. Work is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facility Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/08/2020 08:31:45 AM
Division Approval	ssands	07/08/2020 08:31:48 AM
Department Approval	ssands	07/08/2020 08:31:52 AM
Contract Manager Approval	ssands	07/08/2020 08:31:55 AM
Budget Analyst Approval	nkephart	08/13/2020 15:24:48 PM
BOE Agenda Approval	nhovden	08/14/2020 10:31:07 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23397**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Contractor Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**Address: **INC**City/State/Zip: **2509 E RENO AVE
LAS VEGAS, NV 89120-1015**Contact/Phone: **702-263-6597**Vendor No.: **T32004270**NV Business ID: **NV20051136561**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Building Rent Income Revenue**Agency Reference #: **RFP #08DOA-S1087**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Landscaping**

5. Purpose of contract:

This is a new contract to provide landscaping services for the Grant Sawyer Building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$265,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Landscaping services are needed to maintain the building

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a job that requires specialized equipment and training.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Pro Turf International
Dels Sol Landscaping Construction
Brightview Landscaping**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #08DOA-S1087, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/03/2020 Anticipated re-bid date: 04/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Buildings and Grounds Las Vegas. Work is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facility Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/08/2020 08:54:08 AM
Division Approval	ssands	07/08/2020 08:54:11 AM
Department Approval	ssands	07/08/2020 08:54:14 AM
Contract Manager Approval	ssands	08/12/2020 13:30:24 PM
Budget Analyst Approval	nkephart	08/13/2020 15:22:07 PM
BOE Agenda Approval	nhovden	08/14/2020 10:33:08 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22710**Amendment
Number: **1**Legal Entity
Name: **ARCHITECTS + LLC**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Contractor Name: **ARCHITECTS + LLC**Agency Code: **082**Address: **35 MARTIN ST**Appropriation Unit: **1558-67**Is budget authority
available?: **Yes**City/State/Zip **RENO, NV 89509-2825**

If "No" please explain: Not Applicable

Contact/Phone: **775-329-8001**Vendor No.: **T80870250**NV Business ID: **NV20001117428**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113234**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **02/11/2020**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2023**Contract term: **3 years and 139 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Division of Forestry Advance Planning - Elko Heavy Equipment Shop & Renovation CIP project, to include design through construction documents for a new heavy equipment repair and fabrication shop: CIP Project No. 19-P08; SPWD Contract No. 113234. This amendment decreases the maximum amount from \$213,800 to \$50,300 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$213,800.00	\$213,800.00	\$213,800.00	Yes - Action
2. Amount of current amendment (#1):	-\$163,500.00	-\$163,500.00	-\$163,500.00	Yes - Action
3. New maximum contract amount:	\$50,300.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 12:58:41 PM
Division Approval	lwildes	07/15/2020 12:58:45 PM
Department Approval	lwildes	07/15/2020 12:58:48 PM
Contract Manager Approval	lwildes	07/15/2020 12:58:55 PM
Budget Analyst Approval	nkephart	07/17/2020 21:31:23 PM
BOE Agenda Approval	jrodrig9	07/23/2020 19:54:43 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22709**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **BLAKELY JOHNSON & GHUSN, INC. dba BJG Architecture & Engineering**Agency Code: **082**Contractor Name: **BLAKELY JOHNSON & GHUSN, INC. dba BJG Architecture & Engineering**Appropriation Unit: **1558-69**Address: **dba BJG Architecture & Engineering**Is budget authority available?: **Yes****449 SOUTH VIRGINIA STREET**City/State/Zip: **RENO, NV 89501**

If "No" please explain: Not Applicable

Contact/Phone: **775-827-1010**Vendor No.: **T80927591**NV Business ID: **NV20001117428**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	92.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	8.00 %

Agency Reference #: **113233**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/11/2020**Anticipated BOE meeting date **08/2021**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **3 years and 139 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Great Basin College - Welding Lab Expansion Advance Planning CIP project, to include design through construction documents for a new 4,000 square foot welding lab addition and renovation of the existing welding shop: CIP Project No. 19-P70; SPWD Contract No.113233. This amendment decreases the maximum amount from \$310,000 to \$68,200 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$310,000.00	\$310,000.00	\$310,000.00	Yes - Action
2. Amount of current amendment (#1):	-\$241,800.00	-\$241,800.00	-\$241,800.00	Yes - Action
3. New maximum contract amount:	\$68,200.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 15:09:12 PM
Division Approval	lwildes	07/15/2020 15:09:17 PM
Department Approval	lwildes	07/15/2020 15:09:22 PM
Contract Manager Approval	lwildes	07/15/2020 15:09:27 PM
Budget Analyst Approval	nkephart	07/20/2020 11:01:35 AM
BOE Agenda Approval	jrodrig9	07/23/2020 19:56:01 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22927**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **CORE CONSTRUCTION SERVICES OF
NEVADA, INC.**Agency Code: **082**Contractor Name: **CORE CONSTRUCTION SERVICES OF
NEVADA, INC.**Appropriation Unit: **1558-61**Address: **7150 CASCADE VALLEY CT.**Is budget authority
available?: **Yes**City/State/Zip **LAS VEGAS, NV 89128-0455**

If "No" please explain: Not Applicable

Contact/Phone: **702-794-0550**Vendor No.: **T81092744**NV Business ID: **NV19861002524**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113359**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **04/14/2020**
Examiner's approval?Anticipated BOE meeting date **08/2021**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**
Termination Date:Contract term: **3 years and 77 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Grant Sawyer Office Building Remodel CIP project, to include design construction and bid documents to provide advance planning through construction documents for the remodel of the interior spaces of the Grant Sawyer building in Las Vegas: CIP Project No. 19-P01; SPWD Contract No. 113359. This amendment decreases the maximum amount from \$295,075 to \$59,015 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$295,075.00	\$295,075.00	\$295,075.00	Yes - Action
2. Amount of current amendment (#1):	-\$236,060.00	-\$236,060.00	-\$236,060.00	Yes - Action
3. New maximum contract amount:	\$59,015.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIPs

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 14:39:02 PM
Division Approval	lwildes	07/15/2020 14:39:06 PM
Department Approval	lwildes	07/15/2020 14:39:10 PM
Contract Manager Approval	lwildes	07/15/2020 14:39:16 PM
Budget Analyst Approval	nkephart	07/20/2020 08:08:07 AM
BOE Agenda Approval	jrodrig9	07/23/2020 19:53:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22586**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **KITTRELL GARLOCK & ASSOCIATES**Agency Code: **082**Contractor Name: **KITTRELL GARLOCK & ASSOCIATES**Appropriation Unit: **1558-61**Address: **DBA KGA ARCHITECTURE**Is budget authority
available?: **Yes****9075 W DIABLO DR FL 3**City/State/Zip **LAS VEGAS, NV 89148-7604**

If "No" please explain: Not Applicable

Contact/Phone: **702-367-6900**Vendor No.: **T80931708**NV Business ID: **NV19771007004**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113077**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **12/10/2019**
Examiner's approval?Anticipated BOE meeting date **08/2021**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**
Termination Date:Contract term: **3 years and 202 days**4. Type of contract: **Contract**Contract description: **Arch/Engin**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Grant Sawyer Office Building Remodel CIP project to include advance planning through construction documents to remodel the interior spaces of the Grant Sawyer Office Building: CIP Project No. 19-P01; Contract No. 113077. This amendment decreases the maximum amount from \$4,612,500 to \$892,500 due to budget reductions approved in accordance with Senate Bill 1 of the 31st Special Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$4,612,500.00	\$4,612,500.00	\$4,612,500.00	Yes - Action
2. Amount of current amendment (#1):	-\$3,720,000.00	-\$3,720,000.00	-\$3,720,000.00	Yes - Action
3. New maximum contract amount:	\$892,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 13:14:17 PM
Division Approval	lwildes	07/15/2020 13:14:24 PM
Department Approval	lwildes	07/15/2020 13:14:30 PM
Contract Manager Approval	lwildes	07/15/2020 13:14:38 PM
Budget Analyst Approval	nkephart	07/20/2020 09:05:03 AM
BOE Agenda Approval	jrodrig9	07/23/2020 19:55:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23485**Agency Name: **INDIGENT DEFENSE**Agency Code: **111**Appropriation Unit: **1008-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: PS Technologies, Inc.

Contractor Name: **PS Technologies, Inc.**Address: **P.O. Box 22154**City/State/Zip: **Chicago, IL 60622-1154**

Contact/Phone: Aaron Krause 773-459-5582

Vendor No.: T32009884

NV Business ID: NV20201807145

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2021**Contract term: **1 year and 121 days**4. Type of contract: **Contract**Contract description: **Case management syst**

5. Purpose of contract:

This is a new contract to provide a data collection platform for uniform reporting by indigent defense providers in rural counties.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$104,425.00**

Payment for services will be made at the rate of \$1,450.00 per month

Other basis for payment: \$89,925 for implementation fees

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 180.320 requires the development of procedures for the mandatory collection of data from indigent defense providers in rural counties. LegalServer will be the platform for reporting.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is no ability within the State service to perform this function.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: G200802

Approval Date: 08/04/2020

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jkolenut	08/04/2020 13:42:22 PM
Division Approval	mryba	08/04/2020 13:58:57 PM
Department Approval	mryba	08/04/2020 13:59:00 PM
Contract Manager Approval	jkolenut	08/04/2020 13:59:12 PM
EITS Approval	tgalluzi	08/06/2020 16:29:46 PM
Budget Analyst Approval	bwooldri	08/10/2020 11:58:33 AM
BOE Agenda Approval	bwooldri	08/10/2020 11:58:38 AM
BOE Final Approval	Pending	



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:

Approval #:

G20-0802-Q

REQUEST TO USE ANOTHER GOVERNMENTAL SOLICITATION

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information - Note: Approval notification will be sent to only the contact(s) listed below:		
	State Agency Name:	Department of Indigent Defense Services	
	Contact Name and Title	Phone Number	Email Address
	Marcie Ryba, Executive Director	775-431-0527	mryba@dids.nv.gov
	Jason Kolenut, Management Analyst	775-431-0527	j.kolenut@dids.nv.gov

2	Vendor Information:	
	Identify Vendor:	PS Technologies, Inc.
	Contact Name:	Aaron Krause
	Complete Address:	1286 North Milwaukee Ave., Suite #9, Chicago, Illinois 60622
	Telephone Number:	773-782-1021 ext. 313
	Email Address:	akrause@legalserver.org

3	State/Entity that Released the Solicitation & Type of Solicitation. Must be Competitively Bid.	
	Type of Solicitation:	Colorado State Public Defender solicitation
	Identify Original State/Entity:	Colorado State Public Defender
	Contact Name:	Megan Ring, State Public Defender
	Telephone Number:	(303)764-1400
	Email Address:	state@coloradodefenders.us

4	Contract Dates: Your Contract Term Date Cannot Exceed Term Date of Original Contract.			
	Original Contract:	Start Date:	Upon approval	End Date:
	New Contract:	Start Date:		End Date:
				12/31/2021

5	Funding for this new contract:	
	State Appropriated:	100% General Funds
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

G20-08020

6	Does the Scope of Work (SOW) in the original contract meet/exceed your needs?	Yes:	X	No:	
	To ensure such, requesting agency must request a copy of the State/entities Contract and SOW to be reviewed and approved by the agency's Deputy Attorney General (DAG). A copy of the Contract and written approval from the agency's DAG must be included with the request to the Purchasing Division.				
7	Did the agency receive awarded vendors permission to contract?	Yes:	X	No:	
	Written approval from the awarded vendor must accompany the agency's request/submission to the Purchasing Division.				
8	To ensure fair & reasonable pricing to the State, did the agency request a copy of the awarded vendors technical and cost proposals?	Yes:		No:	X
	Copies of such must be included with submission to the Purchasing Division. <i>Please See Vendor letter w/ like similar pricing as state of Colorado</i>				
9	Did the agency address any Federal Requirements associated with the contract?	Yes:		No:	X
10	Is this vendor registered in NevadaEPro?	Yes:	X	No:	
	Per Executive Order 2019-2, prior to entering into a contract with a vendor they must be registered in NevadaEPro.				
11	Is this vendor registered with the Nevada Secretary of State's Office?	Yes:		No:	X
	Pursuant to NRS 76, prior to entering into a contract with a vendor they must obtain a Nevada Business License. The Vendor is in the process of registering with the Secretary of State's Office and the State Controller's Office.				
12	Is a Business Associate Addendum or other agency specific form(s) required?	Yes:		No:	X
	If so, please include copies with submission to the Purchasing Division.				

Purchasing Use Only:	
Approval #:	62008020

By signing below, I know and understand the contents of this request and attest that all statements are true and correct.

Jason Kolenat

Agency Representative Initiating Request

Jason Kolenat

Print Name of Agency Representative Initiating Request

7/28/20
Date

Marcie Ryba

Signature of Agency Head Authorizing Request

Marcie Ryba

Print Name of Agency Head Authorizing Request

7/28/20
Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NRS 333.475. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 300.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:

Keim D. Doty

Administrator, Purchasing Division or Designee

8/4/2020
Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Marcie Ryba, Executive Director, DIDS
Jason M. Kolenu, Management Analyst 2, DIDS
Eric Pennington, PMO Manager, EITS, DOA

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technology Investment Administrator, DOA, EITS

SUBJECT: TIN Review Completed – *DIDS - LegalServer* – T1361008

DATE: May 20, 2020

We have completed the review for Department of Indigent Defense Services (DIDS) – *LegalServer* TIN.

The submitted TIN, for an estimated value of \$141,400, supports the implementation of a new technology, a new automated solution, and/or new equipment not previously in use by the agency.

The agency is endeavoring to procure and implement LegalServer, a cloud-based, case management platform. The agency states that contracting with LegalServer and providing it to the attorneys who provide indigent defense services would provide a uniform manner wherein the Board and DIDS would be able to receive time tracking and reports in a uniform manner. Data will be stored in the Amazon Web Services (AWS) Government Cloud. The tool will be accessible via a web interface from within and outside of the state network. LegalServer is a leader in the case-management arena and is used by legal organizations across the country.

If requested, a pre and post-implementation security review can be conducted, at no additional cost to the agency, by the Office of Information Security (OIS) to verify that state data is secured in a manner that is in line with the state security policies, standards and best practices. OIS can be contacted via email at InfoSec@admin.nv.gov.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23441**Agency Name: **INDIGENT DEFENSE**Agency Code: **111**Appropriation Unit: **1008-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Soval Solutions, LLC

Contractor Name: **Soval Solutions, LLC**Address: **16030 Wakeley St**City/State/Zip **Omaha, NE 68118**

Contact/Phone: Dr. Mithcel Herian 402-6551-632

Vendor No.: T32010042

NV Business ID: NV20201835676

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds **100.00 %** Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: RFP #11DIDS-S1172

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **302 days**4. Type of contract: **Contract**Contract description: **Data Analyst**

5. Purpose of contract:

This is a new contract to provide analysis, development and evaluation of data.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$51,040.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Public Defense data analyst will play a leadership role in the development, analysis and evaluation for strategic and policy development for the department.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the range of experience and tools to perform these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Penn and Associates
Measurement Resources CO
Public Knowledge**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #11DIDS-S1172, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 05/19/2020 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jkolenut	08/04/2020 13:52:10 PM
Division Approval	mryba	08/04/2020 13:57:58 PM
Department Approval	mryba	08/04/2020 13:58:03 PM
Contract Manager Approval	jkolenut	08/04/2020 13:58:16 PM
Budget Analyst Approval	bwooldri	08/17/2020 11:48:28 AM
BOE Agenda Approval	bwooldri	08/17/2020 11:48:32 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23406**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2561-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ROBERT F. NYCEK**Contractor Name: **ROBERT F. NYCEK**Address: **1309 MARITA DR**City/State/Zip: **BOULDER CITY, NV 89005-3309**Contact/Phone: **ROBERT F. NYCEK 702-294-1428**Vendor No.: **T27030756**NV Business ID: **NV20201855017**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	65.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	35.00 % Private/County

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **Yes**

If "Yes", please explain

The services provided are not adapted to competitive selection, and it was therefore necessary to obtain a solicitation waiver in addition to the normal contract requirements. This combined with logistical challenges created as a result of the COVID-19 outbreak resulted in this contract missing the submission date for the July BOE.

3. Termination Date: **07/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Chaplain Services**

5. Purpose of contract:

This is a new contract to provide ongoing chaplain services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$117,960.00**

Payment for services will be made at the rate of \$30.00 per hour

Other basis for payment: Biweekly upon submission of an approved invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

he Chaplain position provides counseling for the psychological needs for the residents.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no State employees available who can provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200702

Approval Date: 07/06/2020

c. Why was this contractor chosen in preference to other?

His knowledge and experience with veterans issue and his familiarity with the Nevada State Veterans Home, residents, and staff.

d. Last bid date: 06/01/2020 Anticipated re-bid date: 04/30/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the Nevada Department of Veterans Services. Services performed are satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgree6	07/13/2020 09:15:50 AM
Division Approval	dgree6	07/13/2020 09:15:54 AM
Department Approval	dgree6	07/13/2020 09:15:57 AM
Contract Manager Approval	jtheil1	07/13/2020 09:50:59 AM
Budget Analyst Approval	afrantz	08/04/2020 11:04:49 AM
BOE Agenda Approval	bwooldri	08/05/2020 07:42:27 AM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	100702C

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	Nevada Department of Veterans Services	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Joseph Theile, Deputy CFO	775-825-9752	theilej@veterans.nv.gov
	Kurt Green, CFO	775-825-9751	greenk@veterans.nv.gov

1b	Vendor Information:	
	Identify Vendor:	T27030756
	Contact Name:	ROBERT F. NYCEK
	Complete Address:	1309 MARITA DR. BOULDER CITY, NV 89005-3309
	Telephone Number:	702/294-1428
	Email Address:	NYCEKB@NOVS.STATE.NV.US

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	
	Professional Service Exemption:	X

1d	Contract Information:			
	Is this a new Contract?	Yes	X	No
	Amendment:	#		
	CETS:	Pending, current CETS #17829		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	08/01/2020	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	65%
	Grant Funds:	
	Other (Explain):	35% Private/County

Purchasing Use Only:

Approval #:

20070208

1g

Total Estimated Value of this Service Contract, Amendment or Purchase:

\$117,960

2

Provide a description of work/services to be performed or commodity/good to be purchased:

Provide Chaplain Services to the residents in the Southern Nevada State Veterans Home (SNSVH) in Boulder City Nevada.

3

What are the unique features/qualifications required for this service or good that are not available from any other vendor:

A Chaplin for the SNSVH must be qualified to provide counseling and spiritual assistance for the residents. Chaplin Nycek has an advanced understanding of the operations and processes of the SNSVH developed over time.

4

Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:

SNSVH has a previously established long term working spiritual relationship with Chaplain Nycek. Chaplin Nycek has a unique understanding of SNSVH procedures and operations and has developed professional relationships with staff and established a significant continuity of spiritual care with our veteran residents. The Chaplain position is a personal services position that requires an individual of a spiritual nature who can assist Veterans with their psychosocial needs.

Were alternative services or commodities evaluated? Check One.

Yes:

No:

X

a. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

5

b. If not, why were alternatives not evaluated?

SNSVH has a previously established long term working spiritual relationship with Chaplain Nycek. Chaplin Nycek has a unique understanding of SNSVH procedures and operations and has developed professional relationships with staff and established a significant continuity of spiritual care with our veteran residents. The Chaplain position is a personal services position that requires an individual of a spiritual nature who can assist Veterans with their psychosocial needs.

Purchasing Use Only:

Approval #:

200702 @

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.</i>				Yes:		No:	
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)			
	07/12/16	07/31/20	\$117,960.00	Personal Spiritual Services to Veteran residents in the SNSVH.	160401			
	07/19/12	07/13/16	\$105,000.00	Personal Spiritual Services to Veteran residents in the SNSVH.	#120703C			
			\$					
		\$						
		\$						

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>Full impact unknown. The services provided are of such a personal nature and require a person who can form a spiritual bond with the veteran residents that they are not adapted to competitive selection. Such a process would result in a break of the continuity of care for the SNSVH residents that may have serious implications to the psychosocial well-being of some or all of the residents.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>Robert Nycek was recommended by the pervious Chaplain who had to leave do to health considerations. A committee from the SNSVH met and discussed the position with him, and recommended his hire. He is well known and respected in the Boulder City community and he is a veteran. He has significant experience in the SNSVH having previously worked as a volunteer. We believe his hourly rate is well within that of other "professional" contractors.</i>

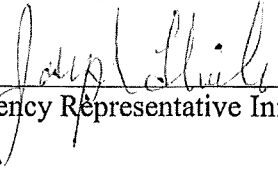
9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
<i>Our intent is to maintain the continuity of care provided by Chaplain Nycek. The psychosocial and spiritual well-being care is a vital component of the care we provide to our veteran residents. Chaplain Nycek is well versed in the obstacles many veterans face and has developed a long-term working relationship with our residents and staff. We are seeking a four-year contract to assure these critical services continue uninterrupted.</i>					

Purchasing Use Only:

Approval #:

200702-2

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

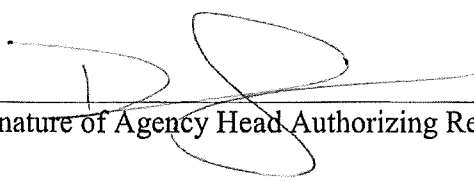

Agency Representative Initiating Request

Joseph Theile

06/30/2020

Print Name of Agency Representative Initiating Request

Date


Signature of Agency Head Authorizing Request

7/1/20

Kurt Green

07/01/2020

Print Name of Agency Head Authorizing Request

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review


Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:


Administrator, Purchasing Division or Designee

7/6/2020

Date

STEVE SISOLAK
Governor



STATE OF NEVADA

NEVADA DEPARTMENT OF VETERANS SERVICES

6630 South McCarran Blvd, Building C, Suite 204

Reno, Nevada 89509

(775) 688-1653 • Fax (775) 688-1656

MEMORANDUM

TO: Aaron Frantz, Executive Branch Budget Officer 1

FROM: Joseph Theile, Management Analyst III

DATE: July 6, 2020

SUBJECT: Request for Retroactive Approval –Robert F. Nycek
CETS:

NDVS respectfully requests this contract be made retroactive to August 1, 2020 to maintain continuity of service. All parties have worked expeditiously to get this contract to the BOE for approval. The services provided are not adapted to competitive selection, and it was therefore necessary to obtain a solicitation waiver in addition to the normal contract requirements. This combined with logistical challenges created as a result of the COVID-19 outbreak resulted in this contract missing the submission date for the July BOE.

A denial of this request would result in a break of the continuity of care for the SNSVH residents.

Thank you for your time and consideration with this request. Should you have any questions please do not hesitate to let me know.



Joseph Theile, Deputy CFO

Nevada Department of Veterans Services

6630 S. McCarran Blvd., Bldg. C, Suite 204

Reno, NV 89509

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CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23534**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2612-13**Is budget authority available?: **No**

If "No" please explain: Pending WPC52343

Legal Entity Name: **TEACHERS HEALTH TRUST**Contractor Name: **TEACHERS HEALTH TRUST**Address: **2950 E ROCHELLE AVE**City/State/Zip: **LAS VEGAS, NV 89121**Contact/Phone: **Michael Skolnik 415-827-7389**Vendor No.: **Pending**NV Business ID: **NV20201877506**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 300

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/30/2020**Contract term: **120 days**4. Type of contract: **Contract**Contract description: **Project Mgmt Service**

5. Purpose of contract:

This is a new contract to provide COVID-19 testing, outreach and monitoring for Nevada educators.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,245,513.00**

Other basis for payment: Per itemized invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

As the school year begins, and with the recent increase in COVID-19 cases leading to additional and continued health and safety measures, reflected by Emergency Directives 023, 024, 026, 027, 028, 029, and 30, there is a growing concern about the preparedness of our schools to manage the risks associated with COVID-19. Policymakers, school administrators, and district leaders are developing plans to reopen schools for the next academic year, as well as preparing flexible intervention and contingency plans that can adapt as our understanding of the virus evolves and testing methodologies improve. However, schools and districts are grappling with a myriad of health and safety considerations across multiple facets of school operations including how comprehensive testing, monitoring, tracing and isolation/treatment programs can be implemented to mitigate risk.

In light of this reality, the NDE proposes to enter into an emergency contract with the Teachers Health Trust to assist the NDE with providing Nevada's 62,500 educators and staff with the T.I.E.S. COVID-19 testing and monitoring program that will work to reduce risk for our returning education workforce this school year. This priority aligns with the Governor's focus on education and the continued interest in public health amidst the COVID-19 pandemic.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources to provide these services to 62,000 educators and staff.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Per NAC 333-114 This is an emergency contract due to COVID-19 pandemic emergency directive 005 and was selected by the Superintendent of Public Instruction and Leadership.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bfarra2	08/25/2020 14:40:28 PM
Division Approval	bfarra2	08/25/2020 14:40:31 PM
Department Approval	bfarra2	08/25/2020 14:40:34 PM
Contract Manager Approval	bfarra2	08/25/2020 14:40:38 PM
Budget Analyst Approval	cbrekken	08/26/2020 15:21:05 PM
BOE Agenda Approval	cbrekken	08/26/2020 15:21:07 PM
BOE Final Approval	Pending	

**File Name: FW Emergency Contract Request Clark County
Teacher's Health Trust.msg PDF Conversion Status is Warning:
File type not supported**

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23470**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	University of Utah School of Medicine
Agency Code:	402	Contractor Name:	University of Utah School of Medicine
Appropriation Unit:	3208-12	Address:	Dept of Pediatrics, Div of MG 295 CHIPETA WAY
Is budget authority available?:	Yes	City/State/Zip	SALT LAKE CITY, UT 84108
If "No" please explain:	Not Applicable	Contact/Phone:	Trevor Scott 801/581-8416
		Vendor No.:	T29000319V
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	90.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	10.00 % Insurance

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **Yes**

If "Yes", please explain

Nevada Early Intervention Services utilizes Dr. Longo's services to address newborn screenings following the required timeframes of this critical healthcare service. The retro letter was submitted to reduce any instance of a break in service in the event such services were needed during this time or provided. Negotiations between our Deputy Attorney General, program and the University of Utah's legal counsel went on for an extended amount of time, delaying this contract's submittal.

3. Termination Date: **06/30/2022**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Newborn Clinics**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing physician services including metabolic clinics and function as an on call consultant for Division staff and Nevada medical providers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$133,200.00**

Other basis for payment: Per Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada must provide care for children born with metabolic health issues.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are currently no licensed Metabolic Clinicians in the State of Nevada.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Pursuant to NRS 277.180 one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, this is an ongoing contract that has previously had satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amanocha	07/31/2020 11:56:03 AM
Division Approval	amanocha	07/31/2020 11:56:06 AM
Department Approval	mwinebar	07/31/2020 15:51:36 PM
Contract Manager Approval	maceved1	08/03/2020 09:05:34 AM
Budget Analyst Approval	jyou23	08/05/2020 11:42:48 AM
BOE Agenda Approval	bwooldri	08/05/2020 15:30:49 PM
BOE Final Approval	Pending	



June 16, 2020

MEMORANDUM

TO: Susan Brown, Director
Governor's Finance Office

THROUGH: Richard Whitley, MS, Director
Department of Health and Human Services

FROM: Dena Schmidt, Administrator
Aging and Disability Services Division

SUBJECT: Request for Approval for Retroactive July 1, 2020, Start Date for Nevada Early Intervention Services Newborn Metabolic Screening Clinics

This memorandum requests the above referenced Aging and Disability Services Division (ADSD) interlocal contract with the University of Utah, be approved for a retroactive start date effective July 1, 2020. This contract requires this retroactive start date for the State's obligation to continue to provide services and ensure continuity of services to address newborn screenings follow up within required timeframes for this critical healthcare service.

This interlocal contract is for funding to provide metabolic services and newborn screening clinic for conditions identified as a result of a newborn screening bloodshot for children ages zero to three. The funding will support a qualified physician acting within the scope of practice to perform consultation, diagnostics, clinic, report writing, and travel to Nevada Early Intervention Services to carry out the provisions of services.

ADSD has been collaborating with its State agencies and the Deputy Attorney General's office, to meet the needs and contractual obligations for all parties, regarding the contract language.

Thank you for your consideration.

cc: Rique Robb, ADSD, Deputy Administrator
Mariana Acevedo, ADSD, Contract Manager

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23296**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Aetna, Inc.
Agency Code:	403	Contractor Name:	Coventry Health Care of Nebraska, Inc.
Appropriation Unit:	3243-14	Address:	11819 Miami St. Suite 101
Is budget authority available?:	Yes	City/State/Zip	Omaha, NE 68164
If "No" please explain:	Not Applicable		
To what State Fiscal Year(s) will the contract be charged?	2021-2023		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % No cost

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2021**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **1 year and 364 days**4. Type of contract: **Cooperative Agreement**Contract description: **DSNP**

5. Purpose of contract:

This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$0.01****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Centers for Medicare and Medicaid (CMS) only allows registered Medicare Advantage Plans to operate D-SNPs. State staff will provide oversight however they cannot operate the plan. The D-SNP will provide better coordination of services and benefits for Dual Eligible Medicaid recipients. This D-SNP plan provides the recipients assistance with coordinating the delivery of all benefits covered by both Medicare and the State Medicaid Agency, including when Medicaid benefits are delivered via the State Medicaid Agency fee-for-service and/or Managed Care Organizations. The MA Plan is responsible for coordinating the enrollees Medicare and Medicaid benefits, including, but not limited to discharge planning, disease management, and care management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current MCO provider with satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Subsidiary

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nrezaie	06/18/2020 11:53:03 AM
Division Approval	rmille8	06/18/2020 12:16:55 PM
Department Approval	mwinebar	06/19/2020 09:55:30 AM
Contract Manager Approval	rmille8	06/19/2020 10:56:32 AM
Budget Analyst Approval	laaron	08/17/2020 12:46:55 PM
BOE Agenda Approval	laaron	08/17/2020 12:46:57 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23292**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **HEALTH PLAN OF NEVADA, INC.**Contractor Name: **HEALTH PLAN OF NEVADA, INC.**Address: **2716 N. TENAYA WAY**City/State/Zip: **LAS VEGAS, NV 89128**Contact/Phone: **Kelly Simonson 702-242-7497**

Vendor No.:

NV Business ID: **NV19841007076**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % No cost

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2021**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **1 year and 364 days**4. Type of contract: **Cooperative Agreement**Contract description: **DSNP**

5. Purpose of contract:

This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$0.01****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Centers for Medicare and Medicaid (CMS) only allows registered Medicare Advantage Plans to operate D-SNPs. State staff will provide oversight however they cannot operate the plan. The D-SNP will provide better coordination of services and benefits for Dual Eligible Medicaid recipients. This D-SNP provides the recipients assistance with coordinating the delivery of all benefits covered by both Medicare and the State Medicaid Agency, including when Medicaid benefits are delivered via the State Medicaid Agency fee-for-service and/or Managed Care Organizations. The MA Plan is responsible for coordinating the enrollees Medicare and Medicaid benefits, including, but not limited to discharge planning, disease management, and care management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

he State does not have the resources to provide these services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current MCO provider with satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nrezaie	06/18/2020 11:32:12 AM
Division Approval	rmille8	06/18/2020 12:16:13 PM
Department Approval	mwinebar	06/19/2020 09:37:19 AM
Contract Manager Approval	rmille8	06/19/2020 10:59:22 AM
Budget Analyst Approval	laaron	08/17/2020 16:03:34 PM
BOE Agenda Approval	laaron	08/17/2020 16:03:37 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23267**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	HMO Colorado, Inc.
Agency Code:	403	Contractor Name:	HMO Nevada
Appropriation Unit:	3243-14	Address:	9133 West Russell Rd. Bldg. 9
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89148
If "No" please explain:	Not Applicable	Contact/Phone:	Craig Smith 702-545-9829
		Vendor No.:	
		NV Business ID:	NV19911047987
To what State Fiscal Year(s) will the contract be charged?	2021-2023		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % No cost

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2021**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **DSNP**

5. Purpose of contract:

This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$0.01****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Centers for Medicare and Medicaid (CMS) only allows registered Medicare Advantage Plans to operate D-SNPs. State staff will provide oversight however they cannot operate the plan. The D-SNP will provide better coordination of services and benefits for Dual Eligible Medicaid recipients. This D-SNP provides the recipients assistance with coordinating the delivery of all benefits covered by both Medicare and the State Medicaid Agency, including when Medicaid benefits are delivered via the State Medicaid Agency fee-for-service and/or Managed Care Organizations. The MA Plan is responsible for coordinating the enrollees Medicare and Medicaid benefits, including, but not limited to discharge planning, disease management, and care management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current MCO provider with satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nrezaie	06/18/2020 11:54:16 AM
Division Approval	rmille8	06/18/2020 12:17:28 PM
Department Approval	mwinebar	06/19/2020 09:59:43 AM
Contract Manager Approval	rmille8	06/19/2020 10:57:37 AM
Budget Analyst Approval	laaron	08/17/2020 15:47:47 PM
BOE Agenda Approval	laaron	08/17/2020 15:47:49 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23412**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Regional Transportation Commission of Southern Nevada**Contractor Name: **Regional Transportation Commission of Southern Nevada**Address: **600 S. Grand Central Pkwy Suite 350**City/State/Zip: **Las Vegas, NV 89106-4512**Contact/Phone: **Dan Howland 702-676-1500**Vendor No.: **T29032694**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	29.90 %	Fees	0.00 %
X	Federal Funds	70.10 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **Yes**

If "Yes", please explain

DHCFP has been working with RTC to establish cost projections and to focus on the Cost Allocation Plan (CAP) for an accurate contract based on the results of the CAP.3. Termination Date: **06/30/2021**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **RTC Assessments**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing assessments for paratransit services for eligible Medicaid recipients for non-emergency transportation services in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$542,801.64**

Other basis for payment: As invoiced per Attachment AA

II. JUSTIFICATION

7. What conditions require that this work be done?

42 CFR 431.53 mandate requires provision of necessary non-emergency transportation to and from medical appointments. Completion of ADS Complementary Paratransit Eligibility evaluations will help assess Medicaid recipients' ability to use fixed route services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not provide these services. The Regional Transportation Commission is responsible for transportation of its passengers and therefore can assess the recipients' ability to use fixed route services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHCFP since at least 2013 - current (and various State agencies). Satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nrezaie	07/15/2020 14:29:19 PM
Division Approval	rmille8	07/15/2020 15:13:38 PM
Department Approval	mwinebar	07/16/2020 08:58:08 AM
Contract Manager Approval	rmille8	07/16/2020 10:08:24 AM
Budget Analyst Approval	laaron	07/22/2020 15:23:47 PM
BOE Agenda Approval	laaron	07/22/2020 15:23:49 PM
BOE Final Approval	Pending	



MEMORANDUM

DATE: July 14, 2020

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

THROUGH: Richard Whitley, Director, Department of Health and Human Services

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy

RE: Request for Retroactive Start Date of July 1, 2020 for RTC of Southern Nevada Interlocal Contract

The Division of Health Care Financing and Policy (DHCFP) requests a retroactive start date of July 1, 2020 for a new RTC of Southern Nevada Interlocal Contract to provide ongoing assessments for paratransit services for Medicaid reimbursement of Non-emergency Transportation (NET) services for eligible recipients.

DHCFP has been working with RTC to establish cost projections and to focus on the Cost Allocation Plan (CAP) for an accurate contract based on the results of the CAP. RTC received approval of the contract at their July board meeting.

Thank you

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23291**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SILVERSUMMIT HEALTHPLAN, INC.**Contractor Name: **SILVERSUMMIT HEALTHPLAN, INC.**Address: **2500 N. Buffalo Dr.
Suite 250**City/State/Zip: **Las Vegas, NV 89128**Contact/Phone: **Eric Schmacker 775-834-9308**

Vendor No.:

NV Business ID: **NV20061600559**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % No cost

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2021**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **1 year and 364 days**4. Type of contract: **Cooperative Agreement**Contract description: **DSNP**

5. Purpose of contract:

This is a new contract to provide medical services to Dual Eligible Special Needs Plan recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$0.01****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Centers for Medicare and Medicaid (CMS) only allows registered Medicare Advantage Plans to operate D-SNPs. State staff will provide oversight however they cannot operate the plan. The D-SNP will provide better coordination of services and benefits for Dual Eligible Medicaid recipients. This D-SNP plan provides the recipients assistance with coordinating the delivery of all benefits covered by both Medicare and the State Medicaid Agency, including when Medicaid benefits are delivered via the State Medicaid Agency fee-for-service and/or Managed Care Organizations. The MA Plan is responsible for coordinating the enrollees Medicare and Medicaid benefits, including, but not limited to discharge planning, disease management, and care management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current MCO provider with satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nrezaie	06/18/2020 12:08:38 PM
Division Approval	rmille8	06/18/2020 12:21:29 PM
Department Approval	mwinebar	06/19/2020 11:27:13 AM
Contract Manager Approval	rmille8	06/19/2020 13:19:03 PM
Budget Analyst Approval	laaron	08/17/2020 13:01:48 PM
BOE Agenda Approval	laaron	08/17/2020 13:01:50 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23408**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3152-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **US ECOLOGY NEVADA, INC.**Contractor Name: **US ECOLOGY NEVADA, INC.**Address: **101 S. Capitol Blvd.
Suite 1000**City/State/Zip: **Boise, ID 83702-7710**Contact/Phone: **Daniel Church 800-239-3943**Vendor No.: **T29043305**NV Business ID: **NV20051089673**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Hazardous Waste Burial
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **17699**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/11/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/01/2021**Contract term: **324 days**4. Type of contract: **Contract**Contract description: **Low Level Waste**

5. Purpose of contract:

This is a new contract to provide additional soil on top of the existing cap at the closed Beatty Low-Level Radioactive Waste site.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,180,550.00**

Payment for services will be made at the rate of \$1,180,550.00 per Attachment C

II. JUSTIFICATION

7. What conditions require that this work be done?

Emergency repairs to the Beatty LLRWs were performed in 2016. The emergency repairs were not sufficient to achieve long-term stability of the disposal site. Placing this additional soil on the site is the next step in achieving long-term stability of the disposal site and is necessary to maintain the site in a safe condition.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This service requires heavy construction equipment, training, and access to the site that state employees do not possess.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200603

Approval Date: 06/23/2020

c. Why was this contractor chosen in preference to other?

The vendor is the site manager and has access to the LLRWS, which is a restricted area due to radiological hazards. Any other vendor would not have access to the site without constant supervision. The vendor is knowledgeable in landfill cap construction and maintenance and was contracted to perform this type of work in 2007, 2014, and 2016.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DPBH - 2007, 2014, and 2016 - satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttilto1	08/07/2020 10:46:47 AM
Division Approval	chadwic1	08/10/2020 11:42:31 AM
Department Approval	mwinebar	08/10/2020 13:02:44 PM
Contract Manager Approval	ttilto1	08/11/2020 11:52:24 AM
Budget Analyst Approval	afrantz	08/11/2020 12:14:23 PM
BOE Agenda Approval	bwooldri	08/12/2020 11:27:21 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor



Peter Long
Interim Director

Robin Hager
Deputy Director

Kevin D. Doty
Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Purchasing Use Only:

Approval#: 200603 @

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>DHHS/DPBH/BHPP/Radiation Control Program</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>John Follette, Radiation Control Supervisor</i>	<i>702-486-3017</i>	<i>jfollette@health.nv.gov</i>
	<i>Sue Genzler, Management Analyst III</i>	<i>775-684-4277</i>	<i>sgenzler@health.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>US Ecology Nevada (USEN)</i>
	Contact Name:	<i>Daniel Church, General Manager</i>
	Complete Address:	<i>PO Box 578 (Highway 95, 11 miles south of Beatty) Beatty, NV 89003</i>
	Telephone Number:	<i>800-239-3943 ext 4118</i>
Email Address:	<i>daniel.church@usecology.com</i>	

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>X</i>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	<i>X</i>	No
	Amendment:	#		
	CETS:	#		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>8/1/2020</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	<i>RGL 3706 – Hazardous Waste Burial Fees</i>

Purchasing Use Only:

Approval #:

20060300

1g Total Estimated Value of this Service Contract, Amendment or Purchase:
\$1,190,000

2 Provide a description of work/services to be performed or commodity/good to be purchased:
Placing additional soils obtained from the upcoming USEN Trench 13 Phase 2 excavation activities to the soil cover on the Beatty Low-Level Radioactive Waste Site (LLRWS). The excavated native soil would be rerouted from their intended stockpile locations and placed as additional soils over the LLRWS soil cover. The additional soils, soil compaction, surface grading, QC testing, and Topo Surveys will greatly improve the current soil cover on the Beatty LLRWS.

3 What are the unique features/qualifications required for this service or good that are not available from any other vendor:
USEN was the operator of the site when it was an active radioactive landfill and continues to operate the existing adjacent hazardous materials disposal facility and therefore has many years of experience in landfill maintenance activities. USEN is the site manager and has access to the LLRWS which is a restricted area due to radiological hazards. Any other vendor would not have access to the site without constant supervision. USEN is knowledgeable in landfill cap construction and maintenance and was contracted to perform this type of work in 2007, 2014, and 2016. USEN has equipment, materials and appropriately trained personnel on site.

4 Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
USEN has selected a contractor to perform excavation activities at Trench 13. The USEN contract will be paying the contractor to mobilize heavy equipment to this rural site, excavate, and move the soil from trench 13. If the State wants to take this time to use the soil for the cap at the Beatty LLRWS, it will cost about 1.2 million dollars. The State will only have to pay for the soil to be moved from Trench 13, soil compaction, surface grading, QC testing, and Topo Surveys. USEN will also have Quality Control engineers onsite for Trench 13, which the State can use for the LLRWS.
If the State wants to do the project at a later time, the costs of using another contractor will go up substantially. Instead of \$1.2 million dollars, it will probably cost closer to \$4 million dollars because another contractor would need to charge the State additional money for mobilization of heavy equipment to the site, excavation of the soil, would have to haul the soil twice as far and pay to have Quality Control engineers at the site. There would also be additional cost of having State personnel provide constant surveillance during all work performed in the LLRWS because this area is a restricted area due to radiological hazards.

5 Were alternative services or commodities evaluated? Check One.

Yes:

No:

XX

a. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

#20000301

b. If not, why were alternatives not evaluated?

USEN is the site manager and has trained personnel who can access to the restricted area and provide surveillance during work inside the LLRWS. Any other vendor would not have access to the site without constant supervision by State personnel. USEN is knowledgeable in landfill cap construction and maintenance and has performed this type of work at the LLRWS in 2007, 2014, and 2016. USEN has equipment, materials, and appropriately trained personnel on site.

Purchasing Use Only:

Approval #:

2000030

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.</i>				Yes:	X	No:	
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)			
	8/1/16	10/31/16	\$ 284,270.00	Materials added to cap, regrading and surveys	Waiver			
	8/1/14	10/31/14	\$ 246,766.00	Cap repair, riprap remaining edge	Waiver			
	7/11/07	6/30/11	\$ 200,000.00	Cap repair and partial riprap	Waiver			
		\$						
		\$						

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>The site was involved in a weather caused explosion and fire due to cap failures 10-18-15. There would be a delay in completing the necessary corrective actions required to stabilize the site. The cost to perform the work would more than double if another contractor was selected. USEN is paying for a contractor to mobilize heavy equipment to the rural site, excavate the soil, and will have Quality Engineers at the site and can provide surveillance of the restricted area inside the LLRWS. If performed by another contractor the state would need to pay for the above costs and provide constant surveillance of the restricted area during work inside the LLRWS.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>Discussion with the USEN site manager who provided a preliminary cost estimate with breakdown. USEN is covering the cost to mobilize heavy equipment to the site, excavate, and move the soil from trench 13. This would be very similar to the work performed in 2016. Also, state personnel would not have to be on site during work activities inside the LLRWS, which will save the State more money.</i>


9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				

Purchasing Use Only:

Approval #:

#20003 @

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.



Agency Representative Initiating Request

Thomas Tilton

6/18/20

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Kelli Quintero for Debi Reynolds

6/18/20

Print Name of Agency Head Authorizing Request

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

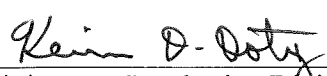
Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:



Administrator, Purchasing Division or Designee

6/23/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23425**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3213-20**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SAGE PURSUITS, INC. DBA ENVISION TECHNOLOGY PARTNERS**Contractor Name: **SAGE PURSUITS, INC. DBA ENVISION TECHNOLOGY PARTNERS**Address: **ENVISION TECHNOLOGY PARTNERS
7995 East Prentice Avenue Suit**City/State/Zip: **Greenwood Village, CO 80111**Contact/Phone: **Claire Murchie 303/914-9797**Vendor No.: **T29029330**NV Business ID: **NV20101518662**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **C17657**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 303 days**4. Type of contract: **Contract**Contract description: **Nevada WebIZ Enhance**

5. Purpose of contract:

This is a new contract to provide implementation of an approved technology investment for ongoing enhancements to the Nevada WebIZ system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$480,000.00**

Payment for services will be made at the rate of \$150.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Immunization Program must assure capacity to maintain high quality data within the Nevada WebIZ immunization information system to leverage data to conduct Program activities, including those outlined in both the main Immunization Program Cooperative Agreement and the competitive component of the Agreement that is funding this contract, as required by the Centers for Disease Control and Prevention (CDC). The proposed work will improve Nevada's ability to analyze, use, and share high-quality immunization data with a variety of stakeholders, allowing the Program to meet grant objectives.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

WebIZ is a proprietary software system developed and managed by Envision Technology Partners, Inc.; only Envision employees may perform the work described.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200706

Approval Date: 07/14/2020

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Since August of 2010 with the Division of Public and Behavioral Health. Satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kquinter	07/24/2020 14:33:38 PM
Division Approval	chadwic1	07/29/2020 10:37:58 AM
Department Approval	mwinebar	07/30/2020 08:29:46 AM
Contract Manager Approval	tilto1	07/31/2020 11:53:30 AM
EITS Approval	tgalluzi	07/31/2020 13:55:13 PM
Budget Analyst Approval	afrantz	08/05/2020 15:41:24 PM
BOE Agenda Approval	bwooldri	08/06/2020 11:52:51 AM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Purchasing Use Only:	
Approval#:	200706 @

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: Division of Public and Behavioral Health		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Tessa Grundy, PO1, Contract Unit	775-684-5915	tgrundy@health.nv.gov
	Shannon Bennett, HPM2, Immunization Program	775-684-2225	sbennett@health.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Envision Technology Partners, Inc.
	Contact Name:	Claire Murchie
	Complete Address:	7995 East Prentice Avenue Suite 305-E, Greenwood Village, CO 80111
	Telephone Number:	303-914-9797 x104
Email Address:		cjmurchie@envisiontechnology.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	X
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	X	No
	Amendment:	#		
	CETS:	#		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	July 1, 2020	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	X
	Grant Funds:	X
	Other (Explain):	

Purchasing Use Only:

Approval #:

200706 @

1g

Total Estimated Value of this Service Contract, Amendment or Purchase:

\$480,000

Provide a description of work/services to be performed or commodity/good to be purchased:

Nevada WebIZ, the statewide immunization information systems (IIS), will be enhanced as part of a federal cooperative agreement award:

- 1) Centers for Disease Control & Prevention (CDC) "CC3" IIS Learning Laboratories cooperative agreement
 - a) Develop a robust analytic infrastructure to support use of Microsoft Power BI software for Nevada State Immunization Program's proprietary immunization information system (WebIZ), which NSIP currently licenses.

CDC awards funds to each jurisdiction (including Nevada), requiring the existence of an Immunization Program, and directing jurisdictions to meet certain goals and objectives related to prevention of vaccine-preventable disease. A major part of these requirements is the existence of an immunization information system, or IIS. In 2000, Nevada began the procurement process to use the WebIZ software product developed and sold by Envision Technology Partners, Inc., referring to the IIS as "Nevada WebIZ." An IIS is a confidential, population-based, computerized database that records the immunization doses administered to persons residing within a given geopolitical area. Additionally, IIS have grown over the past several years into robust tools that support many aspects of an Immunization Program. For example, Nevada WebIZ is used to support dissemination and accountability of millions of dollars of vaccine doses for the federal Vaccines for Children (VFC) Program Nevada is charged with conducting, as well as the generation of reports for CDC-required quality assurance visits. Because so many Program activities leverage the IIS, CDC directs jurisdictions such as Nevada to meet standards of IIS capacity, quality, operation, and, and expects jurisdictions to identify supplemental funding to assure IIS integration. This "Learning Laboratories" award spans five (5) years and is awarded to states with high-functioning IIS' as a way for CDC to learn more about how IIS can benefit population health.

2

Both the main CDC program operations funding award and CC3 award require the ability to generate and assess immunization coverage in a variety of formats, which allow the Nevada State Immunization Program (NSIP) to interpret and communicate the meaning of the data. It can be challenging to generate and explain such complex data; it is important to assure capacity to accomplish this and leverage new and improved ways of sharing data with a wide variety of audiences. It is in support of grant objectives that the work will be done.

Envision Technology Partners, Inc. (Envision) will build an analytic environment based on Microsoft's Power BI toolkit, and will address the analytic requirements to be determined by NSIP. Based on prior discussions and prototypes developed independently by Envision, these dashboards and reports will include HL7 messaging metrics, geographic analysis of vaccination coverage, immunization information system utilization, and other key performance indicators, and will be designed collaboratively by Envision and NSIP staff. This environment and set of dashboards and reports will allow NSIP to meet the objectives of the CC3 cooperative agreement and will facilitate expanded data use for strategic planning and immunization coverage rate improvement, key focus areas of both the CC3 award and the CDC. Additionally, this functionality will be a valuable resource in administration, monitoring, and communication of COVID-19 (and other potential future pandemic) vaccine distribution and uptake. This functionality will elevate Nevada's ability to make data-driven decisions, and facilitate innovation and efficiency in NSIP.

As the project period spans five (5) years in total, with non-competitive applications due annually, Nevada seeks to establish a multi-year contract to support activities conducted for the remaining four (4) years (July 1, 2020 through June 30, 2024), with subsequent years contingent upon availability and approval of federal funding. Nevada anticipates incrementally expanding and improving the analytic environment developed during Year 1 as a primary activity of the remainder of the cooperative agreement, estimating \$120,000 of development funding per year (for a total of \$480,000 for Years 2-5).

3

What are the unique features/qualifications required for this service or good that are not available from any other vendor:

WebIZ, a proprietary product developed and maintained by Envision, has been leveraged as Nevada's statewide IIS since its initial procurement in 2000 (rolled out for use in 2003). Only Envision may develop enhancements to this system, including changes to functionality, management of access, and creation of replica and analytic environments in support of data extraction and report generation.

Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:

4

After 20 years of investment, use, and development, Nevada WebIZ has evolved into a robust system relied upon by medical providers (including, but not limited to pediatricians, family practices, hospitals, pharmacies, and urgent/emergent cares), child care, schools, welfare/social services, parents and adult individuals, public health preparedness, state and local health officials (including disease investigators), and all program areas of NSIP. As such, the WebIZ system is embedded in our community.

Given the length of time the system has been in use in Nevada, the amount of time and funding invested, and its high level of performance, it would not be realistic or cost-effective to pursue implementation of an entirely new system for the sake of gaining the functionality outlined in #2 above.

Were alternative services or commodities evaluated? Check One.

Yes:

No:

☒

a. **If yes**, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

b. **If not**, why were alternatives not evaluated?

5

No other cost-effective or time-efficient options exist for the operation of Nevada WebIZ, so no other options were evaluated. WebIZ is the system currently implemented in Nevada, and only Envision may make enhancements to their proprietary system. To consider an alternative would require full replacement of the IIS, which is not practical for several reasons:

- Other IIS software applications do exist; however, Nevada would lose the right to call our IIS "WebIZ" and adopting a different vendor's product would require not only a significant investment of funding (estimated at anywhere from \$500,000 to over \$1 million to start, based upon anecdotal experiences of other Immunization Program awardees), but significant time and effort from Immunization Program staff at all levels, as well as Bureau and Division administration staff time and effort.
- Adopting another software product would mean that significant staff time and effort would be spent developing curriculum and materials to train the approximately 18,000 individuals that use the IIS daily on how to use a new IIS, as well as testing and migrating over 700 HL7 electronic data exchange interfaces which encompass over 140 different immunizing organizations- it is estimated that a cumulative total of over 5 years of time went into testing and establishing these interface projects.
- Continuity and ease of use as well as the availability of tried and tested training products are integral to IIS and Immunization Program operations.

Therefore, evaluating an alternative is not an option, because choosing a different IIS vendor is not a cost-effective or practical option.

Purchasing Use Only:

Approval #:

#200706@

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.</i>			Yes:	X	No:	
	a. If yes, starting with the most recent contract and working backward, for the <i>entire</i> relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:						
	Term Start and End Dates		Value	Short Description		Type of Procurement (RFP#, RFQ#, Waiver #)	
	03/10/20	02/28/21	\$190,400.00	New contract to improve patient matching and duplicate management in Nevada WebIZ		Waiver #200202	
	03/10/20	06/30/20	\$120,000.00	New contract to enhance Nevada WebIZ for Power BI use		Waiver #200105	
	08/14/12	12/31/15	\$545,978.00	Amendment 2 – To include cloud-based hosting and management as part of contracted services.		Waiver #120609B	
	08/14/12	12/31/15	\$422,900.00	Amendment 1 - To include HL7 enhancements and to add a VTrckS Module to Nevada WebIZ		Waiver #120609A	
	08/14/12	12/31/15	\$422,900.00	Ongoing services to upgrade and maintain Nevada WebIZ		Waiver #120609	
	08/01/10	09/30/12	\$308,477.00	New contract to maintain, upgrade & enhance Nevada WebIZ		Waiver #100603	
	08/01/10	09/30/12	\$0.00	Amendment 2 – To extend contract end date		Waiver #100603B	

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	For this enhancement work to be competitively bid, Nevada would need to seek bids for full replacement of the immunization information system (IIS); WebIZ is a proprietary system, and can only be enhanced by Envision Technology Partners, Inc. Nevada's current IIS is embedded in and supports both the Immunization Program and state's communities. The time and effort necessary to complete such a competitive bid process and subsequent full, statewide implementation (including establishment of contracts/agreements, initial cost investment, system testing, re-training of over 18,000 end users and over 2900 sites, migration of over 700 current electronic interfaces, etc.) would severely impact NSIP's ability to meet grant objectives, lead to data loss, impact public trust in the IIS, and would cause NSIP to lose the opportunity to take advantage of this time-sensitive funding.

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	This enhancement work can only be performed by Envision; the only way for another entity to perform such work would be to completely replace the IIS in Nevada.

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. If yes, please provide details regarding future obligations or needs. WebIZ, a proprietary product developed and maintained by Envision, has been leveraged as Nevada's statewide IIS since its initial procurement in 2000 (rolled out for use in 2003). Only Envision may develop enhancements to this system, including changes to functionality, management of access, and creation of replica and analytic environments in support of data extraction and report generation.				

#20070602

After 20 years of investment, use, and development, Nevada WebIZ has evolved into a robust system relied upon by medical providers (including but not limited to pediatricians, family practices, hospitals, pharmacies, and urgent/emergent cares), child care, schools, welfare/social services, parents and adult individuals, public health preparedness, state and local health officials (including disease investigators), and all program areas of NSIP. As such the WebIZ system is embedded in our community. Given the length of time the system has been in use in Nevada, the amount of time and funding invested, and its high level of performance, it is not, for the foreseeable future, necessary or cost-effective to pursue implementation of an entirely new system, but rather continue to maintain and build upon the foundation established with the current system. Known future obligations include continuing hosting and management, maintenance and support, and annual report generation. Potential future obligations include development of new or improved functionality to meet CDC cooperative agreement and/or grant directives or to address needs or disparities identified by NSIP.

Purchasing Use Only:

Approval #:

#200906

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Agency Representative Initiating Request

THOMAS TILTON, MA IV, CONTRACT MANAGER

Print Name of Agency Representative Initiating Request

6/23/2020

Date

Signature of Agency Head Authorizing Request

for Debi Reynolds, Deputy Administrator

Print Name of Agency Head Authorizing Request

6/24/20

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

* TIN Attached to this document - Please

Name of agency or entity who provided information or review:

include TIN approval memo as an attachment in CETS * (20)

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:

Administrator, Purchasing Division or Designee

7/14/2020

Date

Steve Sisolak
Governor



Laura E. Freed
Director
Colleen Murphy
Deputy Director
David Haws
Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Julia Peek, Deputy Administrator, DPBH
Ashley Pinney, MA II, DPBH
Amanda Harris, IIS Integration Manager, DPBH
Lorraine McMullen, ITP III, DPBH

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technology Investment Administrator, EITS, DOA

SUBJECT: TIN Review Completed – *DPBH - WebIZ Power BI Upgrade* – T3213174

DATE: July 13th, 2020

We have completed the review for Department of Public and Behavioral Health's (DPBH) – *Nevada WebIZ Power BI Upgrade TIN*.

The submitted TIN, with an estimated value of \$600,000, supports the enhancement and or upgrade of an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

The agency is in progress on a multi-year project implementing Immunization Information System, Nevada WebIZ with their partner Envision. This TIN supports the enhancement of the WebIZ Platform with Microsoft Power BI for the creation of reports and dashboards.

It is expected that this investment will continue to follow state security standards and policies.

If there are any further changes to this investment that may cause an impact to the state infrastructure, please reach out to EITS as soon as possible.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Julia Peek, Deputy Administrator, DPBH
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Lorraine McMullen, ITP III, DPBH

CC: David Haws, Administrator, EITS, DOA
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CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23163**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Nevada Department of Education
Agency Code:	406	Contractor Name:	Nevada Department of Education
Appropriation Unit:	3222-15	Address:	700 E. Fifth Street
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89701
If "No" please explain:	Not Applicable	Contact/Phone:	Christine McGill 775 687-9168
		Vendor No.:	D30000000
		NV Business ID:	N/A

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: C17559

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **Yes**

If "Yes", please explain

This Interlocal was delayed by a version control error, differences in policies among agencies, and numerous changes to the original document, and compounded by staffing shortages due to COVID-19.

3. Termination Date: **06/30/2021**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **School Wellness**

5. Purpose of contract:

This is a new interlocal agreement to provide a School Wellness Program Coordinator that will support existing collaborations between Maternal, Child and Adolescent Health and the Nevada Department of Education.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$69,944.00**

Other basis for payment: Monthly invoice per Attachment B

II. JUSTIFICATION

7. What conditions require that this work be done?

The Title V MCH Block Grant requires 30% of all funds be expended in the category of Children and Youth with Special Health Care Needs. Collaborating with NDE facilitates improving the wellness in student populations and meets the requirement of the MCH Block Grant.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDE works collaboratively with DPBH/MCAH, the Nevada Department of Agriculture (NDA), and school districts to support implementation and evaluation of the Nevada School Wellness Policy.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

7.9%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely provide services to other agencies.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttilto1	06/16/2020 10:59:59 AM
Division Approval	chadwic1	07/30/2020 10:30:57 AM
Department Approval	mwinebar	07/31/2020 14:37:37 PM
Contract Manager Approval	ttilto1	08/03/2020 11:36:41 AM
Budget Analyst Approval	afrantz	08/06/2020 08:45:06 AM
BOE Agenda Approval	bwooldri	08/06/2020 15:39:22 PM
BOE Final Approval	Pending	

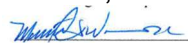


MEMORANDUM

DATE: July 15, 2020

TO: Aaron Frantz, Governor's Finance Office

THROUGH: Christina Hadwick, Administrative Services Officer IV

FROM: Brian DeValliere, DC Health Program Manager I, Title V Maternal and Child Health Program 

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL C17559

This memorandum requests a retroactive start date be approved effective July 1, 2020 for Interlocal Agreement C17559.

- Name of vendor: Nevada Department of Education
- Services to be provided: provide a School Wellness Program Coordinator that will support existing collaborations between Maternal, Child, and Adolescent Health (MCAH) and Nevada Department of Education (NDE).
- Funding Source and expenditure category: BA 3222, Cat:15; Health Resources and Services Administration (HRSA) Grant Funds
- Requested start date of work: July 1, 2020.
- Expected execution date of agreement: September 8, 2020
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - This Interlocal was delayed by a version control error, differences in policies among agencies, changes in start dates of work and numerous changes to the original documents and delays compounded by staffing issues created by COVID-19.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:
 - Without the Interlocal, the interagency collaboration efforts to improve school wellness will be hampered.
 - Explain how the program/bureau will prevent future retroactive requests:
 - Better communication among agencies and within CFCW will be stressed to ensure Interlocal Agreements are approved in a timely manner as required in division policy.

If you have any question, please contact Mitch DeValliere, DC bdevalliere@health.nv.gov or Karissa Loper, MPH kloper@health.nv.gov

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23342**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3648-08**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS, NSHE on behalf of Dept. Psychiatry**Contractor Name: **BOARD OF REGENTS, NSHE on behalf of Dept. Psychiatry and Behavioral Sciences**Address: **1664 N. Virginia St. M/S 0332**City/State/Zip: **RENO, NV 89557-0332**Contact/Phone: **Elizabeth Cianci 775/682-8400**Vendor No.: **D35000816**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **C17655**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **Yes**

If "Yes", please explain

Discussions with the UNR School of Medicine regarding this agreement began in May, 2020. The UNR School of Medicine and Rural Clinics agreed to terms and rates in late June. We were unable to submit our contract until negotiations were complete.

3. Termination Date: **06/30/2021**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Psychiatric Telemed**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing telemedicine services to children, adolescents and outpatient rural clinic clients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,235.00**

Payment for services will be made at the rate of \$99,235.00 per Year

II. JUSTIFICATION

7. What conditions require that this work be done?

This interlocal allows DPBH and UNRMED to treat patients more efficiently utilizing teleconferencing equipment to quickly diagnose and treat patients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

DPBH is not staffed to provide these types of services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Pursuant to NRS 277.180, any one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

EXEMPT

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely provide services to other State agencies. Satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	chadwic1	07/28/2020 18:22:57 PM
Division Approval	chadwic1	07/28/2020 18:22:59 PM
Department Approval	mwinebar	07/29/2020 08:03:10 AM
Contract Manager Approval	tgrundy	07/30/2020 12:43:43 PM
Budget Analyst Approval	afrantz	08/06/2020 09:20:49 AM
BOE Agenda Approval	bwooldri	08/06/2020 15:31:22 PM
BOE Final Approval	Pending	

STATE OF NEVADA

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director



LISA SHERYCH
Administrator

IHSAN AZZAM, PhD., MD
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

4150 Technology Way, Suite 300

Carson City, NV 89706

Telephone: (775) 684-4220 · Fax: (775) 684-4211

July 24, 2020

MEMORANDUM

TO: Aaron Frantz
Budget Officer
Governor's Finance Office

THROUGH: Christina Hadwick
Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: Tina Gerber-Winn
Agency Manager
Rural Clinics

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – C 17655
(CETS #23342)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- **Name of Vendor:** Board of Regents of the Nevada System of Higher Education on behalf of the University of Nevada School of Medicine (UNRMED), Department of Psychiatry and Behavioral Sciences.
- **Services to be provided:** One Child and Adolescent Fellow, one Psychiatric Resident, and one Faculty Supervisor will provide Telemedicine/Psychiatric Services to various Mental Health Clinics throughout Rural Nevada. UNRMED Faculty Supervision will be providing 4 hours of supervision for both Child and Adolescent Fellows during their block scheduled appointment times.
- **Funding source and expenditure category:** BA3648 - CAT 08; GFUND-100%
- **Requested start date of work:** July 1, 2020
- **Expected execution date of agreement:** September 8, 2020
- **Detailed explanation as to why a retroactive agreement is necessary, including:**
 - Reason(s) why the agreement was not submitted timely:
 - Discussions with the UNR School of Medicine regarding this agreement began in May 2020. Discussions were centered around terms, staff hours, and hourly rates. We were unable to submit our contract until these matters were resolved in June 2020.
 - **Describe the impact to the program/services if this work is not started prior to the execution of the agreement:** If the work is not started prior to the execution of the agreement, there may be a lapse in services to children, adolescent and adult consumers with mental health challenges. This lapse may result in increased risk of hospitalization and need for emergency services.

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

- **Explain how the program/bureau will prevent future retroactive requests:** Rural Clinics maintains an active tracking sheet for all contractual agreements. We will continue this practice and review the status of all new contracts and renewals on a weekly basis to ensure the steps to completion are assertively pursued.

If you have any questions, please contact Greg Kitchingman (gkitchingman@health.nv.gov) at (775) 684-5023 or Brian Burriess (brianburriess@health.nv.gov) at (775) 684-5029.

cc: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23347**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-49**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **8TH JUDICIAL DISTRICT COURT OF CLARK COUNTY**Contractor Name: **8TH JUDICIAL DISTRICT COURT OF CLARK COUNTY**Address: **DISTRICT COURT ADMIN # 82
200 LEWIS AVE**City/State/Zip: **LAS VEGAS, NV 89155-0001**Contact/Phone: **702/671-3107**Vendor No.: **T81026920AH**NV Business ID: **Gov't Entity**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **90.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **10.00 % State Share of Collections**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2024**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Access & Visitation**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing mediation services, supervised visitation and formulation of parenting plans to include establishment and administrating programs to support and facilitate non-custodial parents access to and visitation of their children.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$304,000.00**

Other basis for payment: Actual per Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Public Law 104-193 Title III Subtitle I directs grants to states for access and visitation programs. The funding will be used to provide mediation services, supervised visitation, and formulate parenting plans and participation in other auxiliary services by the parties.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with DWSS and providing satisfactory service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	07/10/2020 12:06:51 PM
Division Approval	bberry	07/27/2020 08:44:46 AM
Department Approval	mwinebar	07/27/2020 14:34:34 PM
Contract Manager Approval	mpomerle	07/31/2020 09:28:39 AM
Budget Analyst Approval	bwooldri	08/06/2020 15:26:49 PM
BOE Agenda Approval	bwooldri	08/06/2020 15:26:52 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23414**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MAXIMUS HUMAN SERVICES, INC.**Contractor Name: **MAXIMUS HUMAN SERVICES, INC.**Address: **1891 METRO CENTER DR**City/State/Zip: **RESTON, VA 20190-5287**Contact/Phone: **703/251-8500**Vendor No.: **T32002765**NV Business ID: **NV20091030881**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **66.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **34.00 % State Share of Collections**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2022**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Employer Web Service**

5. Purpose of contract:

This is a new contract to provide ongoing web hosting and maintenance of the web based electronic system for the Nevada Child Support Employer Services Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00**

Payment for services will be made at the rate of \$125,000.00 per per Fiscal Year

Other basis for payment: \$100,000 in annual maintenance not to exceed 350 hours and \$25,000 in web hosting costs.

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal regulations allow the Child Support Enforcement Program to obtain employment verification information on noncustodial parents for the purpose of enforcing child support court orders.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the resources nor expertise to provide this service.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200708

Approval Date: 07/14/2020

c. Why was this contractor chosen in preference to other?

To continue to provide maintenance to the current system developed by this vendor.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with DWSS and providing satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief- Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	07/21/2020 10:42:26 AM
Division Approval	bberry	07/27/2020 08:45:05 AM
Department Approval	mwinebar	07/27/2020 17:03:22 PM
Contract Manager Approval	mpomerle	07/31/2020 09:03:13 AM
EITS Approval	tgalluzi	07/31/2020 09:23:54 AM
Budget Analyst Approval	bwooldri	08/06/2020 15:22:58 PM
BOE Agenda Approval	bwooldri	08/06/2020 15:23:02 PM
BOE Final Approval	Pending	



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	20070802

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>Division of Welfare and Supportive Services</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Cathy Kaplan, Chief, Child Support Enforcement Program</i>	<i>(775) 684-0752</i>	<i>ckaplan@dwss.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Maximus Human Services</i>
	Contact Name:	<i>Employer Web Services</i>
	Complete Address:	<i>2755 Pence Loop Southeast, Salem OR 97302</i>
	Telephone Number:	<i>971-915-5151</i>
	Email Address:	<i>RobertBWales@Maximus.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<input checked="" type="checkbox"/>
	Professional Service Exemption:	

1d	Contract Information:				
	Is this a new Contract?	Yes		No	<input checked="" type="checkbox"/>
	Amendment:	#			
	CETS:	#			

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	End Date:	<i>10/1/2020</i> <i>9/30/2022, with the option to extend for two additional 1-year periods.</i>

1f	Funding:	
	State Appropriated:	
	Federal Funds:	<i>66%</i>
	Grant Funds:	
	Other (Explain):	<i>State Share of Collections – 34%</i>

Purchasing Use Only:	
Approval #:	200708 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$250,000: \$125,000 each year for FY21-FY22.

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>The vendor hosts a website and maintains a web based electronic system that captures, stores, displays, adds, changes, and deletes contact information for each employer who's status has been coded as verified in the current child support database, Nevada Operations Multi-Automated Data System (NOMADS). This is a secure interactive website. The vendor generates and transfers forms for Employer Verifications and Income Withholding Orders to the Division of Welfare and Supportive Services via SFTP through an established VPN L2L tunnel.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>This database has been in service since 2010 and contains all the contact information on current employers in the State of Nevada needed for verification of employment and to establish wage withholdings for child support from the employers of non-custodial parents.</i>

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>The child support program is currently in the development stage of building a new database called NVKIDS. This contract is to extend the current services until NVKIDS is completed.</i>

5	Were alternative services or commodities evaluated? Check One.	Yes:		No:	<input checked="" type="checkbox"/>
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.				
	b. <u>If not</u> , why were alternatives not evaluated?				
	<i>The services currently provided meet the needs of the child support program and will be included in the new NVKIDS system. This employer services will be built into NVKIDS. Continuing the service will allow the child support program to use the existing database and not have to focus on rebuilding a new database for the short term until NVKIDS is available.</i>				

Purchasing Use Only:	
Approval #:	2007050

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.</i>			Yes:	X	No:	
	a. If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:						
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)		
	June 2010	Aug 2016	\$2,511,432.42	Contract was procured through Clark County	RFP No. 601855-10		
	Sept 2016	Sept 2020	\$ 500,000	Maintenance and Operation	No solicitation required for this contract		
			\$				
			\$				

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	The child support program will not meet the federal timeframes for issuing employment verification and wage withholdings which could result in federal penalties to the Temporary Assistance for Needy Families (TANF) block grant.

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	The cost of this service has remained the same for the last 4 years. The contractor will continue to support the same cost for this extension.

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. If yes, please provide details regarding future obligations or needs.				

Purchasing Use Only:

Approval #:

2007080


By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.



Agency Representative Initiating Request

Cathy Kaplan
Print Name of Agency Representative Initiating Request

6/24/2020
Date



Signature of Agency Head Authorizing Request

6/24/2020

Steve H. Fisher
Print Name of Agency Head Authorizing Request

6/24/2020
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:



Administrator, Purchasing Division or Designee

7/14/2020
Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Steve Fisher, Administrator, DWSS
Bart London, Chief IT Manager, DWSS
Brenda Berry, ASO IV, DWSS
Jennifer Quihuis, BA III, DWSS

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technology Investment Administrator, EITS, DOA

SUBJECT: TIN Review Completed – *DPBH – EWS for Child Support - MAXIMUS* – T3238129

DATE: July 1st, 2020

We have completed the review for Division of Welfare and Supportive Services (DWSS) – *EWS for Child Support - MAXIMUS* TIN.

The submitted TIN, for an estimated value of \$250,000, supports the renewal of maintenance, licensing, or consulting agreement already in place at the agency.

The agency has been using *Employer Web Services* for years for the verification of employer data and is continuing the services provided by MAXIMUS.

If there are to be any changes to enterprise services, including: network, server, telecom etc. please notify EITS as soon as possible.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23348**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-49**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WASHOE COUNTY SECOND JUDICIAL DISTRICT COURT**Contractor Name: **WASHOE COUNTY SECOND JUDICIAL DISTRICT COURT**Address: **WASHOE SECOND JUDICIAL DIST CT
75 COURT ST**City/State/Zip: **RENO, NV 89501**Contact/Phone: **775/328-3569**Vendor No.: **T40283400Y**NV Business ID: **Gov't Entity**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **90.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **10.00 % State Share of Collections**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2024**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Access & Visitation**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing mediation services, supervised visitation and formulation of parenting plans to include establishment and administrating programs to support and facilitate non-custodial parents access to and visitation of their children.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$124,000.00**

Other basis for payment: Actual per Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Public Law 104-193 Title III Subtitle I directs grants to states for access and visitation programs. The funding will be used to provide mediation services, supervised visitation, and formulate parenting plans and participation in other auxiliary services by the parties.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

EXEMPT

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the division and providing satisfactory service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	07/06/2020 16:13:41 PM
Division Approval	bberry	07/27/2020 08:58:19 AM
Department Approval	mwinebar	07/27/2020 14:39:43 PM
Contract Manager Approval	mpomerle	07/31/2020 09:29:38 AM
Budget Analyst Approval	bwooldri	08/06/2020 15:14:53 PM
BOE Agenda Approval	bwooldri	08/06/2020 15:14:56 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23230**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3646-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GREENSCAPES OF NEVADA, LLC**Contractor Name: **GREENSCAPES OF NEVADA, LLC**Address: **5965 N. CHIEFTAIN ST**City/State/Zip: **LAS VEGAS, NV 89149**Contact/Phone: **Bryan Vellinga 702/533-2428**Vendor No.: **T27033446**NV Business ID: **NV20131448439**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	66.00 %	Fees	0.00 %
X	Federal Funds	34.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/09/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2023**Contract term: **2 years and 356 days**4. Type of contract: **Contract**Contract description: **Landscaping**

5. Purpose of contract:

This is a new contract to provide ongoing grounds maintenance and landscaping services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$150,000.00**

Payment for services will be made at the rate of \$2,600.00 per Month for general maintenance

Other basis for payment: Plus an additional \$56,400.00 for repairs, planting and tree trimming

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division of Child and Family Services has a campus of approximately 3-1/2 acres that needs to be cared for pursuant to NRS Chapter 433, through the use of landscaping and grounds maintenance service including lawn care, tree trimming, pruning and irrigation service.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No State agency offering this service and agency does not have staffing for performing this task.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date: 02/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Division of Child and Family Services-service satisfactory
Southern Nevada Adult Mental Health-service satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Darryl Lambert, Facility Supervisor Ph: 702-249-2028

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	07/23/2020 12:37:14 PM
Division Approval	knielsen	07/23/2020 16:10:10 PM
Department Approval	mwinebar	07/29/2020 08:11:03 AM
Contract Manager Approval	sknigge	07/30/2020 08:34:17 AM
Budget Analyst Approval	jyou23	08/03/2020 13:48:05 PM
BOE Agenda Approval	bwooldri	08/05/2020 15:53:22 PM
BOE Final Approval	Pending	



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:

Approval #: G200501 @

REQUEST TO USE ANOTHER GOVERNMENTAL SOLICITATION

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information - Note: Approval notification will be sent to only the contact(s) listed below:		
	State Agency Name:	<i>Division of Child and Family Services</i>	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Rick Rassier, Admin Services Officer III</i>	<i>702-486-4335</i>	<i>rrassier@dcfs.nv.gov</i>
	<i>Barbra Burke, Program Officer I</i>	<i>702-486-8064</i>	<i>blburke@dcfs.nv.gov</i>

2	Vendor Information:	
	Identify Vendor:	<i>Greenscapes of Nevada, LLC</i>
	Contact Name:	<i>Bryan Vellinga</i>
	Complete Address:	<i>5965 N. Chieftain St., Las Vegas, NV 89149</i>
	Telephone Number:	<i>702-533-2428</i>
	Email Address:	<i>bryan@greenscapesnv.com</i>

3	State/Entity that Released the Solicitation & Type of Solicitation. Must be Competitively Bid.	
	Type of Solicitation:	<i>Request for Proposal</i>
	Identify Original State/Entity:	<i>DHHS-Southern Nevada Adult Mental Health Services</i>
	Contact Name:	<i>Menyone Thomas</i>
	Telephone Number:	<i>702-486-4252</i>
	Email Address:	<i>mthomas@health.nv.gov</i>

4	Contract Dates: Your Contract Term Date Cannot Exceed Term Date of Original Contract.				
	Original Contract:	Start Date:	<i>10/08/2019</i>	End Date:	<i>09/30/2023</i>
	New Contract:	Start Date:	<i>09/01/2020</i>	End Date:	<i>09/30/2023</i>

5	Funding for this new contract:	
	State Appropriated:	<i>66%</i>
	Federal Funds:	<i>34%</i>
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #: 62005010

6	Does the Scope of Work (SOW) in the original contract meet/exceed your needs?	Yes:	X	No:	
	To ensure such, requesting agency must request a copy of the State/entities Contract and SOW to be reviewed and approved by the agency's Deputy Attorney General (DAG). A copy of the Contract and written approval from the agency's DAG must be included with the request to the Purchasing Division.				
7	Did the agency receive awarded vendors permission to contract?	Yes:	X	No:	
	Written approval from the awarded vendor must accompany the agency's request/submission to the Purchasing Division.				
8	To ensure fair & reasonable pricing to the State, did the agency request a copy of the awarded vendors technical and cost proposals?	Yes:	X	No:	
	Copies of such must be included with submission to the Purchasing Division.				
9	Did the agency address any Federal Requirements associated with the contract?	Yes:	X	No:	
10	Is this vendor registered in NevadaEPro?	Yes:	X	No:	
	Per Executive Order 2019-2, prior to entering into a contract with a vendor they must be registered in NevadaEPro.				
11	Is this vendor registered with the Nevada Secretary of State's Office?	Yes:	X	No:	
	Pursuant to NRS 76, prior to entering into a contract with a vendor they must obtain a Nevada Business License.				
12	Is a Business Associate Addendum or other agency specific form(s) required?	Yes:	X	No:	
	If so, please include copies with submission to the Purchasing Division.				

Purchasing Use Only:	
Approval #:	G200501@

By signing below, I know and understand the contents of this request and attest that all statements are true and correct.

Agency Representative Initiating Request

Print Name of Agency Representative Initiating Request

Date

Mandi Davis

Signature of Agency Head Authorizing Request

Mandi Davis, Deputy Administrator

Print Name of Agency Head Authorizing Request

4/16/20

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NRS 333.475. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 300.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:

Kevin D. Doty

Administrator, Purchasing Division or Designee

5/5/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **17677**Amendment Number: **2**Agency Name: **DEPARTMENT OF CORRECTIONS**Legal Entity Name: **First Class Vending, Inc.**Agency Code: **440**Contractor Name: **First Class Vending, Inc.**Appropriation Unit: **3708-00**Address: **6875 Suva Street**Is budget authority available?: **Yes**City/State/Zip: **Bell Gardens, CA 90201**

If "No" please explain: Not Applicable

Contact/Phone: **Matthew Marsh 323/268-7632**Vendor No.: **T32004057**NV Business ID: **NV20181040694**To what State Fiscal Year(s) will the contract be charged? **2017-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2016**Anticipated BOE meeting date **10/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **12/31/2020**Contract term: **4 years and 184 days**4. Type of contract: **Revenue Contract**Contract description: **Vending Services**

5. Purpose of contract:

This is the second amendment to the original contract which provides vending machine services at correctional visiting and employee break rooms in southern Nevada. This amendment increases the maximum amount from \$647,935.75 to \$984,718.00 due to an increased need for these services.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$647,935.78	\$647,935.78	\$647,935.78	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$336,782.22	\$336,782.22	\$336,782.22	Yes - Action
3. New maximum contract amount:	\$984,718.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a contract to provide continued revenue for the Offenders Store Fund through commission received from vending machine sales.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The department does not have the staff and/or equipment necessary to perform this service. No other State agency offers this service.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3226 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 01/26/2016 Anticipated re-bid date: 01/24/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has held contracts with Department of Employment, Training and Rehabilitation, Division of Welfare and Supportive Services and has a current contract with the Nevada Department of Corrections.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	07/31/2020 14:41:26 PM
Division Approval	amonro1	08/03/2020 08:49:27 AM
Department Approval	sewart	08/03/2020 09:55:57 AM
Contract Manager Approval	hedmonds	08/05/2020 11:38:05 AM
Budget Analyst Approval	bmacke1	08/11/2020 11:09:01 AM
BOE Agenda Approval	nhovden	08/12/2020 16:55:13 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17433** Amendment Number: **3**

Agency Name: **DEPARTMENT OF CORRECTIONS** Legal Entity Name: **Scroll K Vaad Hakashrus of Denver**

Agency Code: **440** Contractor Name: **Scroll K Vaad Hakashrus of Denver**

Appropriation Unit: **3710-04** Address: **245 S. Benton Street**

Is budget authority available?: **Yes** City/State/Zip: **Lakewood, CO 80226-2453**

If "No" please explain: Not Applicable Contact/Phone: **Rabbi Yisroel Rosskamm 303/949-0673**

Vendor No.: **T29030602**

NV Business ID: **NV20141581429**

To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2016**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/30/2020**

Contract term: **5 years and 92 days**

4. Type of contract: **Contract**

Contract description: **Kosher Food Cert.**

5. Purpose of contract:

This is the third amendment to the original contract which provide ongoing kosher certification of Common Fare kitchens and rabbinical supervision of kosher food preparation at the department facilities. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$420,938 to \$529,394 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$393,824.00	\$393,824.00	\$393,824.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$27,114.00	\$27,114.00	\$27,114.00	Yes - Info
2. Amount of current amendment (#3):	\$108,456.00	\$108,456.00	\$135,570.00	Yes - Action
3. New maximum contract amount:	\$529,394.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

As a result of a court case involving inmates being provided certified kosher food for religious purposes, the department made a decision on good faith to proactively implement kosher kitchens in various institutions, and employ a court recommended rabbinic food certifying organization to provide the inmates with a degree of confidence in the kosher food being served to department inmates.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The department does not have a certified Jewish food oversight Rabbi on staff to provide the required rabbinical supervision and certification of the Common Fare Menu diet and all required regular inspections to ensure the department continues to meet Kosher standards. No other State agency offers these services.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 160403

Approval Date: 04/22/2016

c. Why was this contractor chosen in preference to other?

This vendor was authorized for this service for the department by the U.S. Court case Ackerman v. State, Department of Corrections.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY13 to present with Nevada Department of Corrections. Services have been verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

bweisent

07/15/2020 17:56:51 PM

Division Approval	amonro1	07/16/2020 15:23:30 PM
Department Approval	sewart	07/17/2020 09:48:18 AM
Contract Manager Approval	aroma2	08/04/2020 16:00:26 PM
Budget Analyst Approval	bmacke1	08/11/2020 13:35:48 PM
BOE Agenda Approval	nhovden	08/14/2020 10:18:49 AM



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:	
Approval #:	325 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information -- Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	<i>Nevada Department of Corrections</i>	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Alicia Roman, Contracts Manager</i>	<i>775-977-5673</i>	<i>aroman@doc.nv.gov</i>

2	Contractor Information:	
	Contractor:	<i>Scroll K Vaad Hakashrus of Denver</i>
	Contact Name:	<i>Rabbi Yisroel Rosskamm</i>
	Complete Address:	<i>245 S. Benton Street, Lakewood, CO 80226-2453</i>
	Phone Number:	<i>303-949-0673</i>
	Email Address:	<i>yrosshamm@scrollk.org</i>

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	N/A
	CETS #:	N/A		
	Contract Amount:	N/A		
	Contract Term:	Start Date:	N/A	End Date:

Purchasing Use Only:	
Approval #:	325(CA)

4	Current Contract Information:				
	Solicitation Type, if applicable:	Waiver			#: 160403
	CETS #:	17433			
	Initial Contract Amount:	\$393,824.00			
	Contract Term:	Start Date:	07/01/2016	End Date:	06/30/2020

5	Amendment Information – List <u>all previously</u> approved amendments:			
	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
	1	To clarify the annual certification fees and new Risk Management insurance requirement.	\$0.00	06/30/20

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	2	Extend the contract term and amount by 3 months to allow for BOE approval.	\$27,114.00	09/30/20
	3	Extend the contract term and amount to align with expiration of the other NDOC inmate food distributors and dietician.	\$108,456.00	09/30/21

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?			
	NDOC originally contracted with this vendor as a condition of a court settlement resulting from inmate lawsuits regarding improper food preparation. It must remain in effect for the duration of the current food distributor and dietician contracts. An RFP will be prepared for all inmate food services prior to September 30, 2021, as the intent is to solicit bids for one contract that encompasses all required food preparation services.			

8	What are the potential consequences to the State if the contract extension request is denied?			
	This contract is required to maintain certified kosher inmate food preparation standards for religious purposes as a good faith effort to employ the court recommended rabbinic supervision. If this contract is not extended to align with the existing food service contracts, NDOC will not be able to ensure that the kosher preparation methods are adhered to through 09/30/21, exposing the State of Nevada to further lawsuits, as occurred previously.			

Purchasing Use Only:	
Approval #:	325 (C)

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.


 Signature of Agency Representative Initiating Request

5/29/20

Alicia Roman, Contracts Manager
 Print Name of Agency Representative Initiating Request

05/29/20
 Date


 Signature of Agency Head Authorizing Request

John Borrowman, Deputy Director Support Services
 Print Name of Agency Head Authorizing Request

5/29/2020
 Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:


 Administrator, Purchasing Division or Designee

6/3/2020
 Date

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

Purchasing Use Only:

Approval#: 160403

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: Nevada Department of Corrections (NDOC)		
	Contact Name and Title	Phone Number	Email Address
	Dawn Rosenberg, Chief of Purchasing/Inmate Services	775/887-3219	drosenberg@doc.nv.gov
	Janet Hardy, Contracts Manager	775/887-3333	jahardy@doc.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Scroll K/Vaad Hakashrus of Denver
	Contact Name:	Rabbi Yisroel Rosskamm, Rabbinical Administrator
	Address:	1350 Vrain St., Denver, CO 80204
	Telephone Number:	303/949-0673
	Email Address:	yrosskamm@scrollk.org

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	X
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	X	No
	Amendment:			
	CETS:			

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	07/01/2016	End Date: 06/30/2020

1f	Funding:	
	State Appropriated:	BA 3710 CAT 04
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	\$393,824.00

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>As a result of a court case involving inmates being provided certified kosher food for religious purposes, the Department made a decision on good faith to proactively implement kosher kitchens in various institutions, and employ a court recommended rabbinic food certifying organization to provide the inmates with a degree of confidence in the kosher food being served to Department inmates.</i>
	<i>In the process of the certification of Kosher compliance, Scroll K was to implement and maintain certification for the purpose of providing a reasonable defense to further Kosher diets compliance with Kashrut.</i>
<i>Scroll K/Vaad Hakashrus of Denver currently provides rabbinical supervision of kosher food preparation, and certification of the Common Fare diet at the following NDOC facilities: Northern Nevada Correctional Center, Lovelock Correctional Center, Ely State Prison, High Desert State Prison, Southern Desert Correctional Center and Florence McCure Women's Correctional Center. Certification requires 24/7 video monitoring of the kitchens, inspections by Skroll K/Vaad Hakashrus of Denver, menu and food usage approvals.</i>	

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>As a result of a court negotiated settlement (U.S. District Court – Case No. 2:11-cv-00883-GMN-PAL Howard Ackerman vs. Department of Corrections), the parties jointly agreed that Scroll K/Vaad Hakashrus, currently under contract with the Colorado Department of Corrections, met the requirements of Orthodox Kosher food law as well as having correctional experience.</i>
	<i>A year after the Department implemented the kosher program with Scroll K, the judge dismissed the class action as well as Ackerman's case. (The case is moving through the appeal process). The Department has successfully established a kosher certified program to provide inmates with food that meets the requirements of Kashrut and the inmates trust Rabbi Rosskamm and Scroll K. To find another rabbinical food oversight organization could possible effect the outcome of the court case appeal and may create trust issues with inmates leading to further litigation.</i>

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>It was agreed to by both parties in the legal case that Scroll K was the best to provide the rabbinic certification of the Departments Kosher Kitchens</i>
	<i>For the Good of the State and the Department it would not to the State's benefit to hire a new Rabbi service should the inmate win the appeal and the Department would be forced to re-hire Scroll K for this service.</i>

5	Were alternative services or commodities evaluated? Check One.		Yes:		No:	X
	a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i>					
	b. <i>If not, why were alternatives not evaluated?</i>					
	<i>It was agreed to by both parties in the legal case that Scroll K was the best to provide the rabbinic certification of the Departments Kosher Kitchens.</i>					

6	Has the agency purchased this service or commodity in the past? Check One. <i>Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers must accompany this request.</i>				Yes:	X	No:	
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP, RFQ, Waiver)			
	7/23/2012	6/30/2016	\$387,308.41	Kosher Food Cert	Waiver #120614			
			\$					
			\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>If another vendor was employed by the Department and the inmate should win the appeal, it would be costly for the Department to go back to the agreed upon Scroll K for rabbinic certification of our kitchen facilities preparing and serving kosher meals to inmates.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>During the process of a court settlement, it was agreed to by both parties that Scroll K was the vendor of choice for this contract.</i>

9	Will this purchase obligate the State to this vendor for future purchases? Check One.	Yes:	X	No:	
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
	<i>It is the intent of the Department to enter into a four (4) year contract with an option to renew annually thereafter. Rabbinic certification as required by the law of Kashrut will be an ongoing requirement for the Department as long as there are religious requirement regarding common fare/kosher meals for inmates.</i>				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.



Agency Representative Initiating Request

Janet Hardy, Contracts Manager

Print Name of Agency Representative Initiating Request

21 ✓
04/22/2016

Date



Signature of Agency Head Authorizing Request

Scott K. Sisco, Deputy Director Support Services

Print Name of Agency Head Authorizing Request

4/21/2016

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. **This signature does not exempt your agency from any other processes that may be required.**

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:



Administrator, Purchasing Division or Designee

4-22-2016

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **17999**Amendment Number: **4**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **CHINESE FOOD SOLUTIONS, INC.**Agency Code: **550**Contractor Name: **ASIAN FOOD SOLUTIONS, INC.**Appropriation Unit: **1362-21**Address: **2572 W. STATE ROAD 426
SUITE 2016**Is budget authority available?: **Yes**City/State/Zip: **OVIEDO, FL 32765-8389**

If "No" please explain: Not Applicable

Contact/Phone: **Allan Lam 888-499-6888**Vendor No.: **T32004323**NV Business ID: **NV20161328865**To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Foods Processin**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$2,527,143 to \$3,246,801 due to the continued need for these services.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$688,900.00	\$688,900.00	\$688,900.00	Yes - Action
a. Amendment 1:	\$361,100.00	\$361,100.00	\$361,100.00	Yes - Action
b. Amendment 2:	\$1,275,000.00	\$1,275,000.00	\$1,275,000.00	Yes - Action
c. Amendment 3:	\$202,143.00	\$202,143.00	\$202,143.00	Yes - Action
2. Amount of current amendment (#4):	\$719,658.00	\$719,658.00	\$719,658.00	Yes - Action
3. New maximum contract amount:	\$3,246,801.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

Jennie O Turkey
Tyson
Schwans

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 03/26/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDA has contracted with this vendor since 2016. This vendor has provided satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	bbel1	08/03/2020 13:42:48 PM
Division Approval	bbel1	08/03/2020 13:42:54 PM
Department Approval	bbel1	08/03/2020 13:43:00 PM
Contract Manager Approval	melli2	08/06/2020 16:17:11 PM
Budget Analyst Approval	mlynn	08/11/2020 13:03:26 PM
BOE Agenda Approval	laaron	08/12/2020 10:36:56 AM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:

Approval #:

4344 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	<u>Department of Agriculture</u>	
	Contact Name and Title	Phone Number	Email Address
	Homa Anooshehpoor, Food & Nutrition Administrator	775-223-2164	hanooshehpoor@agri.nv.gov

2	Contractor Information:	
	Contractor:	<u>Chinese Food Solutions DBA Asian Food Solutions</u>
	Contact Name:	<u>Allan Lam, CFO</u>
	Complete Address:	<u>2572 W. State Rd, Suite 2016, Oviedo, FL 32765</u>
	Phone Number:	<u>888-499-6888</u>
Email Address:	<u>Allan.lam@asianfoodsolutions.com</u>	

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	
	CETS #:			
	Contract Amount:			
	Contract Term:	Start Date:		End Date:

Purchasing Use Only:

Approval #:

#3440

4	Current Contract Information:			
	Solicitation Type, if applicable:		#:	RFP 3237
	CETS #:	#17999		
	Initial Contract Amount:	\$688,900		
	Contract Term:	Start Date:	10/01/2016	End Date:

	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
5	1	Increased budget authority	Increased \$361,100	None
	2	Increased budget authority/date change	Increased \$1,275,000	9/30/2020
	3	Increased budget authority/date change	Increased \$202,143	None

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	4	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$719,658	09/30/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	#3440

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Homa Anooshehpoor

Digitally signed by Homa Anooshehpoor
DN: cn=Homa Anooshehpoor, o=NDA, ou=Food and Nutrition,
email=hanooshehpoor@agdnv.gov, c=US
Date: 2020.07.31 10:40:55 -0700

Signature of Agency Representative Initiating Request

Homa Anooshehpoor

7/31/20

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

Andre Urruty

8/01/2020

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Dwyer

8/4/2020

Administrator, Purchasing Division or Designee

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18004**Amendment Number: **5**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **JENNIE-O TURKEY STORE SALES, LLC**Agency Code: **550**Contractor Name: **JENNIE-O TURKEY STORE SALES, LLC**Appropriation Unit: **1362-21**Address: **2505 Willmar Ave SW**Is budget authority available?: **Yes**City/State/Zip: **Willmar, MN 56201**

If "No" please explain: Not Applicable

Contact/Phone: Taylor Parkhurst, Western K12 Sales Manager 619-851-8623

Vendor No.: T27012910B

NV Business ID: NV20111148418

To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: RFP # 3237

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$2,810,000 to \$2,861,331 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$249,700.00	\$249,700.00	\$249,700.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$75,300.00	\$75,300.00	\$75,300.00	Yes - Action
c. Amendment 3:	\$1,175,000.00	\$1,175,000.00	\$1,175,000.00	Yes - Action
d. Amendment 4:	\$1,310,000.00	\$1,310,000.00	\$1,310,000.00	Yes - Action
2. Amount of current amendment (#5):	\$51,331.00	\$51,331.00	\$51,331.00	Yes - Action
3. New maximum contract amount:	\$2,861,331.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

Schwans
Tyson
Bongards Creameries

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: Anticipated re-bid date: 01/04/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current contractor for Nevada Department of Agriculture since 2012. Vendor services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbel1	08/03/2020 15:29:11 PM
Division Approval	bbel1	08/03/2020 15:29:17 PM
Department Approval	bbel1	08/03/2020 15:29:25 PM
Contract Manager Approval	melli2	08/06/2020 15:27:31 PM
Budget Analyst Approval	mlynn	08/08/2020 14:08:53 PM
BOE Agenda Approval	laaron	08/10/2020 15:29:39 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:

Approval #: #3420

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	Department of Agriculture	
	Contact Name and Title	Phone Number	Email Address
	Homa Anooshehpoor, Food & Nutrition Administrator	775-223-2164	hanooshehpoor@agri.nv.gov

2	Contractor Information:	
	Contractor:	Jennie O Turkey Store Sales
	Contact Name:	Taylor Parkhurst
	Complete Address:	2505 Willmar Ave SW
	Phone Number:	619-851-9623
	Email Address:	tlparkhurst@j-ots.com

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	RFQ 1920
	CETS #:	13518		
	Contract Amount:	\$3,100,000.00		
	Contract Term:	Start Date:	07/10/2012	End Date:

Purchasing Use Only:	
Approval #:	#3420

4	Current Contract Information:				
	Solicitation Type, if applicable:			#:	RFP 3237
	CETS #:	#18004			
	Initial Contract Amount:	\$249,700			
	Contract Term:	Start Date:	10/01/2016	End Date:	09/30/2018

Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
1	Added products	None	None
2	Increased budget authority	Increased \$75,300	None
3	Increased budget authority	Increased \$1,175,000	None
4	Increased budget authority	Increased \$1,310,000	9/30/2020

5	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	5	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$51,331	09/30/2021

6	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

7	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	#3420


By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Homa Anooshehpour Digitally signed by Homa Anooshehpour
DN: cn=Homa Anooshehpour, o=HIDA, ou=Food and Nutrition,
email=hanooshehpour@agrin.gov, c=US
Date: 2020.07.31 10:42:54 -0700

Signature of Agency Representative Initiating Request

Homa Anooshehpour 7/31/20

Print Name of Agency Representative Initiating Request Date

 8/01/2020


Signature of Agency Head Authorizing Request

ANDRE WARKITY 8/01/2020

Print Name of Agency Head Authorizing Request Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

 8/4/2020

Administrator, Purchasing Division or Designee Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18018**Amendment
Number: **3**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **1362-21**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity
Name: **LAND O' LAKES, INC,**Contractor Name: **LAND O' LAKES, INC,**Address: **1200 COUNTY ROAD F WEST**City/State/Zip **ARDEN HILLS, MN 55112-2921**Contact/Phone: **ALETHIA SCHEETT, K-12 SPECIALIST
651-375-2562**Vendor No.: **PUR0003799B**NV Business ID: **NV19811013447**To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **10/01/2016**
Examiner's approval?Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2020**
Termination Date:Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the third amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$512,971 to \$669,077 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$324,000.00	\$324,000.00	\$324,000.00	Yes - Action
a. Amendment 1:	\$120,000.00	\$120,000.00	\$120,000.00	Yes - Action
b. Amendment 2:	\$68,971.00	\$68,971.00	\$68,971.00	Yes - Action
2. Amount of current amendment (#3):	\$156,106.00	\$156,106.00	\$156,106.00	Yes - Action
3. New maximum contract amount:	\$669,077.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

Schwans
Bongards Creameries
Tyson

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 01/04/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDA's Food & Nutrition division has contracted with this vendor since 2012. Vendor has provided excellent service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

Budget Account Approval

User

melli2

Signature Date

07/31/2020 09:56:09 AM

Division Approval	bbel1	07/31/2020 09:56:39 AM
Department Approval	bbel1	07/31/2020 09:56:44 AM
Contract Manager Approval	melli2	08/06/2020 15:38:40 PM
Budget Analyst Approval	mlynn	08/08/2020 12:16:15 PM
BOE Agenda Approval	laaron	08/10/2020 16:26:04 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:	
Approval #:	#340 (N)

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	Department of Agriculture	
	Contact Name and Title	Phone Number	Email Address
	Homa Anooshehpour, Food & Nutrition Administrator	775-223-2164	hanooshehpour@agri.nv.gov

2	Contractor Information:	
	Contractor:	Land O Lakes
	Contact Name:	Alethia Scheet
	Complete Address:	1200 County Rd F West, Arden Hills, MN 55112
	Phone Number:	(651) 375-2364
	Email Address:	K12 Specialist@landolakes.com

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	RFQ#1920
	CETS #:	13058		
	Contract Amount:	\$3,000,000		
	Contract Term:	Start Date:	7/10/2012	End Date:

Purchasing Use Only:

Approval #:

#3400

4	Current Contract Information:				
	Solicitation Type, if applicable:			#:	RFP 3237
	CETS #:	#18018			
	Initial Contract Amount:	\$324,000			
	Contract Term:	Start Date:	10/01/2016	End Date:	09/30/2020

	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
5	1	Increased budget authority/date change	Increased \$120,000	9/30/2020
	2	Increased budget authority	Increased \$68,971	None

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	3	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increased \$156,106	09/30/2021

7.	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	#340 @

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Homa Anooshehpour

Digitally signed by Homa Anooshehpour
DN: cn=Homa Anooshehpour, o=HDA, ou=Food and
Nutrition, email=hanooshehpour@agriliv.gov, c=US
Date: 2020.07.29 12:13:02 -0700

Signature of Agency Representative Initiating Request

Homa Anooshehpour

7/29/20

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

8/01/2020

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty

Administrator, Purchasing Division or Designee

8/4/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18019**Amendment Number: **4**Legal Entity Name: **LET'S DO LUNCH, INC.**Agency Name: **DEPARTMENT OF AGRICULTURE**Contractor Name: **LETS DO LUNCH, INC. DBA INTEGRATED FOOD SERVICE**Agency Code: **550**Address: **INTEGRATED FOOD SERVICE**Appropriation Unit: **1362-21**Is budget authority available?: **Yes**City/State/Zip: **GARDENA, CA 90248**

If "No" please explain: Not Applicable

Contact/Phone: **Jon R. Sugimoto, Vice President 310-523-3664**Vendor No.: **T81091571**NV Business ID: **NV20111272488**To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch Program using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$5,107,205 to \$9,406,640 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$1,984,100.00	\$1,984,100.00	\$1,984,100.00	Yes - Action
a. Amendment 1:	\$770,000.00	\$770,000.00	\$770,000.00	Yes - Action
b. Amendment 2:	\$757,673.00	\$757,673.00	\$757,673.00	Yes - Action
c. Amendment 3:	\$1,595,432.00	\$1,595,432.00	\$1,595,432.00	Yes - Action
2. Amount of current amendment (#4):	\$4,299,435.00	\$4,299,435.00	\$4,299,435.00	Yes - Action
3. New maximum contract amount:	\$9,406,640.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 03/25/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current contractor for Nevada Department of Agriculture and services have been satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbel1	07/01/2020 14:46:39 PM
Division Approval	bbel1	07/01/2020 14:46:43 PM
Department Approval	bbel1	07/01/2020 14:46:49 PM
Contract Manager Approval	melli2	08/06/2020 15:06:18 PM
Budget Analyst Approval	mlynn	08/06/2020 16:59:01 PM
BOE Agenda Approval	laaron	08/10/2020 15:00:18 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:	
Approval #:	3740

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	<i>Department of Agriculture</i>	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Homa Anooshehpoor, Food & Nutrition Administrator</i>	<i>775-223-2164</i>	<i>hanooshehpoor@agri.nv.gov</i>

2	Contractor Information:	
	Contractor:	Lets do Lunch Inc. DBA Integrated Food Service
	Contact Name:	Jon R. Sugimoto, Vice President
	Complete Address:	310 W Alondra Blvd., Gardena, CA 90248
	Phone Number:	(310)523-3664
	Email Address:	jrs@integratedfoodservice.com

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	
	CETS #:	13491		
	Contract Amount:	\$6,500,000		
	Contract Term:	Start Date:	07/10/2012	End Date:

Purchasing Use Only:	
Approval #:	334(C)

4	Current Contract Information:			
	Solicitation Type, if applicable:		#:	RFP 3237
	CETS #:	18019		
	Initial Contract Amount:	\$1,984,100		
	Contract Term:	Start Date:	10/01/2016	End Date:

Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
1	Increased budget authority/extend date	Increased \$ 770,000	09/30/2020
2	Increased budget authority	Increased \$ 757,673	None
3	Increased budget authority	Increased \$1,595,432	None

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	#4(C)	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$4,299,435	09/30/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	334 (C)

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

H. Am

Signature of Agency Representative Initiating Request

Homa Anoshkepo

Print Name of Agency Representative Initiating Request

6/19/20

Date

[Signature]

Signature of Agency Head Authorizing Request

6/19/2020

ANDRE URRUTY

Print Name of Agency Head Authorizing Request

6/19/2020

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty

Administrator, Purchasing Division or Designee

6/23/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18022** Amendment Number: **4**

Legal Entity Name: **OUT OF THE SHELL LLC**

Agency Name: **DEPARTMENT OF AGRICULTURE** Contractor Name: **OUT OF THE SHELL, LLC DBA YANGS 5TH TASTE**

Agency Code: **550** Address: **9658 REMER ST**

Appropriation Unit: **1362-21**

Is budget authority available?: **Yes** City/State/Zip: **SOUTH EL MONTE, CA 91733-3033**

If "No" please explain: Not Applicable Contact/Phone: **Adriana Briones-Cordova 909-451-6565**

Vendor No.: **T27031199**

NV Business ID: **NV20121391639**

To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$3,613,000 to \$4,807,050 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$1,413,000.00	\$1,413,000.00	\$1,413,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$2,200,000.00	\$2,200,000.00	\$2,200,000.00	Yes - Action
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#4):	\$1,194,050.00	\$1,194,050.00	\$1,194,050.00	Yes - Action
3. New maximum contract amount:	\$4,807,050.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 03/25/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDA has contracted with this vendor from 2012 to current. Their services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbe1	07/31/2020 16:39:26 PM
Division Approval	bbe1	07/31/2020 16:39:30 PM

Department Approval	bbel1	07/31/2020 16:39:36 PM
Contract Manager Approval	melli2	08/06/2020 15:46:43 PM
Budget Analyst Approval	mlynn	08/08/2020 13:54:59 PM
BOE Agenda Approval	laaron	08/12/2020 09:43:09 AM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:

Approval #: 13410

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name:	Department of Agriculture	
	Contact Name and Title	Phone Number	Email Address
	Homa Anooshehpoor, Food & Nutrition Administrator	775-223-2164	hanooshehpoor@agri.nv.gov

2	Contractor Information:	
	Contractor:	Out of the Shell DBA Yangs 5 th Taste
	Contact Name:	Adrianna Briones-Cordova
	Complete Address:	9658 Remer St, South El Monte, CA 91733
	Phone Number:	909-451-6565
Email Address:	adriana@yangs5thtaste.com	

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	RFQ 1920
	CETS #:	13589		
	Contract Amount:	\$5,175,000		
	Contract Term:	Start Date:	08/14/2012	End Date:

Purchasing Use Only:	
Approval #:	#3400

4	Current Contract Information:				
	Solicitation Type, if applicable:			#:	RFP 3237
	CETS #:	#18022			
	Initial Contract Amount:	\$1,413,000			
	Contract Term:	Start Date:	10/01/2016	End Date:	09/30/2018

	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
5	1	Added products	None	None
	2	Increased budget authority	Increased \$2,200,000	9/30/2020
	3	Vendor Name Assignment	None	None

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	4	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$1,194,050	09/30/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

<i>Purchasing Use Only:</i>	
Approval #:	#34100

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Homa Anooshehpoor

Digitally signed by Homa Anooshehpoor
DN: cn=Homa Anooshehpoor, o=HDA, ou=Food and
Nutrition, email=hanooshehpoor@agf.lnv.gov, c=US
Date: 2020.07.31 10:39:29 -07'00'

Signature of Agency Representative Initiating Request

Homa Anooshehpoor

7/31/20

Print Name of Agency Representative Initiating Request

Date


Signature of Agency Head Authorizing Request

Andre Urruty

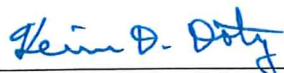
8/01/2020

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:



8/4/2020

Administrator, Purchasing Division or Designee

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18023**Amendment Number: **5**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **TYSON PREPARED FOODS, INC.**Agency Code: **550**Contractor Name: **TYSON PREPARED FOODS, INC.**Appropriation Unit: **1362-21**Address: **2200 Don Tyson Parkway
Mail Code CP576**Is budget authority available?: **Yes**City/State/Zip: **Springdale, AR 72762**

If "No" please explain: Not Applicable

Contact/Phone: **Charles Boger, Director Pricing 479-290-3519**Vendor No.: **T32000901C**NV Business ID: **NV20111130012**To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$13,000,000 to \$17,119,518 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$4,574,400.00	\$4,574,400.00	\$4,574,400.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$425,600.00	\$425,600.00	\$425,600.00	Yes - Action
c. Amendment 3:	\$8,000,000.00	\$8,000,000.00	\$8,000,000.00	Yes - Action
d. Amendment 4:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#5):	\$4,119,518.00	\$4,119,518.00	\$4,119,518.00	Yes - Action
3. New maximum contract amount:	\$17,119,518.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 01/04/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Tyson has been a vendor of NDA since 2016 and has provided satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	bbel1	07/31/2020 09:45:23 AM
Division Approval	bbel1	07/31/2020 09:45:30 AM
Department Approval	bbel1	07/31/2020 09:45:38 AM
Contract Manager Approval	melli2	08/06/2020 16:01:30 PM
Budget Analyst Approval	mlynn	08/11/2020 10:40:59 AM
BOE Agenda Approval	laaron	08/12/2020 16:21:03 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:
Approval #: 1343 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>Department of Agriculture</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Homa Anooshehpoor, Food & Nutrition Administrator</i>	<i>775-223-2164</i>	<i>hanooshehpoor@agri.nv.gov</i>

2	Contractor Information:	
	Contractor:	<i>Tyson Prepared Foods, Inc.</i>
	Contact Name:	<i>Teneka Williams</i>
	Complete Address:	<i>2200 Don Tyson Parkway, Springdale, AK 72762</i>
	Phone Number:	<i>(479) 290-7449</i>
	Email Address:	<i>Teneka.Williams@tyson.com</i>

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	<i>RFP 3237</i>
	CETS #:	<i>17996</i>		
	Contract Amount:	<i>\$2,338,717</i>		
	Contract Term:	Start Date:	<i>10/01/2016</i>	End Date:

Purchasing Use Only:

Approval #:

#343 @

4	Current Contract Information:				
	Solicitation Type, if applicable:			#:	RFP 3237
	CETS #:	#18023			
	Initial Contract Amount:	\$4,574,400			
	Contract Term:	Start Date:	10/01/2016	End Date:	09/30/2020

	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
5	1	Added additional items	None	None
	2	Increased budget authority	Increased \$425,600	None
	3	Increased budget authority/date change	Increased \$8,000,000	9/30/2020
	4	Removed specified product item codes	None	None

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	5	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$4,119,518	09/30/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	#1243 @

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Homa Anooshehpour

Digitally signed by Homa Anooshehpour
DN: cn=Homa Anooshehpour, o=IDA, ou=Food and
Habitat, email=hanooshehpour@idm.gov, c=US
Date: 2020.07.19 12:15:00 -0700

Signature of Agency Representative Initiating Request

Homa Anooshehpour

7/29/20

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

ANDRE CERRUTY

8/01/2020

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Heim D. Doty

8/4/2020

Administrator, Purchasing Division or Designee

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17996** Amendment Number: **6**

Agency Name: **DEPARTMENT OF AGRICULTURE** Legal Entity Name: **TYSON PREPARED FOODS, INC.**

Agency Code: **550** Contractor Name: **TYSON PREPARED FOODS, INC.**

Appropriation Unit: **2691-21** Address: **PO BOX 601099**

Is budget authority available?: **Yes** City/State/Zip: **PASADENA, CA 91181**

If "No" please explain: Not Applicable Contact/Phone: **TENEKA WILLIAMS 479-290-7449**

Vendor No.: **T32000901C**

NV Business ID: **NV20111130012**

To what State Fiscal Year(s) will the contract be charged? **2017-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2020**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the sixth amendment to the original contract which provides breakfast and lunch food products for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment extends the termination date from September 30, 2020 to September 30, 2021 and increases the maximum amount from \$1,381,068 to \$2,338,717 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$441,200.00	\$441,200.00	\$441,200.00	Yes - Action
a. Amendment 1:	\$58,800.00	\$58,800.00	\$58,800.00	Yes - Action
b. Amendment 2:	\$450,000.00	\$450,000.00	\$450,000.00	Yes - Action
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
d. Amendment 4:	\$0.00	\$0.00	\$0.00	No
e. Amendment 5:	\$431,068.00	\$431,068.00	\$431,068.00	Yes - Action
2. Amount of current amendment (#6):	\$957,649.00	\$957,649.00	\$957,649.00	Yes - Action
3. New maximum contract amount:	\$2,338,717.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The increase in meal participation, school districts and other agencies use processed food products in their lunch programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

Schwans
Jennie-O Turkey

Tyson

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3237, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/25/2016 Anticipated re-bid date: 03/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The Nevada Department of Agriculture has had this vendor since 2013. Their service and quality have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbel1	06/16/2020 13:26:39 PM
Division Approval	bbel1	06/16/2020 13:26:43 PM
Department Approval	bbel1	06/16/2020 13:26:47 PM
Contract Manager Approval	melli2	08/06/2020 15:06:55 PM
Budget Analyst Approval	mlynn	08/06/2020 16:54:08 PM
BOE Agenda Approval	laaron	08/07/2020 16:34:54 PM



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:	
Approval #:	332 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: Agriculture		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Homa Anooshehpoor, Food & Nutrition Administrator	775-223-2164	hanooshehpoor@agri.nv.gov

2	Contractor Information:	
	Contractor:	Tyson Prepared Foods, Inc.
	Contact Name:	Teneka Williams
	Complete Address:	2200 Don Tyson Parkway, Springdale, A 72762
	Phone Number:	(479) 290-7449
	Email Address:	Teneka.Williams@tyson.com

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:		#:	3237
	CETS #:	18023		
	Contract Amount:	\$13,000,000		
	Contract Term:	Start Date:	10/1/2016	End Date:

CETS 18023
10/2016 \$4,574,400.00 - 4 yrs RFP 3237
4 Amendments - \$13,000,000.00 million

CETS 17996-Tyson \$441,2000.00 - 10/16-09/18
Amend 5x - \$1,381,068.00 10/16-09/20

Purchasing Use Only:	
Approval #:	332 (C)

Current Contract Information:				
4	Solicitation Type, if applicable:		#:	RFP 3237
	CETS #:	#17996		
	Initial Contract Amount:	\$441,200		
	Contract Term:	Start Date:	10/01/2016	End Date: 09/30/2020

Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
1	Increased budget authority	Increased \$ 58,800	None
2	Increased budget authority/extend date	Increased \$450,000	09/30/2020
3	Assigns to: The Hillshire Brands Co.	None	None
4	Assigns to: Tyson Foods, Inc.	None	None
5	Increased budget authority	Increased \$431,068	None

Proposed Amendment Information:			
Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
6	Provide school districts and other agencies the ability to purchase food for the National School Lunch Program using USDA commodities as ingredients.	Increase \$957,649	09/30/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	NDA released a new RFP for State Processing during the Spring of 2020, but the RFP was cancelled due to the COVID-19 pandemic. NDA is requesting a one (1) year extension of the current contracts. School districts and other agencies need products from the current contracts to provide meals for the National School Lunch Program for School Year 20-21. NDA plans to release the new RFP in the Spring of 2021.

8	What are the potential consequences to the State if the contract extension request is denied?
	School districts rely on the Processed USDA Foods program to procure foods for the National School Lunch Program at a lower cost. Foods for this program are provided to NDA by the USDA Food and Nutrition Service for this specific purpose. Without this program, school districts and other agencies would be forced to buy commercially which would increase their food expenses.

Purchasing Use Only:	
Approval #:	10332

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

H. Am
Signature of Agency Representative Initiating Request

Homa Anoshchepoor
Print Name of Agency Representative Initiating Request

6/15/2020
Date

[Signature]
Signature of Agency Head Authorizing Request

ANDRE URRUTY
Print Name of Agency Head Authorizing Request

6/15/2020
Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty
Administrator, Purchasing Division or Designee

6/16/2020
Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23286**Agency Name: **DPS-TRAFFIC SAFETY**Agency Code: **658**Appropriation Unit: **4688-13**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AGATE SOFTWARE, INC.**Contractor Name: **AGATE SOFTWARE, INC.**Address: **SUITE 102
2214 UNIVERSITY PARK DRIVE
OKEMOS, MI 48864-3980**City/State/Zip: **OKEMOS, MI 48864-3980**Contact/Phone: **Justin Stojisih, Account Manager
517/336-2530**Vendor No.: **T29025797**NV Business ID: **NV20101743480**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **658**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2024**Contract term: **4 years and 31 days**4. Type of contract: **Contract**Contract description: **Maintain and Support**

5. Purpose of contract:

This is a new contract to provide ongoing support, maintenance and hosting of the agency's existing grants management system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$299,153.16****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Department of Public Safety - Office of Traffic Safety Division promotes reducing crashes and fatalities on NV roadways, by providing federal grant funds to NV traffic safety partners. Federal funding for this office has quadrupled in recent years. This has increased the workload, while limited staff and resources have remained unchanged. OTS currently has federal grant funds available to continue its web-based grant management system. This system has allowed for more effective and transparent grants management and has reduced paper, copying and postage costs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is an elaborate web-based system that is solely owned by Agate Software, INC that requires hosting, continued support and maintenance9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Maximum Consulting Services Inc.
Agate Software Inc.
Deloitte Consulting LLP

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #65DPS-S1144, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 04/01/2020 Anticipated re-bid date: 04/01/2024

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Office of Traffic Safety. Contractor services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Amy Davey, OTS Administrator Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lgallow1	07/07/2020 10:25:47 AM
Division Approval	lgallow1	07/07/2020 10:25:50 AM
Department Approval	cboegle	07/07/2020 10:29:40 AM
Contract Manager Approval	cboegle	07/07/2020 10:29:44 AM
EITS Approval	tgalluzi	07/07/2020 10:41:51 AM
Budget Analyst Approval	nkephart	08/11/2020 15:50:56 PM
BOE Agenda Approval	nhovden	08/12/2020 16:41:32 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23312**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4457-28**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ENVIRONMENTAL SYSTEMS RESEARCH INSTITUTE, INC.**Contractor Name: **ENVIRONMENTAL SYSTEMS RESEARCH INSTITUTE, INC.**Address: **380 NEW YORK STREET**City/State/Zip: **REDLANDS, CA 92373**Contact/Phone: **SOLOMON SIDDIQ 909-793-2853**Vendor No.: **PUR0000307**NV Business ID: **NV20111027035**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **5.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **95.00 % HERITAGE TRUST FUND**

Agency Reference #: 20-23

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **Contract**Contract description: **Wildlife Survey App**

5. Purpose of contract:

This is a new contract to provide a mobile solution for data collection and storage during aerial surveys of big game wildlife.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Aerial surveys are a significant portion of the job duties for a Nevada biologist. Further, the current post-flight process of relating a waypoint collected by handheld GPS to hand-written observation data is cumbersome and a challenge that could be easily solved with mobile technology. The Department estimates each lead biologist dedicates a minimum of one-half hour processing data for each hour of flight or about 750 cumulative hours during a survey season. Additional effort by data managers is required to prepare and import the spreadsheet product to a relational database enabling users to interact with their survey data in a geospatial environment.

The Department proposes the development of a mobile data collection tool to improve in-flight safety by simplifying the current process of data collection (i.e., handheld GPS, clipboard, writing utensil) and to reduce or eliminate the amount of time needed for post-flight data processing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Custom mobile application development requiring knowledge and expertise exceeding the qualifications of Nevada Department of Wildlife employees.

9. Were quotes or proposals solicited? Yes
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

RFP was posted in newspaper, NDOW website and with State Purchasing Environmental Systems Research

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

ESRI was the only respondent vendor and has satisfactorily completed custom application development for several governmental agencies.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

CODY MCKEE, WILDLIFE STAFF SPECIALIST Ph: 775-688-1525

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	06/15/2020 12:04:42 PM
Division Approval	kdailey	08/06/2020 15:50:43 PM
Department Approval	kdailey	08/06/2020 15:57:15 PM
Contract Manager Approval	zalbert	08/06/2020 15:58:04 PM
EITS Approval	tgalluzi	08/06/2020 16:11:12 PM
Budget Analyst Approval	mlynn	08/11/2020 17:18:27 PM

BOE Agenda Approval
BOE Final Approval

laaron
Pending

08/14/2020 15:12:58 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Liz O'Brien, Director, NDOW
Cody McKee, Wildlife Staff Specialist, NDOW
Eric Dugger, IT Program Manager, NDOW
Katie Jameson, ASO III, NDOW

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technical Investment Administrator, DOA, EITS

SUBJECT: TIN Review Completed: NDOW - Nevada Wildlife Survey App - TIN:
T702190814151853

DATE: September 11, 2019

We completed the review of NDOW's – *Nevada Wildlife Survey App (WSA)* TIN.

The submitted TIN, for the estimated investment of \$77,000, is for the creation of a mobile solution, Wildlife Survey Application (WSA) that will allow for tracking of biological and geospatial data in a cloud-based database once the survey is complete and internet access is attained.

As more and more state applications move to the Cloud it will be important to ensure that the State's data is properly safeguarded. If NDOW has any questions regarding information security best practices for mobile and/or cloud solutions, they are encouraged to reach out to the State Office of Information Security (OIS).

A copy of this completion memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22985**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4463-35**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **NATIONAL PARK SERVICE**Contractor Name: **NATIONAL PARK SERVICE**Address: **601 NEVADA HWY**City/State/Zip: **BOULDER CITY, NV 89005**Contact/Phone: **CHRIS LARGENT 702-293-8990**

Vendor No.:

NV Business ID: **GOVERNMENTAL ENTITY**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % BOATING PARTNERSHIP PROGRAM**

Agency Reference #: 20-59

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2024**Contract term: **4 years and 122 days**4. Type of contract: **Interlocal Agreement**Contract description: **Water Volunteer Prg.**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing services for water safety patrols/assistance, educational campaigns and safety awareness for the boating public at the Lake Mead National Recreation Area.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Purchase safety equipment, boating equipment and distribute information materials for enhancement of boating safety and boating safety education in Clark County.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is work managed and supported by NPS that explicitly operates within the requirements of the Clark County Fuel Tax Fund for promotion of recreational boating safety. This work is funded through revenue contract CETS #21003 with Clark County.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

BOWLES, BRIAN , GAME WARDEN CAPTAIN Ph: 775-688-1598

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	03/12/2020 09:44:55 AM
Division Approval	kdailey	07/28/2020 14:58:56 PM
Department Approval	kdailey	07/28/2020 14:59:02 PM
Contract Manager Approval	zalbert	08/11/2020 16:12:43 PM
Budget Analyst Approval	mlynn	08/14/2020 12:43:19 PM
BOE Agenda Approval	laaron	08/14/2020 13:54:15 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23383**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4467-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SOUTHERN NYE COUNTY CONSERVATION DISTRICT**Contractor Name: **SOUTHERN NYE COUNTY CONSERVATION DISTRICT**Address: **CONSERVATION DISTRICT
401 SOUTH FRONTAGE ROAD #301**City/State/Zip: **PAHRUMP, NV 89048**Contact/Phone: **NATALIE SPICER 702-595-5814**Vendor No.: **T81001163**NV Business ID: **GOVERNMENTAL ENTITY**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 %	Habitat Conservation Fees and Industrial Development Funds
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: **20-78**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2024**Contract term: **3 years and 334 days**4. Type of contract: **Interlocal Agreement**Contract description: **Amargosa Toads**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing habitat restoration services for the Amargosa toads in Oasis Valley and Beatty.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Project work to benefit toad habitat identified by the Amargosa Toad work group. Endemic species such as Amargosa toad and other co-occurring species are limited to approximately 12 miles near Beatty, Nevada. These species are critically imperiled unless habitat protections are put in place.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDOW does not have the equipment and labor to do this work and state employees do not have the time or expertise to implement this habitat restoration projects.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

10%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Anthony Miller , Biologist Ph: 702-280-1177

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	07/01/2020 11:22:20 AM
Division Approval	kdailey	07/28/2020 14:59:49 PM
Department Approval	kdailey	07/28/2020 15:00:41 PM
Contract Manager Approval	zalbert	07/29/2020 16:33:21 PM
Budget Analyst Approval	laaron	08/19/2020 10:52:42 AM
BOE Agenda Approval	laaron	08/19/2020 10:52:45 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23489**Agency Name: **DEPARTMENT OF
TRANSPORTATION**Agency Code: **800**Appropriation Unit: **4660-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Kimley-Horn & Associates, Inc.

Contractor Name: **Kimley-Horn & Associates, Inc.**Address: **7740 N 16TH ST
Suite 300**City/State/Zip: **PHOENIX, AZ 85020-4473**

Contact/Phone: Brian Smalkoski 602-906-1100

Vendor No.: T81098457

NV Business ID: NV19911015458

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **6.30 %** Bonds 0.00 %**X** Highway Funds **93.70 %** Other funding 0.00 %

Agency Reference #: P082-20-802

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **1 year and 29 days**4. Type of contract: **Provider Agreement**Contract description: **Aviation System Plan**

5. Purpose of contract:

This is a new contract to provide updates and replacements to the existing Nevada Airport System Plan with the Nevada Airport and Heliport System Plan in compliance with Federal Aviation Administration Advisory Circular 150/5070-7, Change 1, "The Airport System Planning Process". NDOT Agreement Number P082-20-802.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Federal Aviation Administration (FAA) grant to update the Statewide Aviation System Planning document for airports and heliports.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State costs to perform this task would be much higher and it would not be completed in a reasonable timeframe.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Jviation, Inc.
Mead and Hunt
Kimley-Horn and Associates, Inc.

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDOT

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jcutts	08/04/2020 17:00:41 PM
Division Approval	jcutts	08/04/2020 17:00:44 PM
Department Approval	jcutts	08/04/2020 17:00:46 PM
Contract Manager Approval	jcutts	08/04/2020 17:00:49 PM
Budget Analyst Approval	bmacke1	08/11/2020 13:45:59 PM
BOE Agenda Approval	nhovden	08/18/2020 13:47:28 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22086**Amendment
Number: **1**Agency Name: **DETR - REHABILITATION DIVISION**Legal Entity
Name: **Lyon County School District**Agency Code: **901**Contractor Name: **Lyon County School District**Appropriation Unit: **3265-09**Address: **25 E. Goldfield Ave.**Is budget authority
available?: **Yes**City/State/Zip **Yerington, NV 89447**

If "No" please explain: Not Applicable

Contact/Phone: **Marva Cleven 775-463-6800**Vendor No.: **T40233900**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds **21.30 %** Fees 0.00 %**X** Federal Funds **78.70 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **3330-21-REHAB**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/10/2019**
Examiner's approval?Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2020**
Termination Date:Contract term: **3 years and 83 days**4. Type of contract: **Interlocal Agreement**Contract description: **LCSD Transition**

5. Purpose of contract:

This is the first amendment to the interlocal agreement which provides ongoing funding for a Transition Coordinator to improve post-secondary outcomes for students with disabilities. This amendment extends the termination date from September 30, 2020 to September 30, 2022 and increases the maximum amount from \$28,710 to \$86,130 due to the continued need for these services.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$28,710.00	\$28,710.00	\$28,710.00	Yes - Info
2. Amount of current amendment (#1):	\$57,420.00	\$57,420.00	\$86,130.00	Yes - Action
3. New maximum contract amount:	\$86,130.00			
and/or the termination date of the original contract has changed to:	09/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

Rural school districts need a transition coordinator who can support transition efforts across all schools in the district to ensure that students and young adults with disabilities progress in school and graduate with the knowledge skills and tools to succeed in post-secondary education or employment.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the time or the ability to provide the services.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Exempt (Per statute)**

- c. Why was this contractor chosen in preference to other?

All rural school districts need a Transition Coordinator. The agency helps school districts fund the position.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided this service satisfactorily to Rehabilitation since August 2017.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jben2	04/30/2020 09:59:32 AM
Division Approval	kdesoci1	07/22/2020 10:24:58 AM
Department Approval	kdesoci1	07/22/2020 10:25:01 AM
Contract Manager Approval	kdesoci1	07/22/2020 10:25:04 AM
Budget Analyst Approval	dbaughn	07/31/2020 14:20:57 PM
BOE Agenda Approval	cbrekken	08/12/2020 11:12:05 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23385**Agency Name: **SILVER STATE HEALTH INSURANCE EXCHANGE**Agency Code: **960**Appropriation Unit: **1400-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Berry Dunn McNeil & Parker, LLC dba BerryDunn**Contractor Name: **Berry Dunn McNeil & Parker, LLC dba BerryDunn**Address: **100 Middle Street, 4th Floor**City/State/Zip: **Portland, ME 04101**Contact/Phone: **William Brown 207-775-2387**Vendor No.: **T29043233**NV Business ID: **NV20121551586**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Carrier
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/01/2023**Contract term: **3 years**4. Type of contract: **Contract**Contract description: **Audit Services**

5. Purpose of contract:

This is a new contract to provide annual independent external financial and programmatic audit services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$208,848.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Program Integrity Rule Part II (PI Reg II, 45 CFR 155.1200(c), authorizes the U.S. Department of Health and Human Services (HHS) to require every State-based Marketplace (SBM) to perform an annual financial and programmatic independent external audit. PI Reg II also states that �The State Marketplace must engage an independent qualified auditing entity which follows generally accepted governmental auditing standards (GAGAS) to perform an annual independent external financial and programmatic audit and must make such information available to the U.S. Department of Health and Human Services for review.� The purpose of this independent external audit is to ensure that SSHIX is in compliance with the financial and programmatic requirements set forth by the Centers for Medicare & Medicaid Services (CMS).

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees at SSHIX, are not able to do the work, because Program Integrity Rule Part II, 45 CFR 155.1200(c), requires all State-based Marketplaces (SBMs) to �engage an independent qualified auditing entity which follows generally accepted governmental auditing standards (GAGAS) to perform mandatory annual independent external financial and programmatic audits.�

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

Eide Bailly
Moss Adams
BerryDunn

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #96SSHIX-S1093 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 04/16/2020 Anticipated re-bid date: 05/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Foreign LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Eliane Fuentes, Audit Manager Ph: 775-684-9929

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jsnido1	07/23/2020 10:38:11 AM
Division Approval	jsnido1	07/23/2020 10:38:14 AM
Department Approval	rhig	07/23/2020 10:49:09 AM
Contract Manager Approval	jsnido1	07/23/2020 10:49:58 AM
Budget Analyst Approval	afrantz	08/05/2020 14:30:01 PM
BOE Agenda Approval	bwooldri	08/06/2020 12:20:33 PM

WORK PLAN SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - DATA COMMUNICATIONS AND NETWORK ENGINEERING	CARAHSOFT TECHNOLOGY CORPORATION	FEE: USER	\$67,037	
	Contract Description:	This is a new work plan under Master Service Agreement contract #18855 to provide firewall training.				
		Term of Contract:	Upon Approval - 06/30/2021	Contract # 23495		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23495**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: CARAHSOFT TECHNOLOGY CORPORATION
Agency Code: 180	Contractor Name: CARAHSOFT TECHNOLOGY CORPORATION
Appropriation Unit: 1386-30	Address: 11493 Sunset Hills
Is budget authority available?: Yes	City/State/Zip: RESTON, VA 20191
If "No" please explain: Not Applicable	Contact/Phone: Tarek Ammourey 571-662-4654
	Vendor No.: T27011089
	NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % User
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **302 days**4. Type of contract: **Other (include description): MSA Workplan**Contract description: **Firewall Training**

5. Purpose of contract:

This is a new work plan under Master Service Agreement contract #18855 to provide firewall training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$67,036.69****II. JUSTIFICATION**

7. What conditions require that this work be done?

The objective and goals of this request is to train the majority of the EITS firewall staff to be proficient at configuration of said firewall which is the largest security device deployed in the State of Nevada government. Staff will come away with the knowledge to detect malicious internet born attacks, analyze attacks by type and determine the source of those attacks, and finally thwart those attack to maintain critical information security. Staff will also gain the knowledge to install, maintain, and troubleshoot the vendor specific Virtual Private Networking client that is critical to the work from home and mobile teleworkers that have become so critical to the State during this COVID-19 pandemic.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State workers do not have the expertise to provide this training

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Work Plan to existing no cost MSA #18855

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	08/10/2020 15:37:12 PM
Division Approval	ddav12	08/10/2020 15:37:15 PM
Department Approval	ddav12	08/10/2020 15:37:19 PM
Contract Manager Approval	ddav12	08/10/2020 16:56:26 PM
EITS Approval	tgalluzi	08/10/2020 16:57:24 PM
Budget Analyst Approval	dlenzner	08/11/2020 10:12:27 AM
BOE Agenda Approval	hfield	08/13/2020 15:05:08 PM
BOE Final Approval	Pending	

Brian Sandoval
Governor



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise I.T. Services Division

100 N. Stewart Street, Suite 100 | Carson City, NV 89701
Phone: (775) 684-5800

Patrick Cates
Director

Michael Dietrich
State CIO

David Haws
EITS Administrator

DATE: September 6, 2018

TO: Jon Mathews, ITM 2. DOA, EITS
Ann Scott, MA 3, DOA, EITS

CC: David Haws, Administrator, DOA, EITS

FROM: Tim Lewis, Technical Investment Administrator, DOA, EITS

SUBJECT: TIN Review: Cybersecurity: The Great Firewall

We completed the review of *Cybersecurity: The Great Firewall* TIN.

EITS Network Engineering current deploys two enterprise firewalls, one in Las Vegas and the other in Carson City. Both firewalls have received an end-of-life notification for the FY20-21 biennium which will require that they be replaced else the manufacturer will no longer support critical updates required to secure SilverNet.

It is understood that this technology investment is rated as one of the top priorities for DOA. The firewall replacement is important to ensuring a secure computing environment as well as establishing an infrastructure that will support future IT initiatives for the state.

If I can be of further assistance, please feel free to contact me.

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.		VARIOUS STATE AGENCIES	WEINTRAUB BEHAVIOR INSTITUTE	OTHER: VARIOUS AGENCIES	\$250,000	
	Contract Description:	This is a new contract to provide ongoing applied behavior analysis services.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23480		
2.		VARIOUS STATE AGENCIES	CHRISTY STEVENS, APRN PROF., LLC	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing psychiatry services.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23456		
3.		VARIOUS STATE AGENCIES	JLP HOLDINGS, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services in southern Nevada.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23429		
4.		VARIOUS STATE AGENCIES	MEDSCOPE AMERICA CORPORATION	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing personal emergency response system services.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23477		
5.		VARIOUS STATE AGENCIES	PUBLIC KNOWLEDGE, LLC	OTHER: VARIOUS AGENCIES	\$0	
	Contract Description:	This is a new participating addendum to provide procurement of acquisition support services.				
		Term of Contract:	Upon Approval - 06/05/2021	Contract # 23410		
6.		VARIOUS STATE AGENCIES	SERENITY HOME CARE SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing personal care services.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 23426		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23480**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WEINTRAUB BEHAVIOR INSTITUTE**Contractor Name: **WEINTRAUB BEHAVIOR INSTITUTE**Address: **1372 Haven Green Ct**City/State/Zip: **Henderson, NV 89012**Contact/Phone: **Daniel Weintraub 702-572-4264**Vendor No.: **T27043705**NV Business ID: **NV20191648626**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**Agency Reference #: **S167-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide ongoing applied behavior analysis services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S167 for behavioral and community based related services.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/04/2020 11:54:07 AM
Division Approval	jthom17	08/04/2020 11:54:10 AM
Department Approval	ldeloach	08/04/2020 13:53:06 PM
Contract Manager Approval	rvradenb	08/10/2020 15:39:24 PM
Budget Analyst Approval	stilley	08/10/2020 17:09:02 PM
BOE Agenda Approval	bwooldri	08/18/2020 10:45:44 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23456**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Christy Stevens, APRN Prof., LLC

Contractor Name: **Christy Stevens, APRN Prof., LLC**Address: **501 W. 1st St. #253**City/State/Zip: **Reno, NV 89503**

Contact/Phone: Christy Stevens 775/781-5318

Vendor No.: T32009976

NV Business ID: NV20201746843

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**

Agency Reference #: S107-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **MSA**Contract description: **Medical Services**

5. Purpose of contract:

This is a new contract to provide ongoing psychiatry services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S107 for Medical & Related based services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/04/2020 12:05:34 PM
Division Approval	jthom17	08/04/2020 12:05:37 PM
Department Approval	ldeloach	08/04/2020 13:49:21 PM
Contract Manager Approval	rvradenb	08/04/2020 14:09:02 PM
Budget Analyst Approval	stilley	08/10/2020 15:33:28 PM
BOE Agenda Approval	hfield	08/13/2020 11:42:31 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23429**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JLP Holdings, LLC**Contractor Name: **JLP Holdings, LLC**Address: **442 Sunrise Villa Dr.**City/State/Zip: **Las Vegas, NV 89110**Contact/Phone: **Jan Phillip R. Badiola 702-839-8783**Vendor No.: **T32009326**NV Business ID: **NV20191170697**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**Agency Reference #: **S167-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide ongoing community-based living arrangement services in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S167 for behavioral and community based related services.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/04/2020 12:03:03 PM
Division Approval	jthom17	08/04/2020 12:03:05 PM
Department Approval	ldeloach	08/04/2020 13:51:25 PM
Contract Manager Approval	rvradenb	08/04/2020 14:10:07 PM
Budget Analyst Approval	stilley	08/10/2020 15:09:50 PM
BOE Agenda Approval	hfield	08/13/2020 09:49:53 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23477**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: MedScope America Corporation

Contractor Name: **MedScope America Corporation**Address: **222 W. Lancaster Ave**City/State/Zip: **Paoli, PA 19301**

Contact/Phone: Jerry Smith 800-645-2060

Vendor No.: T32010058

NV Business ID: NV20191667495

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**

Agency Reference #: S167-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide ongoing personal emergency response system services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S167 for behavioral and community based related services.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/04/2020 11:59:04 AM
Division Approval	jthom17	08/04/2020 11:59:07 AM
Department Approval	ldeloach	08/04/2020 13:58:56 PM
Contract Manager Approval	rvradenb	08/04/2020 14:01:10 PM
Budget Analyst Approval	stilley	08/10/2020 15:12:24 PM
BOE Agenda Approval	hfield	08/12/2020 17:02:19 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23410**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **PUBLIC KNOWLEDGE, LLC**Contractor Name: **PUBLIC KNOWLEDGE, LLC**Address: **500 EAST WRANGLER ROAD**City/State/Zip: **CHEYENNE, WY 82009**Contact/Phone: **STACY OBRECHT 208/890-0433**Vendor No.: **T27022922**NV Business ID: **NV20091086529**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % VARIOUS AGENCIES

Agency Reference #: **RV-19-19-12**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/05/2021**Contract term: **277 days**4. Type of contract: **MSA**Contract description: **PASS Services**

5. Purpose of contract:

This is a new participating addendum to provide procurement of acquisition support services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$0.01**

Other basis for payment: This PA has a no dollar value. Individual purchases require a BOE-approved work plan prior to start of services.

II. JUSTIFICATION

7. What conditions require that this work be done?

Multiple State agencies and political subdivisions require support for developing effective procurement plans that will support the needs of their agencies.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agencies do not have always have the procurement expertise, industry knowledge or subject matter experts available to implement various procurement of services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

NASPO ValuePoint Contract for Procurement Acquisition Support Services was awarded to multiple vendors. State Purchasing is signing a PA with this vendor awarded under the NASPO contract that will provide service to state agencies and political subdivisions who have expressed a need.

d. Last bid date: 05/01/2018 Anticipated re-bid date: 06/05/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	07/16/2020 09:34:29 AM
Division Approval	jthom17	07/16/2020 09:34:33 AM
Department Approval	ldeloach	07/16/2020 10:27:12 AM
Contract Manager Approval	rvradenb	07/23/2020 12:02:54 PM
Budget Analyst Approval	stilley	07/24/2020 12:40:38 PM
BOE Agenda Approval	hfield	07/31/2020 10:33:47 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23426**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Serenity Home Care Services, LLC**Contractor Name: **Serenity Home Care Services, LLC**Address: **610 S. 18th Street**City/State/Zip: **Sparks, NV 89431**Contact/Phone: **Donald Giovannetti 775/409-4286**Vendor No.: **T27043509**NV Business ID: **NV20191547071**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**Agency Reference #: **S167-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **1 year and 302 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide ongoing personal care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S167 for behavioral and community based related services.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/04/2020 12:20:22 PM
Division Approval	jthom17	08/04/2020 12:20:25 PM
Department Approval	ldeloach	08/04/2020 13:46:55 PM
Contract Manager Approval	rvradenb	08/04/2020 14:09:17 PM
Budget Analyst Approval	stilley	08/10/2020 15:36:19 PM
BOE Agenda Approval	hfield	08/13/2020 11:39:14 AM
BOE Final Approval	Pending	

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	010	ATHLETIC COMMISSION	WAYNE STATE UNIVERSITY	FEES	\$14,921	
	Contract Description:	This is a new contract to provide a study to determine the impact of different boxing glove weights.				
		Term of Contract:	08/10/2020 - 06/30/2021	Contract # 22933		
2.	018	GOVERNOR'S OFFICE OF WORKFORCE INNOVATION - NEVADA P20 WORKFORCE REPORTING	OFFICE OF THE LABOR COMMISSIONER	FEDERAL	\$22,500	
	Contract Description:	This is a new interlocal agreement to provide an information technology system data collection modernization project to enhance data collection capabilities and reporting of individual registered apprenticeship records.				
		Term of Contract:	08/17/2020 - 06/30/2021	Contract # 23467		
3.	051	TREASURER'S OFFICE - COLLEGE SAVINGS TRUST	FULFILLMENT FUND LAS VEGAS	OTHER: PROGRAM	\$24,000	
	Contract Description:	This is a new contract to provide financial aid workshops to attract students and their parents, guardians, and advocates to learn about the financial aid process throughout Clark County.				
		Term of Contract:	07/28/2020 - 12/31/2020	Contract # 22970		
4.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	J&J ENTERPRISES SERVICES, INC.	OTHER: ASSESSMENTS	\$19,876	
	Contract Description:	This is a new contract to provide ongoing concrete services for state-owned buildings in southern Nevada on an as-needed basis.				
		Term of Contract:	08/11/2020 - 06/10/2024	Contract # 23324		
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	THOLL FENCE, INC.	OTHER: ASSESSMENTS	\$34,909	
	Contract Description:	This is a new contract to provide ongoing installation, maintenance, and repair services for fences and gates located at state-owned buildings in northern Nevada.				
		Term of Contract:	08/12/2020 - 06/30/2024	Contract # 23258		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS – NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	BONDS 90% OTHER: AGENCY FUNDS 10%	\$19,400	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides professional architectural/engineering services for the Nevada State College - Education Academic Building CIP project: SPWD Project No. 19-C19; Contract No. 112907. This amendment increases the maximum amount from \$864,280 to \$883,680 due to redesign of ceilings in rooms with a 2' x 8' grid system.				
	Term of Contract:	11/12/2019 - 06/30/2023	Contract # 22488			
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS – NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	BONDS 90% OTHER: AGENCY FUNDS 10%	\$11,380	Professional Service
	Contract Description:	This is the fourth amendment to the original contract which provides professional architectural/engineering services for the Nevada State College - Education Academic Building CIP project: SPWD Project No. 19-C19; Contract No. 112907. This amendment increases the maximum amount from \$883,680 to \$895,060 due to revised construction documents for the early childhood restrooms, playground and floor finishes.				
	Term of Contract:	11/12/2019 - 06/30/2023	Contract # 22488			
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS – NON-EXEC	CURTAINWALL DESIGN & CONSULTING, INC.	BONDS 92% OTHER: UNIVERSITY FUNDS 8%	\$26,000	Professional Service
	Contract Description:	This is a new contract which provides professional commissioning, surveying, and other miscellaneous services for the College of Southern Nevada - Health and Sciences Building project, to include construction administration services for the building envelope systems: CIP Project No. 19-C28; SPWD Contract No. 113572.				
	Term of Contract:	08/03/2020 - 06/30/2024	Contract # 23423			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS – NON-EXEC	DLR GROUP ARCHITECTURE & ENGINEERING	GENERAL	(\$23,320)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Southern Desert Correctional Center (SDCC) and High Desert State Prison (HDSP) - Recreation Yard Fencing CIP project, to include design, construction and bid documents, as well as construction administration services to provide 1,500 linear feet of recreation yard fencing at HDSP and 430 linear feet at SDCC: CIP Project No.19-M48; SPWD Contract No.113349. This amendment decreases the maximum amount from \$29,540 to \$6,220 due to budget reductions approved in accordance with Senate Bill 1 of the 31 st Special Session.				
	Term of Contract:	03/02/2020 - 06/30/2023	Contract # 22917			
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS – NON-EXEC	FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING	BONDS	\$5,400	Professional Service
	Contract Description:	This is the fourth amendment to the original contract which provides professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP project: CIP Project No. 17-M29; SPWD Contract No. 111597. This amendment increases the maximum amount from \$160,178 to \$165,578 due to an additional sampling review of Well #6 to Bureau of Safe Drinking Water.				
	Term of Contract:	01/09/2018 - 06/30/2021	Contract # 19488			
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	BERGER HANNAFIN ARCHITECTURE	GENERAL	(\$47,327)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Western Nevada College - Advance Planning Marlette Hall Renovation CIP project, to include design through construction documents to reconfigure the lecture hall from a 120 seat tiered auditorium style classroom with fixed seating to a less dense and more collaborative teaching classroom with 50 to 60 seats and more flexible student seating units: CIP Project No. 19-P71; SPWD Contract No.113238. This amendment decreases the maximum amount from \$65,750.00 to \$18,423.65 due to budget reductions approved in accordance with Senate Bill 1 of the 31 st Special Session.				
	Term of Contract:	02/11/2020 - 06/30/2023	Contract # 22715			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERAN'S CIP PROJECTS - NON-EXEC	GEOTECHNICAL & ENVIRONMENTAL SERVICES, INC.	FEDERAL	(\$30,000)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the National Guard Readiness Center in Las Vegas CIP project: CIP Project No. 17-C05; SPWD Contract No. 112269. This amendment decreases the maximum amount from \$326,311 to \$296,311 to close out the contract.				
	Term of Contract:	01/15/2019 - 06/30/2022	Contract # 21352			
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TECTONICS DESIGN GROUP	GENERAL	\$14,855	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Carson City Stewart Campus; American Disability Acts (ADA) Site Upgrades for Building 89 CIP Project, which includes design, construction documents, and bidding documents for the removal and replacement of the existing exterior concrete ramps and stairs to building 89 to be ADA compliant: CIP Project No. 19-S02(4); SPWD Contract No. 113456.				
	Term of Contract:	08/04/2020 - 06/30/2023	Contract # 23422			
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - 2013 DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	BONDS	(\$31,750)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada State Capitol and Annex Buildings Exterior Renovations CIP project, to include design documents for painting and repair of the windows, doors, fascia, soffits, roof balustrade and dome, additional painting of the columns and repair of the copper gutters: CIP Project No. 17-M70; SPWD Contract No. 111748. This amendment decreases the maximum amount from \$158,750 to \$127,000 to close out the project.				
	Term of Contract:	02/13/2018 - 06/30/2021	Contract # 19575			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - 2013 DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PETTY & ASSOCIATES, INC.	BONDS	(\$22,400)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Carson City Attorney General's Building - Central Plant Renovation CIP project, to include design construction and bid documents as well as construction administration services to replace the building's existing chiller, cooling tower, boiler, pumps, piping, controls and the domestic hot water tempering station: CIP Project No. 19-M30; SPWD Contract No.113320. This amendment decreases the maximum amount of \$112,000 to \$89,600 due to budget reductions approved in accordance with Senate Bill 1 of the 31 st Special Session.				
	Term of Contract:	03/10/2020 - 06/30/2023	Contract # 22863			
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - 2013 DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	ROUNDS ENGINEERING, LTD DBA CR ENGINEERING	BONDS	\$36,500	Professional Service
	Contract Description:	This is a new contract which provides professional architectural /engineering Services for the State Library and Archives - Central Plant Renovation project, which includes bid documents, conformed drawings, and record drawings for the complete renovation of the existing central plant (heating and cooling equipment) at the State Library and Archives building in Carson City: SPWD Project No. 19-M17; Contract No. 113469.				
	Term of Contract:	08/03/2020 - 06/30/2023	Contract # 23424			
17.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	MIMOWORKS INTERNET, LLC	OTHER: REVENUE	\$5,650	
	Contract Description:	This is the first amendment to the original revenue contract which provides ongoing rack space at Montezuma Peak in Esmeralda County. This amendment increases the maximum amount from \$7,533.76 to \$13,184.08 due to an increase in service.				
	Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22395			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
18.	240	DEPARTMENT OF VETERANS SERVICES - OFFICE OF VETERANS SERVICES	LABEEG BUILDING SERVICES, INC.	GENERAL 48% FEDERAL 52%	\$20,080	
	Contract Description:	This is a new contract to provide ongoing cleaning services at the Northern Nevada Veterans Memorial Cemetery.				
	Term of Contract:	08/06/2020 - 07/31/2024	Contract # 23452			
19.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	JOHNSON CONTROLS	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	\$34,154	
	Contract Description:	This is a new contract to provide ongoing maintenance and service on air conditioning and vacuum systems.				
	Term of Contract:	07/28/2020 - 07/31/2023	Contract # 23434			
20.	240	DEPARTMENT OF VETERANS SERVICES - GENERAL VETERANS SERVICES-FEES - NON-EXEC	ARBORGLYPH, LTD	OTHER: VETERANS GIFT ACCOUNT	\$23,500	
	Contract Description:	This is a new contract to provide ongoing website maintenance and hosting services.				
	Term of Contract:	07/10/2020 - 07/09/2022	Contract # 23358			
21.	240	DEPARTMENT OF VETERANS SERVICES - GENERAL VETERANS SERVICES-FEES - NON-EXEC	THE FACTORY, LLC	OTHER: GIFT	\$23,000	
	Contract Description:	This is a new contract to design, write, edit and complete the 2020 Nevada Department of Veterans Service's Annual Report.				
	Term of Contract:	08/06/2020 - 07/15/2021	Contract # 23468			
22.	270	DEPARTMENT OF TAXATION -CANNABIS COMPLIANCE BOARD	RS CONSULTING SERVICES, LLC	FEE: GL-7211 MSA PROGRAMMER CHARGES	\$10,000	
	Contract Description:	This is a new contract to provide maintenance for the agency website. The project scope includes monitoring site speed, downtime, providing technical support and implementing fixes and updates as needed.				
	Term of Contract:	07/08/2020 - 06/30/2021	Contract # 23394			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	315	STATE PUBLIC CHARTER SCHOOL AUTHORITY	HALLI FAULKNER	FEE: SPONSORSHIP	\$24,999	
	Contract Description:	This is a new contract to provide an external reviewer to read and evaluate charter school applications and other documents related to the operation and/or authorization of charter schools.				
		Term of Contract:	07/27/2020 - 06/30/2024	Contract # 23411		
24.	315	STATE PUBLIC CHARTER SCHOOL AUTHORITY	THE ACHIEVEMENT NETWORK, LTD	FEDERAL	\$24,999	
	Contract Description:	This is a new contract to provide a professional learning series for academy planning for school reopening.				
		Term of Contract:	08/03/2020 - 10/31/2020	Contract # 23473		
25.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SUMMIT VIEW YOUTH CENTER	JCN COURIER SERVICE, INC.	GENERAL	\$24,240	
	Contract Description:	This is a new contract to provide ongoing courier services for regular or urgent same-day delivery of pharmaceuticals.				
		Term of Contract:	08/03/2020 - 07/31/2024	Contract # 23344		
26.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	FM MARKETING, LLC	FEDERAL	\$40,000	Sole Source
	Contract Description:	This is the third amendment to the original contract which provides ongoing custom media lists for placement of a media advertising plan; follow-up with civic groups, non-profit education organizations for potential referral sources and to provide all forms of public relations. This amendment increases the maximum amount from \$546,300 to \$586,300 due to revising the Scope of Work to include raising awareness of reporting child abuse.				
		Term of Contract:	12/04/2018 - 06/30/2022	Contract # 21256		
27.	440	DEPARTMENT OF CORRECTIONS - PRISON INDUSTRY	GEOVOX SECURITY, INC.	OTHER: REVENUE	\$10,764	
	Contract Description:	This is a new contract to provide ongoing services to lease a vehicle occupant detection system at Northern Nevada Correctional Center.				
		Term of Contract:	07/22/2020 - 06/30/2023	Contract # 23382		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
28.	440	DEPARTMENT OF CORRECTIONS - LOVELOCK CORRECTIONAL CENTER	AMERICAN CHILLER SERVICE, INC.	GENERAL	\$38,589	
	Contract Description:	This is a new contract to provide ongoing preventative maintenance inspections and repairs on the chillers.				
		Term of Contract:	07/22/2020 - 06/30/2024	Contract # 23343		
29.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	WAYCARE TECHNOLOGIES, INC.	FEDERAL	\$33,000	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides Artificial Intelligence for traffic safety and traffic flow, cloud-based platform for unified traffic management operations and proactive crash prevention. This amendment extends the termination date from August 31, 2020 to January 31, 2021 and increases the maximum amount from \$80,000 to \$113,000 due the continued need for these services.				
		Term of Contract:	10/08/2019 - 01/31/2021	Contract # 22334		
30.	658	DEPARTMENT OF PUBLIC SAFETY - MOTORCYCLE SAFETY PROGRAM	BE CRASH FREE, LLC	FEE: MOTORCYCLE SAFETY	\$24,999	
	Contract Description:	This is a new contract to provide two 4-5-minute 360 Virtual Reality experiences, with narration, for motorcycle traffic safety applications.				
		Term of Contract:	08/03/2020 - 06/30/2021	Contract # 23413		
31.	702	DEPARTMENT OF WILDLIFE - DATA AND TECHNOLOGY SERVICES	Q-MATIC CORPORATION	FEE: REVENUE	\$48,402	
	Contract Description:	This is a new contract to provide a cloud-hosted solution for virtual queue management in locations with public walk-ins..				
		Term of Contract:	07/22/2020 - 06/30/2023	Contract # 23339		
32.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - MAINTENANCE OF STATE PARKS-NON-EXEC	MARRACCINI PLUMBING HEATING & COOLING, INC.	OTHER: STATE PARKS MAINTENANCE	\$19,888	
	Contract Description:	This is a new contract to provide for the replacement of the heating and air conditioning system at the Western Region Headquarters/Lahontan Dam-side building.				
		Term of Contract:	08/04/2020 - 10/31/2020	Contract # 23446		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
33.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	ADVANCED PRO REMEDIATION, LLC	GENERAL 21.3% FEDERAL 78.7%	\$20,000	
	Contract Description:	This is a new contract to provide cleaning and sanitizing of offices and wait areas to provide a clean and safe environment for clients and staff to meet and receive services.				
		Term of Contract:	08/14/2020 - 12/31/2022	Contract # 23437		
34.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	JOSEPH P. ZICH DBA FLOOR MASTERS	GENERAL 21.3% FEDERAL 78.7%	\$15,000	
	Contract Description:	This is a new contract to provide cleaning and sanitizing services for upholstery and carpet in northern Nevada Rehabilitation offices that are open to the public.				
		Term of Contract:	08/03/2020 - 12/31/2022	Contract # 23377		
35.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	BRAZEN TECHNOLOGIES, INC.	FEDERAL	\$49,221	Professional Service
	Contract Description:	This is a new contract to provide a cloud-based virtual recruiting platform to meet the changing needs of employers and job seekers when traditional hiring events cannot be held due to mandates for social distancing and reduced capacity gathering.				
		Term of Contract:	08/03/2020 - 07/31/2021	Contract # 23398		
36.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY – SPECIAL FUND	CENTER FOR SECURITY EDUCATION AND RESEARCH	OTHER: PENALTIES & INTEREST	\$28,944	Sole Source
	Contract Description:	This is a new contract to provide information technology advisory support services for the Unemployment Unit.				
		Term of Contract:	08/05/2020 - 09/30/2020	Contract # 23375		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22933**Agency Name: **GOVERNOR'S OFFICE**Agency Code: **010**Appropriation Unit: **3952-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WAYNE STATE UNIVERSITY**Contractor Name: **WAYNE STATE UNIVERSITY**Address: **DEPT OF BIOMEDICAL ENGINEERING****818 WEST HANCOCK ST**City/State/Zip: **DETROIT, MI 48202**Contact/Phone: **CYNTHIA BIR 313/577-7821**Vendor No.: **T27043090**NV Business ID: **N/A**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/10/2020**Anticipated BOE meeting date **07/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **324 days**4. Type of contract: **Contract**Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide a study that will determine the effects of the different boxing glove weights and resulting head response from a boxing punch.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,921.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

It is vital to find out the impact of boxing gloves using different weights from a boxing punch.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

They are not trained in this area of expertise.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only place in the United States that does this type of testing.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Does not perform work in Nevada

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

Does not perform work in Nevada

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

No b. If "NO", please explain.

Does not perform work in Nevada

19. Agency Field Contract Monitor:

Frankie Mason, MAIL Ph: 702-486-2575

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	08/07/2020 13:56:41 PM
Division Approval	ddav12	08/07/2020 13:56:45 PM
Department Approval	ddav12	08/07/2020 13:56:50 PM
Contract Manager Approval	ddav12	08/07/2020 13:56:53 PM
Budget Analyst Approval	mranks1	08/10/2020 15:19:13 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23467**Agency Name: **OFFICE OF WORKFORCE INNOVATION**Agency Code: **018**Appropriation Unit: **3270-23**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Office of the Labor Commissioner

Contractor Name: **Office of the Labor Commissioner**Address: **1818 College Parkway, Suite 10**City/State/Zip: **Carson City, NV 89706**

Contact/Phone: shannonchambers@labor.nv.gov 775-684-1890

Vendor No.: D74000001

NV Business ID: GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: WIOA 1728516T

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/17/2020**

Anticipated BOE meeting date 10/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **317 days**4. Type of contract: **Interlocal Agreement**Contract description: **Data Improvements**

5. Purpose of contract:

This is a new Interlocal agreement to provide an IT System data collection modernization project to enhance data collection capabilities and reporting of individual registered apprenticeship records to OWINN.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,500.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The activities in OWINN's Department of Labor occupational Licensing Federal Grant requires the development and expansion of data collection to better understand and analyze trends shaping student outcomes in college and career readiness. OWINN is tasked with making data improvements and in partnering with stakeholders to update reporting with new data and visualizations while exploring how to include work-based learning program data into the existing State Longitudinal data system.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

OWINN staff does not have the technical knowledge.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Mayita Sanchez, Grants & Policy Analyst Ph: 702-486-8080

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/31/2020 10:44:36 AM
Division Approval	ssands	07/31/2020 10:44:39 AM
Department Approval	ssands	07/31/2020 10:44:41 AM
Contract Manager Approval	ssands	08/12/2020 16:20:01 PM
EITS Approval	tgalluzi	08/17/2020 08:17:16 AM
Budget Analyst Approval	dbaughn	08/17/2020 09:27:43 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22970**

Agency Name: TREASURER - COLLEGE SAVINGS TRUST	Legal Entity Name: Fulfillment Fund Las Vegas
Agency Code: 051	Contractor Name: Fulfillment Fund Las Vegas
Appropriation Unit: 1092-21	Address: Chaparral High School, 3850 Annie Oakley Dr., Portable #3
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89121
If "No" please explain: Not Applicable	Contact/Phone: Evelyn Garcia Morales 702-816-6146
	Vendor No.: T40231800D
	NV Business ID: NV20131081762

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Program Fees

Agency Reference #: **C 22970**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/28/2020**Anticipated BOE meeting date **05/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **156 days**4. Type of contract: **Contract**Contract description: **Workshops**

5. Purpose of contract:

This is a new contract to provide financial aid workshops to attract and engage diverse students and their parents, guardians, and advocates to learn about the financial aid process throughout Clark County, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada State Treasurer's Office, College Savings Division ('Office'), is responsible for administering various savings and scholarship programs that help Nevadans save and pay for post-secondary education, including: Nevada-sponsored national 529 savings plans; Nevada Prepaid Tuition; Nevada College Kickstart; and the Governor Guinn Millennium and Memorial Scholarships.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the range of experience and tools to perform these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

uAspire
Guinn Center
Fulfillment Fund
Easley

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to an informal solicitation and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 02/10/2020 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	alaw1	03/12/2020 13:58:29 PM
Division Approval	alaw1	03/12/2020 13:58:31 PM
Department Approval	alaw1	03/12/2020 13:58:33 PM
Contract Manager Approval	rmorse	06/05/2020 15:40:17 PM
Budget Analyst Approval	cbrekken	07/28/2020 13:50:19 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23324**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: J&J ENTERPRISES SERVICES, INC.
Agency Code: 082	Contractor Name: J&J ENTERPRISES SERVICES, INC.
Appropriation Unit: 1349-12	Address: 5920 W. Cougar Avenue
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89139-6996
If "No" please explain: Not Applicable	Contact/Phone: 702-361-2914
	Vendor No.: T29007913
	NV Business ID: NV19911019076

To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % B&G Building Rent Income Revenue

Agency Reference #: **ASD 2834289**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/11/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/10/2024**Contract term: **3 years and 304 days**4. Type of contract: **Contract**Contract description: **Concrete Services**

5. Purpose of contract:

This is a new contract to provide ongoing concrete services for State-owned buildings in southern Nevada on an as-needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$19,876.25**

Payment for services will be made at the rate of \$0.00 per Cubic yards

Other basis for payment: and 2 CY minimum plus delivery charges

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings, rooms, basements, floors, windows, furniture and appurtenances are to be kept clean, orderly and presentable as befitting public property.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

LACK OF MANPOWER9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Jaimes Concrete Inc
J&J Enterprises
LV Mobile Mix

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Per SAM 0338.0, each contractor will be contacted to submit bids on projects. J&J Enterprises Services Inc is a Nevada Public Works Board Contractor. Pursuant to NRS 338.13862, Buildings and Grounds is using a Public Works Board pre-qualified bidder.

d. Last bid date: 05/01/2020 Anticipated re-bid date: 05/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facilities Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/06/2020 07:46:03 AM
Division Approval	ssands	08/06/2020 07:46:05 AM
Department Approval	ssands	08/06/2020 07:46:08 AM
Contract Manager Approval	ssands	08/06/2020 07:46:11 AM
Budget Analyst Approval	nkephart	08/11/2020 08:54:59 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23258**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: THOLL FENCE INC
Agency Code: 082	Contractor Name: THOLL FENCE INC
Appropriation Unit: 1349-12	Address: 800 GLENDALE BOX 855
Is budget authority available?: Yes	City/State/Zip: SPARKS, NV 89432
If "No" please explain: Not Applicable	Contact/Phone: 775-358-8680
	Vendor No.: T11379600
	NV Business ID: NV19591000420

To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rental Income Revenue

Agency Reference #: **ASD 2834250**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/12/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 323 days**4. Type of contract: **Contract**Contract description: **FENCE MAINTENANCE**

5. Purpose of contract:

This is a new contract to provide ongoing installation, maintenance, and repair services for fences and gates located at state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,909.16**

Payment for services will be made at the rate of \$0.00 per hour

Other basis for payment: Fences; \$85/per hour/per man; Automatic Gate \$110/per hour/per man. Material will be assessed at Contractor's Pricing Schedule plus tax.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Buildings and Grounds Section maintains all State buildings, grounds, and properties not otherwise provided for by law.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of expertise

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Tholl Fence
Artistic Fence
Tahoe Fence

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of at least three vendors who maintain and repair fences.
Per SAM 0338.0 each contractor will be contacted to submit bids on projects.

d. Last bid date: 05/01/2020 Anticipated re-bid date: 05/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

B&G since 2003 service is satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Donnie Milner, Facility Supervisor III Ph: 684-1800

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/06/2020 07:42:51 AM
Division Approval	ssands	08/06/2020 07:42:54 AM
Department Approval	ssands	08/06/2020 07:42:57 AM
Contract Manager Approval	ssands	08/06/2020 07:42:59 AM
Budget Analyst Approval	nkephart	08/11/2020 10:23:43 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22488**Amendment Number: **3**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**Agency Code: **082**Contractor Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**Appropriation Unit: **1510-73**Address: **8882 SPANISH RIDGE AVE.**Is budget authority available? **Yes**City/State/Zip **LAS VEGAS, NV 89148-1303**

If "No" please explain: Not Applicable

Contact/Phone: **702-251-8896**Vendor No.: **T80997582**NV Business ID: **NV19871041301**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	90.00 %
Highway Funds	0.00 %	X Other funding	10.00 % Agency Funds

Agency Reference #: **112907**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/12/2019**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **3 years and 230 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the third amendment to the original contract which provides professional architectural/engineering services for the Nevada State College - Education Academic Building CIP project: SPWD Project No. 19-C19; Contract No. 112907. This amendment increases the maximum amount from \$864,280. to \$883,680 due to redesign of ceilings in rooms with a 2' x 8' grid system.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$774,800.00	\$774,800.00	\$774,800.00	Yes - Action
a. Amendment 1:	\$82,180.00	\$82,180.00	\$82,180.00	Yes - Action
b. Amendment 2:	\$7,300.00	\$7,300.00	\$7,300.00	No
2. Amount of current amendment (#3):	\$19,400.00	\$26,700.00	\$26,700.00	Yes - Info
3. New maximum contract amount:	\$883,680.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

- c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/17/2020 15:35:49 PM
Division Approval	lwildes	07/17/2020 15:35:55 PM
Department Approval	lwildes	07/17/2020 15:36:00 PM
Contract Manager Approval	lwildes	07/17/2020 15:36:06 PM
Budget Analyst Approval	nkephart	08/03/2020 14:02:41 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22488**Amendment Number: **4**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**Agency Code: **082**Contractor Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**Appropriation Unit: **1510-73**Address: **8882 SPANISH RIDGE AVE.**Is budget authority available?: **Yes**City/State/Zip: **LAS VEGAS, NV 89148-1303**If "No" please explain: **Not Applicable**Contact/Phone: **702-251-8896**Vendor No.: **T80997582**NV Business ID: **NV19871041301**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	90.00 %
Highway Funds	0.00 %	X Other funding	10.00 % Agency Funds

Agency Reference #: **112907**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/12/2019**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **3 years and 230 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides professional architectural/engineering services for the Nevada State College - Education Academic Building CIP project: SPWD Project No. 19-C19; Contract No. 112907. This amendment increases the maximum amount from \$883,680 to \$895,060 due to revised construction documents for the early childhood restrooms, playground, and floor finishes.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$774,800.00	\$774,800.00	\$774,800.00	Yes - Action
a. Amendment 1:	\$82,180.00	\$82,180.00	\$82,180.00	Yes - Action
b. Amendment 2:	\$7,300.00	\$7,300.00	\$7,300.00	No
c. Amendment 3:	\$19,400.00	\$26,700.00	\$26,700.00	Yes - Info
2. Amount of current amendment (#4):	\$11,380.00	\$11,380.00	\$38,080.00	Yes - Info
3. New maximum contract amount:	\$895,060.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	08/06/2020 13:31:14 PM
Division Approval	lwildes	08/06/2020 13:31:20 PM
Department Approval	lwildes	08/06/2020 13:31:27 PM
Contract Manager Approval	lwildes	08/06/2020 13:31:35 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23423**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1510-74**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CURTAINWALL DESIGN &**Contractor Name: **CURTAINWALL DESIGN &**Address: **CONSULTING INC
2400 S CIMARRON RD., STE 125
LAS VEGAS, NV 89117-7936**City/State/Zip: **702-222-9349**Contact/Phone: **T29032419**Vendor No.: **NV20051436120**NV Business ID: **2021-2024**

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	92.00 %
Highway Funds	0.00 %	X Other funding	8.00 % University Funds

Agency Reference #: 113572

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 332 days**4. Type of contract: **Contract**Contract description: **MISCELLANEOUS**

5. Purpose of contract:

This is a new contract which provides professional Commissioning, Surveying, and other Miscellaneous services for the College of Southern Nevada - Health and Sciences Building project, to include construction administration services for the building envelope systems: CIP Project No. 19-C28; SPWD Contract No. 113572.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$26,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Commissioning, Surveying and Miscellaneous Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Pang, Justus, Project Manager Ph: 702-786-8852

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/20/2020 09:11:04 AM
Division Approval	lwildes	07/20/2020 09:11:07 AM
Department Approval	lwildes	07/20/2020 09:11:10 AM
Contract Manager Approval	lwildes	07/20/2020 09:11:13 AM
Budget Analyst Approval	nkephart	08/03/2020 15:58:12 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22917**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **DLR GROUP ARCHITECTURE & ENGINEERING**Agency Code: **082**Contractor Name: **DLR GROUP ARCHITECTURE & ENGINEERING**Appropriation Unit: **1550-85**Address: **6225 NORTH 24 STREET**Is budget authority available? **Yes****SUITE 250**
City/State/Zip **PHOENIX, AZ 85016**

If "No" please explain: Not Applicable

Contact/Phone: 602-381-8580

Vendor No.: T32009274

NV Business ID: NV20121109037

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 113349

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/02/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **3 years and 119 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Southern Desert Correctional Center (SDCC) and High Desert State Prison (HDSP) - Recreation Yard Fencing CIP project, to include design, construction and bid documents, as well as construction administration services to provide 1,500 linear feet of recreation yard fencing at HDSP and 430 linear feet at SDCC: CIP Project No.19-M48; SPWD Contract No.113349. This amendment decreases the maximum amount from \$29,540 to \$6,220.00 due to insufficient available funding and shifting in state priorities.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$29,540.00	\$29,540.00	\$29,540.00	Yes - Info
2. Amount of current amendment (#1):	-\$23,320.00	-\$23,320.00	\$6,220.00	Yes - Info
3. New maximum contract amount:	\$6,220.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	07/15/2020 14:35:11 PM
Division Approval	Iwildes	07/15/2020 14:35:15 PM
Department Approval	Iwildes	07/15/2020 14:35:21 PM
Contract Manager Approval	Iwildes	07/15/2020 14:35:25 PM
Budget Analyst Approval	nkephart	07/21/2020 09:33:47 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19488**Amendment Number: **4**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING**Agency Code: **082**Contractor Name: **FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING**Appropriation Unit: **1550-63**Address: **dba FARR WEST ENGINEERING**Is budget authority available? **Yes****5510 Longley Lane**City/State/Zip **Reno, NV 89511**

If "No" please explain: Not Applicable

Contact/Phone: **775-851-4788**Vendor No.: **T81102795A**NV Business ID: **NV20011242988**To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **111597**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 172 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP project: CIP Project No. 17-M29; SPWD Contract No. 111597. This amendment increases the maximum amount of \$160,178 to \$165,578 due to an additional sampling review of Well #6 to Bureau of Safe Drinking Water.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$135,975.00	\$135,975.00	\$135,975.00	Yes - Action
a. Amendment 1:	\$4,850.00	\$4,850.00	\$4,850.00	No
b. Amendment 2:	\$13,920.00	\$18,770.00	\$18,770.00	Yes - Info
c. Amendment 3:	\$5,433.00	\$5,433.00	\$24,203.00	No
2. Amount of current amendment (#4):	\$5,400.00	\$10,833.00	\$29,603.00	Yes - Info
3. New maximum contract amount:	\$165,578.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

- c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	08/10/2020 12:15:54 PM
Division Approval	lwildes	08/10/2020 12:16:01 PM
Department Approval	lwildes	08/10/2020 12:16:07 PM
Contract Manager Approval	lwildes	08/10/2020 12:16:14 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22715**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **BERGER HANNAFIN ARCHITECTURE**Agency Code: **082**Contractor Name: **BERGER HANNAFIN ARCHITECTURE**Appropriation Unit: **1558-70**Address: **312 WEST 3RD STREET**Is budget authority
available? **Yes**City/State/Zip **CARSON CITY, NV 89703**

If "No" please explain: Not Applicable

Contact/Phone: **775-882-6455**Vendor No.: **T29042660**NV Business ID: **NV20101506066**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113238**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **02/11/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2023**Contract term: **3 years and 139 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Western Nevada College - Advance Planning Marlette Hall Renovation CIP project, to include design through construction documents to reconfigure the lecture hall from a 120 seat tiered auditorium style classroom with fixed seating to a less dense and more collaborative teaching classroom with 50 to 60 seats and more flexible student seating units: CIP Project No. 19-P71; SPWD Contract No.113238. This amendment decreases the maximum amount from \$65,750.00 to \$18,423.65 due to insufficient available funding and shifting in state priorities.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$65,750.00	\$65,750.00	\$65,750.00	Yes - Action
2. Amount of current amendment (#1):	-\$47,326.65	-\$47,326.65	-\$47,326.65	Yes - Info
3. New maximum contract amount:	\$18,423.35			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLP

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 14:53:56 PM
Division Approval	lwildes	07/15/2020 14:54:04 PM
Department Approval	lwildes	07/15/2020 14:54:11 PM
Contract Manager Approval	lwildes	07/15/2020 14:54:16 PM
Budget Analyst Approval	nkephart	07/21/2020 09:34:54 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21352**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **GEOTECHNICAL & ENVIRONMENTAL Services, Inc.**Agency Code: **082**Contractor Name: **GEOTECHNICAL & ENVIRONMENTAL Services, Inc.**Appropriation Unit: **1577-33**Address: **SERVICES, INC.**Is budget authority available?: **Yes****7150 PLACID ST.**City/State/Zip: **LAS VEGAS, NV 89119-4203**

If "No" please explain: Not Applicable

Contact/Phone: 702-365-1001

Vendor No.: T81085017

NV Business ID: NV19921050120

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 112269

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/15/2019**

Anticipated BOE meeting date 09/2021

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **3 years and 166 days**4. Type of contract: **Contract**Contract description: **Miscellaneous**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the National Guard Readiness Center in Las Vegas CIP project: CIP Project No. 17-C05; SPWD Contract No. 112269. This amendment decreases the maximum amount from \$326,311 to \$296,311 to close out the contract.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$326,311.00	\$326,311.00	\$326,311.00	Yes - Action
2. Amount of current amendment (#1):	-\$30,000.00	-\$30,000.00	-\$30,000.00	Yes - Info
3. New maximum contract amount:	\$296,311.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	08/05/2020 10:53:29 AM
Division Approval	lwildes	08/05/2020 10:53:34 AM
Department Approval	lwildes	08/05/2020 10:53:39 AM
Contract Manager Approval	lwildes	08/05/2020 10:53:44 AM
Budget Analyst Approval	nkephart	08/13/2020 12:48:27 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23422**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: TECTONICS DESIGN GROUP
Agency Code: 082	Contractor Name: TECTONICS DESIGN GROUP
Appropriation Unit: 1585-54	Address: 730 SANDHILL ROAD
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89521
If "No" please explain: Not Applicable	Contact/Phone: 775-824-9988
	Vendor No.: T32000404
	NV Business ID: NV20051722323

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113456**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/04/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 330 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Carson City Stewart Campus & #65533; American Disability Acts(ADA) Site Upgrades for Building 89 CIP Project, which includes design, construction documents, and bidding documents for the removal and replacement of the existing exterior concrete ramps and stairs to building 89 to be ADA compliant: CIP Project No. 19-S02(4); SPWD Contract No. 113456.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,855.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Rife, Michael, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/20/2020 08:35:46 AM
Division Approval	lwildes	07/20/2020 08:35:49 AM
Department Approval	lwildes	07/20/2020 08:35:52 AM
Contract Manager Approval	lwildes	07/20/2020 08:35:55 AM
Budget Analyst Approval	nkephart	08/03/2020 13:56:07 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19575** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **PAUL CAVIN ARCHITECT, LLC**

Agency Code: **082** Contractor Name: **PAUL CAVIN ARCHITECT, LLC**

Appropriation Unit: **1590-92** Address: **51 MARILYN MAE DR.**

Is budget authority available?: **Yes** City/State/Zip: **SPARKS, NV 89441-6236**

If "No" please explain: Not Applicable Contact/Phone: **775-384-6141**

Vendor No.: **T29033842**

NV Business ID: **NV20131182382**

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/13/2018**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 137 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada State Capitol and Annex Buildings Exterior Renovations CIP project, to include design documents for painting and repair of the windows, doors, fascia, soffits, roof balustrade and dome, additional painting of the columns and repair of the copper gutters: CIP Project No. 17-M70; SPWD Contract No. 111748. This amendment decreases the maximum amount from \$158,750 to \$127,000 in order to close out the project.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$158,750.00	\$158,750.00	\$158,750.00	Yes - Action
2. Amount of current amendment (#1):	-\$31,750.00	-\$31,750.00	-\$31,750.00	Yes - Info
3. New maximum contract amount:	\$127,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 16:07:26 PM
Division Approval	lwildes	07/15/2020 16:07:33 PM
Department Approval	lwildes	07/15/2020 16:07:39 PM
Contract Manager Approval	lwildes	07/15/2020 16:07:47 PM
Budget Analyst Approval	nkephart	08/11/2020 08:11:28 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22863**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **PETTY & ASSOCIATES, INC.**Agency Code: **082**Contractor Name: **PETTY & ASSOCIATES, INC.**Appropriation Unit: **1590-18**Address: **1375 GREG ST.
SUITE 106**Is budget authority available?: **Yes**City/State/Zip: **SPARKS, NV 89431-6077**If "No" please explain: **Not Applicable**Contact/Phone: **775-359-5777**Vendor No.: **T80580350**NV Business ID: **NV19841014622**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **113320**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/10/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **3 years and 112 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Carson City Attorney General's Building - Central Plant Renovation CIP project, to include design construction and bid documents as well as construction administration services to replace the building's existing chiller, cooling tower, boiler, pumps, piping, controls and the domestic hot water tempering station: CIP Project No. 19-M30; SPWD Contract No.113320. This amendment decreases the maximum amount of \$112,000 to \$89,600 due to insufficient available funding and shifting in state priorities.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$112,000.00	\$112,000.00	\$112,000.00	Yes - Action
2. Amount of current amendment (#1):	-\$22,400.00	-\$22,400.00	-\$22,400.00	Yes - Info
3. New maximum contract amount:	\$89,600.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural / Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/15/2020 14:12:44 PM
Division Approval	lwildes	07/15/2020 14:12:49 PM
Department Approval	lwildes	07/15/2020 14:12:53 PM
Contract Manager Approval	lwildes	07/15/2020 14:12:57 PM
Budget Analyst Approval	nkephart	07/21/2020 09:35:54 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23424**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ROUNDS ENGINEERING LTD DBA
Agency Code: 082	Contractor Name: ROUNDS ENGINEERING LTD DBA
Appropriation Unit: 1590-14	Address: CR ENGINEERING
Is budget authority available?: Yes	5434 LONGLEY LANE
If "No" please explain: Not Applicable	City/State/Zip: RENO, NV 89511-1879
	Contact/Phone: 775-826-1919
	Vendor No.: T29024113
	NV Business ID: NV20041355601

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 113469

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 331 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract which provides professional architectural /engineering Services for the State Library and Archives - Central Plant Renovation project, which includes bid documents, conformed drawings, and record drawings for the complete renovation of the existing central plant(heating and cooling equipment) at the State Library and Archives building in Carson City: SPWD Project No. 19-M17; Contract No. 113469.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$36,500.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Leg. Approved CIP's

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional /Code Plan Checking Services/[other discipline] are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Bassi, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	07/20/2020 10:21:25 AM
Division Approval	lwildes	07/20/2020 10:21:28 AM
Department Approval	lwildes	07/20/2020 10:21:31 AM
Contract Manager Approval	lwildes	07/20/2020 10:21:34 AM
Budget Analyst Approval	nkephart	08/03/2020 16:16:39 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22395**Amendment Number: **1**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Legal Entity Name: **MIMOWORKS INTERNET, LLC**Agency Code: **180**Contractor Name: **MIMOWORKS INTERNET, LLC**Appropriation Unit: **1388-00**Address: **PO BOX 1025**Is budget authority available?: **Yes**City/State/Zip: **TONOPAH, NV 89049**

If "No" please explain: Not Applicable

Contact/Phone: **DAVID PETERSON 775 842 9161**

Vendor No.: Not Applicable

NV Business ID: Not Applicable

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Revenue Contract**Contract description: **Rack Space Rental**

5. Purpose of contract:

This is the first amendment to the original revenue contract which provides ongoing rack space at Montezuma Peak in Esmeralda County. This amendment increases the maximum amount from \$7,533.76 to \$13,184.08 due to an increase in service.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$7,533.76	\$7,533.76	\$7,533.76	No
2. Amount of current amendment (#1):	\$5,650.32	\$13,184.08	\$13,184.08	Yes - Info
3. New maximum contract amount:	\$13,184.08			

II. JUSTIFICATION

7. What conditions require that this work be done?

Revenue Contract

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Revenue Contract

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Not Applicable

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

We have had ongoing revenue contracts with MimoWorks Internet, LLC (formerly Central Nevada AC DC Electric) for many years and other mountain top sites, all satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	07/06/2020 06:05:27 AM
Division Approval	ddav12	07/06/2020 06:05:30 AM
Department Approval	ddav12	07/06/2020 06:05:35 AM
Contract Manager Approval	ascott	07/22/2020 08:38:10 AM
Budget Analyst Approval	dlenzner	08/13/2020 17:00:36 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23452**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2560-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **LABEEG BUILDING SERVICES, INC.**Contractor Name: **LABEEG BUILDING SERVICES, INC.**Address: **225 KEYSTONE AVE.**City/State/Zip: **RENO, NV 89503**Contact/Phone: **MELISSA@LABEEG.COM 775-348-4805**Vendor No.: **T27029360**NV Business ID: **NV20071295199**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	48.00 %	Fees	0.00 %
X	Federal Funds	52.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/06/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2024**Contract term: **3 years and 360 days**4. Type of contract: **Contract**Contract description: **Cleaning Services**

5. Purpose of contract:

This is a new contract to provide ongoing cleaning services at the Northern Nevada Veterans Memorial Cemetery.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,080.00**

Payment for services will be made at the rate of \$335.00 per month

Other basis for payment: Upon submission of an approved invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

The administration buildings and restrooms need cleaning to ensure a safe working environment for the staff as well as a safe place for the clients to conduct their business.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Cemetery staff are tasked with maintaining the cemetery grounds and are unable to clean the Administration buildings as well. There are no other State agencies that provide this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

CC Cleaning Services
Molly Maid
Labeeg Building Services

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Based on the bids received, the quality of service offered met the specific needs required of the Cemetery and at a fair price.

d. Last bid date: 06/10/2020 Anticipated re-bid date: 03/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	07/24/2020 12:56:18 PM
Division Approval	jtheil1	07/24/2020 12:56:20 PM
Department Approval	dgree6	07/27/2020 16:14:22 PM
Contract Manager Approval	jtheil1	07/28/2020 11:00:44 AM
Budget Analyst Approval	afrantz	08/06/2020 10:52:39 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23434**

Agency Name: DEPARTMENT OF VETERANS SERVICES	Legal Entity Name: Johnson Controls
Agency Code: 240	Contractor Name: Johnson Controls
Appropriation Unit: 2561-07	Address: 1545 Pama Lane
Is budget authority available? Yes	City/State/Zip: Las Vegas, NV 89119
If "No" please explain: Not Applicable	Contact/Phone: Salman Jawhari 792/739-1921
	Vendor No.: PUR0003182C
	NV Business ID: NV20011155948

To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	65.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	35.00 % Private/County

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/28/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2023**Contract term: **3 years and 3 days**4. Type of contract: **Contract**Contract description: **HVAC Maintenance**

5. Purpose of contract:

This is a new contract to provide ongoing maintenance and service on air conditioning and vacuum systems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,154.00**

Other basis for payment: \$911.66/month year 1; \$948.25/month year 2; \$986.25/month year 3

II. JUSTIFICATION

7. What conditions require that this work be done?

Maintain proper working order of air conditioning equipment and vacuum system. Provide HVAC preventative maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Requires special skills and tools. No State agencies or employees provide this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Schneider Electric
Envise
Johnson Controlsb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price and familiarity with the facility and equipment.

d. Last bid date: 06/30/2020 Anticipated re-bid date: 04/30/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has provided fire and alarm services under statewide contract in the past for NDVS.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	07/22/2020 11:19:43 AM
Division Approval	jtheil1	07/22/2020 11:19:46 AM
Department Approval	dgree6	07/22/2020 16:24:13 PM
Contract Manager Approval	jtheil1	07/24/2020 07:10:58 AM
Budget Analyst Approval	afrantz	07/28/2020 10:28:09 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23358**

Agency Name: DEPARTMENT OF VETERANS SERVICES	Legal Entity Name: ARBORGLYPH LTD
Agency Code: 240	Contractor Name: ARBORGLYPH LTD
Appropriation Unit: 2564-10	Address: 1515 Plumas Street
Is budget authority available? Yes	City/State/Zip: RENO, NV 89509-3318
If "No" please explain: Not Applicable	Contact/Phone: MIKE HENDERSON, OWNER 775/762-4058
	Vendor No.: T32005228
	NV Business ID: NV20161011649

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % VETERANS GIFT ACCOUNT

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/10/2020**Anticipated BOE meeting date **09/2020**Retroactive? **Yes**

If "Yes", please explain

NDVS respectfully requests this contract be made retroactive to July 10, 2020 as a work program was required to open the needed budget account for the new fiscal year. This vendor is responsible for the maintenance and hosting of the NDVS website which is a major component of connecting veterans and their families to the benefits and services that they have earned.

3. Termination Date: **07/09/2022**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Website Maint/Host**

5. Purpose of contract:

This is a new contract to provide ongoing website maintenance and hosting services for the Nevada Department of Veterans Services WordPress website, eCommerce solution and the Patheon.io monthly.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$23,500.00**

Other basis for payment: \$625.00 monthly maintenance retainer (5 hours minimum); \$175.00 current monthly rate for Pantheon.io Performance Managed WordPress hosting; and any additional hours incurred and billed at \$125.00/hour as needed and approved by NDVS. Payable upon approval of satisfactory completion of work and submission of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

This will allow for the maintenance and hosting of the Agency website.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Agency does not have the manpower available to perform these services.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

ARBORGLYPH, LTD
ARGENTUM PARTNERS
THE ABBI AGENCY
CIVIC CONNECT

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor had fair price for services and was able to include web hosting resulting in additional saving to the agency.

d. Last bid date: 03/15/2020 Anticipated re-bid date: 03/15/2022

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor currently performing these services and services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	06/25/2020 09:23:25 AM
Division Approval	jtheil1	06/25/2020 09:23:28 AM
Department Approval	dgree6	06/25/2020 17:37:20 PM
Contract Manager Approval	jtheil1	06/26/2020 07:00:01 AM
EITS Approval	tgalluzi	06/30/2020 09:07:34 AM
Budget Analyst Approval	afrantz	08/07/2020 08:05:55 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23468**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2564-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **FACTORY, THE LLC**Contractor Name: **FACTORY, THE LLC**Address: **201 W LIBERTY ST STE 312**City/State/Zip: **RENO, NV 89501-2017**Contact/Phone: **BRIAN STOUTT 775/846-0522**Vendor No.: **T32004634**NV Business ID: **NV20091222446**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % GIFT FUNDS

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/06/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/15/2021**Contract term: **343 days**4. Type of contract: **Contract**Contract description: **Graphic/Web Design**

5. Purpose of contract:

This is a new contract to design, write, edit and complete the 2020 Nevada Department of Veterans Services's Annual Report.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$23,000.00**

Payment for services will be made at the rate of \$1,800.00 per month

Other basis for payment: Upon submission of approved detailed invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

The annual report is used as a communication toll with agencies, community partners, and state and federal agencies.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDVS does not have the staff available with the skills necessary to complete project.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor presented with the skills to perform the job as required and at a fair price.

d. Last bid date: 07/15/2020 Anticipated re-bid date: 05/17/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor performed similar services for NDVS in the past. Those services were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	07/30/2020 10:25:59 AM
Division Approval	jtheil1	07/30/2020 10:26:03 AM
Department Approval	dgree6	07/30/2020 16:11:11 PM
Contract Manager Approval	jtheil1	07/31/2020 06:51:59 AM
Budget Analyst Approval	afrantz	08/06/2020 10:37:59 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23394**Agency Name: **CANNABIS COMPLIANCE BOARD**Agency Code: **270**Appropriation Unit: **4207-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **RS CONSULTING SERVICES LLC**Contractor Name: **RS CONSULTING SERVICES LLC**Address: **2318 Copper Springs Road**City/State/Zip **Reno, NV 89521-4234**Contact/Phone: **RAMESH SEGU 7752309871**Vendor No.: **T29042266**NV Business ID: **NV20061047362**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % GL-7211 MSA Programmer Charges
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/08/2020**Anticipated BOE meeting date **08/2021**Retroactive? **Yes**

If "Yes", please explain

This contract will serve as the maintenance solution for the website of the newly formed Cannabis Compliance Board which was authorized July 1st, 2020.

3. Termination Date: **06/30/2021**Contract term: **357 days**4. Type of contract: **Contract**Contract description: **RS CONSULTING**

5. Purpose of contract:

This is a new contract to provide maintenance for the Cannabis Compliance Board website. The project scope includes monitoring site speed, downtime, providing technical support and implementing fixes and updates as needed.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00**

Payment for services will be made at the rate of \$130.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Vendors should have had prior experience in developing and maintaining websites with the State of Nevada working within tight deadlines.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

EITS web group does not support this type of website. The current employees do not have the skills to maintain and develop website enhancements so we need help from vendor who can.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

RS Consulting Services
VisionASP
Maintainn

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

RS Consulting Services has experience with State of Nevada websites and tight deadlines. They have worked on similar projects such as census.nv.gov, www.nevada211.org, and have displayed the ability to continue providing support on an as needed basis. RS Consulting does not require a monthly maintenance package fee and their services can be utilized as needed. RS Consulting is already familiar with the current website and the future vision of needed enhancements.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Tiffany Day, Accounting Assistant III Ph: 7756876280

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jgiesle2	07/07/2020 16:22:22 PM
Division Approval	jgiesle2	07/07/2020 16:22:25 PM
Department Approval	jgiesle2	07/07/2020 16:22:27 PM
Contract Manager Approval	jgiesle2	07/07/2020 16:22:31 PM
EITS Approval	tgalluzi	07/07/2020 16:27:14 PM
Budget Analyst Approval	dlenzner	07/23/2020 16:19:17 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23411**

Agency Name: STATE PUBLIC CHARTER SCHOOL AUTHORITY	Legal Entity Name: Halli Bayer
Agency Code: 315	Contractor Name: Halli Faulkner
Appropriation Unit: 2711-04	Address: 920 52nd St. NE
Is budget authority available?: Yes	City/State/Zip: Washington, DC 20019
If "No" please explain: Not Applicable	Contact/Phone: Halli Faulkner 585-305-6148
	Vendor No.: T32004144
	NV Business ID: NV20161464158
To what State Fiscal Year(s) will the contract be charged?	2021-2024

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Sponsorship Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/27/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 339 days**4. Type of contract: **Contract**Contract description: **External Reviewer**

5. Purpose of contract:

This is a new contract to provide an external reviewer to read and evaluate charter school applications and other documents related to the operation and authorization of charter schools.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,999.00**

Payment for services will be made at the rate of \$999.00 per application or other charter document

II. JUSTIFICATION

7. What conditions require that this work be done?

The State Public Charter School Authority is seeking to establish a pool of qualified peer reviewers to read and evaluate charter school applications and other documents related to the operation and/or authorizing of charter schools.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The agency does not have the staff necessary to conduct the review of these charter school documents.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Elizabeth Woodcock
Krinsten Vandawalker
Halli Faulkner**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor meets the general minimum qualifications required in the informal solicitation.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State Public Charter School Authority - services were satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No

b. If "No", please explain:

Halli Bayer is doing business as Halli Faulkner.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ablackwe	07/21/2020 18:01:39 PM
Division Approval	ablackwe	07/21/2020 18:01:43 PM
Department Approval	dbowma1	07/22/2020 08:57:14 AM
Contract Manager Approval	ablackwe	07/22/2020 09:12:09 AM
Budget Analyst Approval	cbrekken	07/27/2020 09:47:19 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23473**

Agency Name:	STATE PUBLIC CHARTER SCHOOL AUTHORITY	Legal Entity Name:	The Achievement Network, Ltd
Agency Code:	315	Contractor Name:	The Achievement Network, Ltd
Appropriation Unit:	2711-04	Address:	One Beacon Street
Is budget authority available?:	Yes	City/State/Zip	Boston, MA 02108
If "No" please explain:	Not Applicable	Contact/Phone:	Sarah Ledon 415-319-1209
		Vendor No.:	
		NV Business ID:	NV20181101328

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 315

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2020**Contract term: **89 days**4. Type of contract: **Contract**Contract description: **Professional Learnin**

5. Purpose of contract:

This is a new contract to provide a Professional Learning Series for Academy Planning for School Reopening.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,999.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The State Public Charter School Authority requires a vendor to provide a Professional Learning Series for Academic Planning for School Reopening.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is no state employees that have qualifications to perform this work.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Cognia Inc
Community Training and Assistance Center
Social Policy Research Associates
The Achievement Network, Ltd
Partners in School Innovation

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The Achievement Network proposed a plan that was able to provide more training time and focused on local needs.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbowma1	07/31/2020 10:30:31 AM
Division Approval	ablackwe	07/31/2020 10:33:47 AM
Department Approval	dbowma1	07/31/2020 10:34:32 AM
Contract Manager Approval	ablackwe	07/31/2020 10:35:32 AM
Budget Analyst Approval	dbaughn	08/03/2020 13:41:12 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23344**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	JCN COURIER SERVICE INC
Agency Code:	409	Contractor Name:	JCN COURIER SERVICE INC
Appropriation Unit:	3148-04	Address:	PO BOX 26777
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89126-0777
If "No" please explain:	Not Applicable	Contact/Phone:	KELLY WOOD 702/221-9131
		Vendor No.:	T27040673A
		NV Business ID:	NV19901045993

To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2024**Contract term: **3 years and 363 days**4. Type of contract: **Contract**Contract description: **Courier**

5. Purpose of contract:

This is a new contract to provide ongoing courier services for regular or urgent same-day delivery of pharmaceuticals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,240.00**

Payment for services will be made at the rate of \$6,060.00 per annual maximum

Other basis for payment: Standard delivery is \$35/delivery; rush delivery is \$50/delivery. Estimate \$35 x 3 deliveries per week = \$105, 1 rush per month = \$50. Annual amount (\$105 x 52) + (50 x 12) = \$6,060.

II. JUSTIFICATION

7. What conditions require that this work be done?

Summit View Youth Center is required to use the Southern Nevada Adult Mental Health Services Outpatient Pharmacy, which does not provide courier services for regular or urgent same-day delivery.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have courier services available.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

JCN Courier
Blue Streak
Reliable Driver

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

JCN Courier was selected as they had the larger request window and availability.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been under contract with the Division since 2016. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Patrick Mendez, Superintendent Ph: 702-668-4755

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	07/17/2020 14:55:35 PM
Division Approval	knielsen	07/21/2020 20:01:10 PM
Department Approval	mwinebar	07/24/2020 13:49:57 PM
Contract Manager Approval	sknigge	07/30/2020 08:55:19 AM
Budget Analyst Approval	jyou23	08/03/2020 13:14:40 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21256** Amendment Number: **3**

Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES** Legal Entity Name: **FM MARKETING, LLC**

Agency Code: **409** Contractor Name: **FM MARKETING, LLC**

Appropriation Unit: **3229-42** Address: **7473 W LAKE MEAD BLVD STE 100**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89128-0265**

If "No" please explain: Not Applicable Contact/Phone: **Susan Somers 702/249-9900**

Vendor No.: **T29040933**

NV Business ID: **NV20041045342**

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2018**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **3 years and 208 days**4. Type of contract: **Contract**Contract description: **Media Campaign**

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing custom media lists for placement of a media advertising plan; follow-up with civic groups, non-profit education organizations for potential referral sources and to provide all forms of public relations. This amendment increases the maximum amount from \$546,300 to \$586,300 and revises Attachment AA - Scope of Work to include raising awareness of reporting child abuse.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$50,000.00	\$50,000.00	\$50,000.00	Yes - Action
a. Amendment 1:	\$46,300.00	\$46,300.00	\$46,300.00	Yes - Info
b. Amendment 2:	\$450,000.00	\$450,000.00	\$496,300.00	Yes - Action
2. Amount of current amendment (#3):	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
3. New maximum contract amount:	\$586,300.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

A shortage of Foster Homes in rural Nevada causes children to be placed outside of their community of origin. A comprehensive media campaign coupled with collaborative outreach by courts and community partnership will yield homes in rural Nevada and enhance efforts to keep children in their schools and communities when they must be removed from their parents due to safety reasons.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies do not have the expertise to undertake launching a media campaign.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 180607

Approval Date: 06/29/2018

- c. Why was this contractor chosen in preference to other?

FM Marketing developed DCFS' media campaign in 2014. This contract is a continuation of that existing campaign.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has been under contract with the Division since 2014 and service provided has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

hbugg

07/17/2020 12:16:33 PM

Division Approval

knielsen

07/17/2020 12:46:33 PM

Department Approval
Contract Manager Approval
Budget Analyst Approval

mwinebar
sknigge
jyou23

07/20/2020 07:56:35 AM
07/20/2020 15:37:12 PM
07/22/2020 16:42:40 PM



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division**

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	200701

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>Division of Child and Family Services</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Kathryn Roose</i>	<i>775-301-7141</i>	<i>kroose@dcfs.nv.gov</i>
	<i>Molly Blanchette</i>	<i>775-684-7944</i>	<i>mblanchette@dcfs.nv.gov</i>
	<i>Jennifer McEntee</i>	<i>775-684-4452</i>	<i>jmcentee@dcfs.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>FM Marketing LLC</i>
	Contact Name:	<i>Susan Somers</i>
	Complete Address:	<i>7473 West Lake Mead, Suite 10, Las Vegas, NV 89128</i>
	Telephone Number:	<i>702-227-8700 or cell 702-249-9900</i>
	Email Address:	<i>susan@fmmnpr.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>x</i>
	Professional Service Exemption:	

1d	Contract Information:				
	Is this a new Contract?	Yes		No	<i>x</i>
	Amendment:	<i>#3</i>			
	CETS:	<i>#21256</i>			

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>December 4, 2018</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	

Other (Explain):	
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Purchasing Use Only:

Approval #:

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1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$27,465.50 (CETS #21256 Amend 3)
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>Original Scope: Create custom media lists for placement of media plan/advertising; follow up with civic groups, non-profits and education organizations that DCFS has presented panel discussions to recruit/create awareness for potential referral sources; provide public relations services, such as writing & distributing press releases, media alerts, place radio, TV, print and online media, schedule for TV and radio interviews, news stories, briefs, sound bites, online submissions and listings, promote upcoming foster parent training and events, coordinate media interviews, photo shoots, media training in rural Nevada communities; provide updated content for Childs Journey Home, Facebook page, Instagram or twitter messaging.</i></p>
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3	<p>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</p> <p><i>FM Marketing created a marketing campaign in 2014 and developed relationships with media outlets. The vendor will capitalize on those relationships where available and use existing channels to push out this high-priority campaign.</i></p>
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4	<p>Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:</p> <p><i>The existing channels for the existing campaign are already in use. This campaign is necessary to address the unprecedented drop in calls for child protective services due to COVID-19. Reports of child abuse and neglect dropped substantially in Nevada almost entirely as a result of children no longer attending school or, in many cases, childcare.</i></p>
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Were alternative services or commodities evaluated? Check One.		Yes:		No:	
5	a. <i>If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>				
	b. <i>If not, why were alternatives not evaluated?</i>				
	<i>The current advertising campaign was developed including print, media, and radio content in 2014. The service provider developed relationships with media outlets in rural Nevada and we want to capitalize on those relationships where available to push out this imperative message as soon as possible.</i>				

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Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.				Yes:	No:
a. If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:					
Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)	
12/04/2018	06/30/22	\$450,000	CETS #21256 Amend 2 – Provide ongoing custom media lists for placement of a media advertising plan; follow-up with civic groups, not-profit education organizations for potential referral sources and to provide all forms of public relations.	180607	
12/04/2018	09/30/19	\$46,300	CETS #21256 Amend 1 – Provide ongoing custom media lists for placement of a media advertising plan; follow-up with civic groups, not-profit education organizations for potential referral sources and to provide all forms of public relations.	180607	
12/04/2018	09/30/19	\$50,000	CETS #21256 – Provide ongoing custom media lists for placement of a media advertising plan; follow-up with civic groups, not-profit education organizations for potential referral sources and to provide all forms of public relations.	180607	
08/24/2018	09/30/10	\$49,862	CETS #20599 - Create custom media lists for placement of a media advertising plan; follow up with civic groups, non-profit and education organizations for potential referral sources and to provide all forms of public relations.	180607	
10/01/14	9/30/15	\$93,525	Create media plan and positive awareness opportunities in rural Nevada communities by using developed media lists, create	Previously issued on subaward	

6

#200701 ②

				<i>and publicize DCFS message through press releases, radio, TV, print & online media, billboards and content for DCFS Facebook page, Childs Journey Home, etc.</i>	
	07/01/14	09/30/14	\$60,175	<i>Create media plan and positive awareness opportunities in rural Nevada communities by using developed media lists, create and publicize DCFS message through press releases, radio, TV, print & online media, billboards and content for DCFS Facebook page, Childs Journey Home, etc.</i>	<i>Previously issued on subaward</i>

	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
7	<i>The current advertising campaign was developed including print, media, and radio content in 2014 at a substantial cost. To put this out to bid would mean starting over and losing valuable time addressing the problematic drops in Child Protective Services (CPS) calls that threatens the health, safety or welfare of the persons in this state.</i>

	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
8	<i>FM Marketing created this media plan in 2014 and having done so, they have everything needed to recreate the plan for CPS in an effective and timely manner.</i>

	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	x
9	a. <i>If yes, please provide details regarding future obligations or needs.</i>				

Purchasing Use Only:

Approval #:

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By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

K. Roase

Agency Representative Initiating Request

Kathryn Roase

Print Name of Agency Representative Initiating Request

6/25/2020

Date

Mandi Davis

Signature of Agency Head Authorizing Request

Mandi Davis, Deputy Administrator

Print Name of Agency Head Authorizing Request

6/25/20

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:

Kevin D. Doty

Administrator, Purchasing Division or Designee

7/6/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23382**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3719-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GEOVOX SECURITY INC**Contractor Name: **GEOVOX SECURITY INC**Address: **PO BOX 22043**City/State/Zip: **HOUSTON, TX 77227-2043**Contact/Phone: **Colin Frazier 713/521-9404**Vendor No.: **T27012197A**NV Business ID: **N/A**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Prison Industries Revenue

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/22/2020**Anticipated BOE meeting date **07/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 343 days**4. Type of contract: **Rental Agreement**Contract description: **Heartbeat Detector**

5. Purpose of contract:

This is a new contract to provide ongoing services to lease a heartbeat detector for Prison Industries at Northern Nevada Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,764.00**

Other basis for payment: FY21: \$3,588.00 / FY22: \$3,588.00 / FY23: \$3,588.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This equipment monitors trucks to minimize the risk of inmates escaping from the correction center.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Geovox is the only provider of this equipment in the U.S. No other State agency provides this equipment.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the lowest and most responsive bid and the only provider in the U.S.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components? . No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDOC contract from March 2016 to March 2019. Services verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

This vendor has no NV Business License. This vendor is based out of Houston, TX and is the only vendor for this equipment in the U.S.

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

No. The Secretary of State Office indicated that no NV Business License is required since no employees work in the state.

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

No b. If "NO", please explain.

No NV Business License.

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddastal	07/06/2020 11:26:39 AM
Division Approval	amonro1	07/09/2020 10:55:09 AM
Department Approval	sewart	07/09/2020 11:34:43 AM
Contract Manager Approval	aroma2	07/14/2020 12:29:31 PM
Budget Analyst Approval	bmacke1	07/22/2020 13:10:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23343**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3759-09**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AMERICAN CHILLER SERVICE INC**Contractor Name: **AMERICAN CHILLER SERVICE INC**Address: **ACS**City/State/Zip: **11328 SUNRISE GOLD CIRCLE
RANCHO CORDOVA, CA 95742-6508**Contact/Phone: **BEN BARLOW 775-322-9900**Vendor No.: **PUR0005542**NV Business ID: **NV19921063155**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/22/2020**Anticipated BOE meeting date **07/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **3 years and 344 days**4. Type of contract: **Contract**Contract description: **Chiller PM**

5. Purpose of contract:

This is a new contract to provide ongoing preventative maintenance inspections and repairs on the chillers at Lovelock Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$38,589.00**

Other basis for payment: 3759-09 ~ FY21 \$8,564.00 / FY22 \$8,758.00 / FY23 \$12,364.00 / FY24 \$8,903.00

II. JUSTIFICATION

7. What conditions require that this work be done?

For the health and safety of staff and offenders.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The department does not have the expertise and/or equipment for this service. No other State agency offers these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as best provider of this service per the technical and cost evaluation of agency solicitation NDOC/2020/0007.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY08 to current with Nevada Department of Corrections. Service has been verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbretche	06/25/2020 17:54:56 PM
Division Approval	amonro1	06/29/2020 08:25:00 AM
Department Approval	sewart	06/29/2020 09:36:55 AM
Contract Manager Approval	aroma2	07/14/2020 12:54:19 PM
Budget Analyst Approval	bmacke1	07/22/2020 12:58:27 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22334** Amendment Number: **1**

Agency Name: **DPS-HIGHWAY PATROL** Legal Entity Name: **WAYCARE TECHNOLOGIES, INC.**

Agency Code: **651** Contractor Name: **WAYCARE TECHNOLOGIES, INC.**

Appropriation Unit: **4713-52** Address: **13535 Ventura Blvd.**

Is budget authority available?: **Yes** City/State/Zip: **Suite C 410 Sherman Oaks, CA 91423**

If "No" please explain: **Not Applicable** Contact/Phone: **Noam Maital 617-943-4343**

Vendor No.: **T32006942**

NV Business ID: **NV20181260636**

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/08/2019**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **08/31/2020**Contract term: **1 year and 116 days**4. Type of contract: **Contract**Contract description: **Traffic Mgmt - RTZ**

5. Purpose of contract:

This is the first amendment to the original contract which provides Artificial Intelligence (AI) for traffic safety and traffic flow, cloud-based platform for unified traffic management operations and proactive crash prevention. This amendment extends the termination date from August 31, 2020 to January 31, 2021 and increases the maximum amount from \$80,000 to \$113,000 due the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$80,000.00	\$80,000.00	\$80,000.00	Yes - Action
2. Amount of current amendment (#1):	\$33,000.00	\$33,000.00	\$33,000.00	Yes - Info
3. New maximum contract amount:	\$113,000.00			
and/or the termination date of the original contract has changed to:	01/31/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Highway Patrol (NHP) does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise and tools needed for this type of work.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190806

Approval Date: 01/31/2021

c. Why was this contractor chosen in preference to other?

WayCare is the only vendor that can provide data sharing between Nevada Department of Transportation (NDOT), Regional Transportation Commission (RTC), Freeway Service Patrol (FSP) and Nevada Highway Patrol.

The original sole source was approved until 08/26/2019 (approval #190806) and it has been extended until 01/31/2021 (approval# 336).

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Department of Transportation has a contract with WayCare and services has been verified as satisfactory. Furthermore, the vendor has been under contract with Highway Patrol and services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdefe1	07/29/2020 18:24:26 PM
Division Approval	lgallow1	08/07/2020 13:40:39 PM
Department Approval	cboegle	08/10/2020 14:24:44 PM

Contract Manager Approval
Budget Analyst Approval

cboegle
nkephart

08/10/2020 14:24:51 PM
08/13/2020 12:18:31 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775 684-0170 | Fax: 775 684-0188

Purchasing Use Only:	
Approval #:	3360

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>Department of Public Safety, Nevada Highway Patrol</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Roxana Gifford, Contract Manager</i>	<i>(775) 684-4467</i>	<i><u>rgifford@dps.state.nv.us</u></i>

2	Contractor Information:	
	Contractor:	<i>WayCare Technologies, Inc.</i>
	Contact Name:	<i>Noam Maital, CEO</i>
	Complete Address:	<i>1601 Vine St. Los Angeles, CA 90028</i>
	Phone Number:	<i>(617) 943-4343</i>

Email Address:	<i>noam@waycaretech.com</i>
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A	List <u>all previous</u> Contract Information:				
	Solicitation Type, if applicable:		<i>N/A</i>	#:	<i>N/A</i>
	CETS #:	<i>N/A</i>			
	Contract Amount:	<i>N/A</i>			
	Contract Term:	Start Date:	<i>N/A</i>	End Date:	<i>N/A</i>

Purchasing Use Only:

Approval #:

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4	Current Contract Information:				
	Solicitation Type, if applicable: <i>Sole Source</i>			#:	190806
	CETS #:	#22334			
	Initial Contract Amount:	\$80,000.00			
	Contract Term:	Start Date:	10/08/2019	End Date:	08/31/2020

5	Amendment Information – List <u>all previously</u> approved amendments:			
	Amd #:	Brief Synopsis of What Amendment Accomplished:	Change in Contract Amount	Change in End Date
	N/A			

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Change in Contract Amount	Change in End Date
	1	<p>The requested amendment will allow for a completion of our Road to Zero grant strategy program that began on October 31, 2019. The goal of this program is to reduce crashes in identified high crash areas, reduce traffic speeds prior to entering high crash areas to the posted limits, and be able to measure the reduction in abrupt driving behaviors such as heavy braking, last minute steering and quick acceleration.</p> <p>NHP is currently working with The Nevada Department of Transportation (NDOT) to assist with the cost of this program beginning in February 2021. If funds are approved, a new solicitation waiver will be submitted for approval.</p>	An increase of \$33,000	01/31/2021

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	N/A. We are asking to extend the contract 5 more months for a total of 1 year and 3 months.

8	What are the potential consequences to the State if the contract extension request is denied?
	Significant delays with and/or the complete inability to continue with the implementation of the Road to Zero Safe Systems Innovation grant program and the potential loss of federal funding for this project.

Purchasing Use Only:	
Approval #:	3360

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

T. Hartline 047

Signature of Agency Representative Initiating Request

T. HARTLINE

Print Name of Agency Representative Initiating Request

07/15/20

Date

Curtis Palmer

Signature of Agency Head Authorizing Request

CURTIS PALMER

Print Name of Agency Head Authorizing Request

7/17/2020

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty

Administrator, Purchasing Division or Designee

7/21/2020

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23413**Agency Name: **DPS-TRAFFIC SAFETY**Agency Code: **658**Appropriation Unit: **4691-19**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BE CRASH FREE, LLC**Contractor Name: **BE CRASH FREE, LLC**Address: **PO BOX 74**City/State/Zip: **STAR, ID 83669**Contact/Phone: **Steve Kirsch 208-908-3595**Vendor No.: **T32004813A**

NV Business ID:

To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Motorcycle Safety Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **658**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **331 days**4. Type of contract: **Contract**Contract description: **Motorcycl Safety VR**

5. Purpose of contract:

This is a new contract to create two 4-5 minute 360 Virtual Reality (360 VR) experiences, with narration, for motorcycle traffic safety applications.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,999.00**

Other basis for payment: Payment installments based on milestones listed in Section 4, Consideration & Section 3, Scope of Work, Section 1. R 1-3.

II. JUSTIFICATION

7. What conditions require that this work be done?

Improved motorcycle safety, in the State of Nevada, is imperative for motorcycle ryders. These videos will be used in public outreach events.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State of Nevada Employees do not have the equipment to create Virtual Reality videos.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

MG Studios
Be Crash Free
Epic Productions

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Be Crash Free was selected primarily based on their experience in developing Virtual Reality/360 degree filming motorcycle applications. Secondly they were the least expensive.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

LLC

NRS 80.015 clearly defines what a business entity is when considering if a business license is required. NRS80.015(j) states that isolated transactions that are physically performed in Nevada less than 30 days and are not part of a series of transactions is not a business entity. Additionally, the vendor does not meet the requirement of NRS76.100, paragraph (7b).

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

NRS 80.015 clearly defines what a business entity is when considering if a business license is required. NRS80.015(j) states that isolated transactions that are physically performed in Nevada less than 30 days and are not part of a series of transactions is not a business entity. Additionally, the vendor does not meet the requirement of NRS76.100, paragraph (7b).

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Peter Vander Aa, Program Administrator Ph: 775-684-7480

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Igallow1	07/15/2020 16:25:11 PM
Division Approval	Igallow1	07/15/2020 16:25:14 PM
Department Approval	cboegle	07/16/2020 12:28:25 PM

Contract Manager Approval
Budget Analyst Approval

cboegle
nkephart

07/16/2020 12:28:32 PM
08/03/2020 10:23:32 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23339**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4461-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Q-MATIC CORPORATION**Contractor Name: **Q-MATIC CORPORATION**Address: **2875 BRECKRIDGE BLVD #100**City/State/Zip: **DULUTH, GA 30096**Contact/Phone: **KIRK LYLE 470-865-1315**Vendor No.: **PUR0000841**NV Business ID: **NV20101164462**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % SPORTSMEN REVENUE
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **20-75**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/22/2020**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 343 days**4. Type of contract: **Contract**Contract description: **Virtual Queue system**

5. Purpose of contract:

This is a new contract to provide a cloud-hosted solution for virtual queue management in locations with public walk-ins. This helps deliver contact free and zero-touch for online appointments and other virtual queuing needs via electronic device responses to customers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$48,402.34****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Covid-19 pandemic and offices closed for three months there, plus the need for social distancing and not having customers waiting in lobbies, the Department needs a solution to allow customers to get into a virtual line or book an appointment prior to showing up at an office. This will reduce the customer frustration and needing to wait at an NDOW location for hours before its their turn. This will give them an idea of how many people are ahead of them and when they should likely show up to an office when it's their turn.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

With the hiring freezes and Covid-19, we are short staffed and are unable to use a position for a concierge taking appointments or greeting customers at the door for each office. NDOW has 3 small offices that only have manned by one License staff.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

QLESS
Q-MATIC CORPORATION
QMINDER

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Their experience with the Nevada Department of Motor Vehicles and overall features of platform.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

KIM MUNOZ, DIVISION ADMINISTRATOR Ph: 775-688-1565

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	06/23/2020 16:05:21 PM
Division Approval	kdailey	06/30/2020 17:26:01 PM
Department Approval	kdailey	06/30/2020 17:26:07 PM
Contract Manager Approval	zalbert	07/22/2020 13:54:42 PM
EITS Approval	tgalluzi	07/22/2020 14:41:55 PM
Budget Analyst Approval	mlynn	07/22/2020 16:53:39 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23446**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4605-06**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **MARRACCINI PLUMBING HEATING &**Contractor Name: **MARRACCINI PLUMBING HEATING &**Address: **COOLING INC**City/State/Zip: **617 S MAIN ST
YERINGTON, NV 89447-2414**Contact/Phone: **Darrell Marraccini 775/463-3454**Vendor No.: **T80908438**NV Business ID: **NV19851011699**To what State Fiscal Year(s) will the contract be charged? **2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % State Parks Maintenance

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/04/2020**Anticipated BOE meeting date **07/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2020**Contract term: **88 days**4. Type of contract: **Contract**Contract description: **Professional service**

5. Purpose of contract:

This is a new contract to provide for the replacement of the heating and air conditioning system at the Western Region Headquarters/Lahontan Dam-side building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$19,888.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Current heating and air conditioning system is not functioning properly.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Staff do not have the resources or expertise to provide this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**RHP Mechanical Systems
Sierra Air**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only vendor to respond.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Veterans Services

Department of Wildlife

Department of Transportation

Dates and services unknown

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brad Larkin, Regional Manager Ph: 7758673001

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jidema	07/23/2020 15:22:28 PM
Division Approval	jidema	07/23/2020 15:22:31 PM
Department Approval	jidema	07/23/2020 15:22:33 PM
Contract Manager Approval	jidema	07/23/2020 15:22:35 PM
Budget Analyst Approval	rjacob3	08/04/2020 14:38:24 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23437**

Agency Name: DETR - REHABILITATION DIVISION	Legal Entity Name: ADVANCED PRO REMEDIATION LLC
Agency Code: 901	Contractor Name: ADVANCED PRO REMEDIATION LLC
Appropriation Unit: 3265-04	Address: DBA ADVANCED PRO RESTORATION
Is budget authority available?: Yes	5961 MCLEOD DR
If "No" please explain: Not Applicable	City/State/Zip: LAS VEGAS, NV 89120-3404
	Contact/Phone: Dayna Fualaau 702-252-0880
	Vendor No.: T27038055
	NV Business ID: NV20031177584

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	21.30 %	Fees	0.00 %
X Federal Funds	78.70 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **3447-23-REHAB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/14/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **2 years and 139 days**4. Type of contract: **Contract**Contract description: **LV Office Sanitizing**

5. Purpose of contract:

This is a new contract to provide cleaning and sanitizing of Vocational Rehabilitation offices and wait areas to provide a clean and safe environment for clients and staff to meet and receive provided services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: Small Chair-Office (Clean & Sanitize): \$27.50/Each; Medium Chair (Clean & Sanitize): \$37.50/Each; Large Executive Chair (Clean & Sanitize): \$52.50/Each; Carpet (Clean & Sanitize): \$0.47/Sq. Ft.; Floor Hard Surface (Clean & Sanitize): \$0.80/Sq. Ft.; Clean/Wipe Countertops/Desktops w/ Shockwave: \$0.42/Sq. Ft.; Disinfectant "Fogger": \$0.42/Sq. Ft.; Deodorize (Masking Scent): \$0.29/Sq. Ft.; Remediation Technician (8am-5pm M-F): \$63.62/Hour; Remediation Technician (5:01pm-7:59am M-F, All Saturday): \$98.75/Hour; Remediation Technician - Sunday / Holidays: \$131.66/Hour. As Needed Fixed Costs: Personal protective equipment (Hazardous or Viral cleanup): \$15.81/Each; Eye Protection "plastic goggles" - Disposable: \$10.90/Each; Respirator Cartridge - HEPA only (per pair): \$18.08/Each. Invoices payable only upon authorized Purchases Order and approval of the invoices by authorized VR personnel. Total contract not to exceed \$20,000.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

With the COVID-19 breakout, VR must undertake and maintain clean and sanitized areas where the public wait or meet staff to receive services that VR provides.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills, training or equipment to undertake this service.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Eco Clean
Greenway Cleaning
Advanced Pro Remediation
Noblez Carpet Cleaning

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only vendor to provide sanitizing service.

d. Last bid date: 06/25/2020 Anticipated re-bid date: 09/01/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory service to Business Enterprise of Nevada since May 2018.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdesoci1	08/12/2020 22:55:58 PM
Division Approval	kdesoci1	08/12/2020 22:56:01 PM
Department Approval	kdesoci1	08/12/2020 22:56:05 PM
Contract Manager Approval	kdesoci1	08/12/2020 22:56:08 PM
Budget Analyst Approval	dbaughn	08/14/2020 10:45:42 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23377**Agency Name: **DETR - REHABILITATION DIVISION**Agency Code: **901**Appropriation Unit: **3265-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Joseph P. Zich dba**Contractor Name: **Joseph P. Zich dba**Address: **Floor Masters****2301 Pinebrook Dr**City/State/Zip: **Carson City, NV 89701-5834**Contact/Phone: **Joseph Zich 775-841-5917**Vendor No.: **T32009741**NV Business ID: **NV20141781517**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	21.30 %	Fees	0.00 %
X	Federal Funds	78.70 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **3439-23-REHAB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **2 years and 150 days**4. Type of contract: **Contract**Contract description: **Floor Master**

5. Purpose of contract:

This is a new contract to provide cleaning/sanitizing services for upholstery and carpet in northern Nevada Rehabilitation offices that are open to the public.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Other basis for payment: Cleaning: \$12.00/Small Chair or Office Chair; \$25.00/Medium Chair; \$50.00/Large Chair or Recliner Chair; \$75.00/Love seat; \$95.00/Couch; \$170.00/Sectional; \$0.18/sq. ft. for Carpet Cleaning; \$0.75/sq. ft. for Hard Surface Cleaning (Tile and Stone). Floor Repairs (Upon Estimate): \$75.00 minimum Invoices payable only upon approval by authorized personnel. Total Contract not to exceed \$15,000.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

With the COVID-19 breakout, Rehabilitation must undertake and maintain clean and sanitized areas where the public wait or meet staff to receive services that Rehabilitation provides.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills, training or equipment to undertake this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Bruno's
Reno Carpet Cleaning
Floor Master
KC and K Carpet Cleaning

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only qualified vendor to submit a proposal.

d. Last bid date: 04/03/2020 Anticipated re-bid date: 09/01/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdesoci1	07/20/2020 10:02:42 AM
Division Approval	kdesoci1	07/20/2020 10:02:44 AM
Department Approval	kdesoci1	07/20/2020 10:02:46 AM
Contract Manager Approval	kdesoci1	08/01/2020 12:32:25 PM
Budget Analyst Approval	dbaughn	08/03/2020 11:56:28 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23398**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4770-11**Is budget authority available? **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Brazen Technologies, Inc**Contractor Name: **Brazen Technologies, Inc**Address: **3033 Wilson Blvd, Suite 470**City/State/Zip **Arlington, VA 22201**Contact/Phone: **Ashley O'Connor 202-302-8870**Vendor No.: **T27043675**NV Business ID: **NV20201848886**To what State Fiscal Year(s) will the contract be charged? **2021-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **3444-21-ESD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/03/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2021**Contract term: **362 days**4. Type of contract: **Contract**Contract description: **Virtual Job Fair**

5. Purpose of contract:

This is a new contract to provide a cloud-based virtual recruiting platform to meet the changing needs of employers and job seekers when traditional hiring events cannot be held due to mandates for social distancing and reduced capacity gathering.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,221.00**

Payment for services will be made at the rate of \$49,221.00 per year

Other basis for payment: Annual invoicing upon signature

II. JUSTIFICATION

7. What conditions require that this work be done?

Because of the current COVID 19 situation, Workforce delivery must change very quickly. There are businesses with the State of Nevada that still want to have job fairs and hiring events to meet their workforce needs. With the current mandates for social distancing and reduced gather capacities gatherings, the traditional events cannot be sponsored.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State of Nevada does not have the capability to provide this type of virtual service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

VFairs
Easy Virtual Fair (EVF)
Brazen

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price for services provided.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mjohns43	07/15/2020 07:41:29 AM
Division Approval	kdesoci1	07/29/2020 16:53:49 PM
Department Approval	kdesoci1	07/29/2020 16:53:53 PM
Contract Manager Approval	aallen	07/29/2020 16:59:04 PM
EITS Approval	tgalluzi	07/30/2020 12:02:48 PM
Budget Analyst Approval	dbaughn	08/03/2020 13:15:06 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23375**

Agency Name: DETR - EMPLOYMENT SECURITY	Legal Entity Name: CENTER FOR SECURITY EDUCATION AND RESEARCH
Agency Code: 902	Contractor Name: CENTER FOR SECURITY EDUCATION AND RESEARCH
Appropriation Unit: 4771-74	Address: EDUCATION & RESEARCH
Is budget authority available?: Yes	444 N CAPITOL ST NW STE 142
If "No" please explain: Not Applicable	City/State/Zip: WASHINGTON, DC 20001
	Contact/Phone: Scott B. Sanders, Executive Director
	202-434-8022
	Vendor No.:
	NV Business ID: NV20201855922
To what State Fiscal Year(s) will the contract be charged?	2021

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % P&I

Agency Reference #: **3440-21-DETR**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/05/2020**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2020**Contract term: **56 days**4. Type of contract: **Contract**Contract description: **NASWA CESER UI IT Ad**

5. Purpose of contract:

This is a new contract to provide information technology advisory support services for the Unemployment Unit.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$28,944.50**

Other basis for payment: Project Manager 100 hours at \$166.26 (\$16,625.90), UI ITSC Director 20 hours at \$130.83 (\$2,626.60), Travel \$3,852.00, and Contract service hours of 45 at \$130.00 (\$5,850.00).

II. JUSTIFICATION

7. What conditions require that this work be done?

The UInV system does not function at the best ability it could and maintaining the systems is very costly.

This assessment of the UInV system will identify sustainable improvement options and opportunities that are practical and feasible for DETR to implement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

CESER is a NASWA affiliate and is an expert in the UI and workforce IT advisory9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200707

Approval Date: 07/14/2020

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kimberly Gaa, ESD Administrator Ph: 775-684-3909

Marilyn Delmont, IDP Administrator Ph: 702-486-3043

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdesoci1	07/30/2020 11:55:22 AM
Division Approval	kdesoci1	07/30/2020 11:55:25 AM
Department Approval	kdesoci1	07/30/2020 11:55:28 AM
Contract Manager Approval	kdesoci1	07/30/2020 12:08:20 PM
Budget Analyst Approval	dbaughn	08/05/2020 09:19:53 AM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	20070700

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency Name: <i>Department of Employment, Training and Rehabilitation</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Kitty DeSocio, CFO</i>	<i>775-684-3878</i>	<i>kbdesocio@detr.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>National Association of State Workforce Administrators (NASWA)- The Center for Security Education and Research, INC (CESER)</i>
	Contact Name:	<i>Scott B. Sanders</i>
	Complete Address:	<i>444 North Capital Street NW, Suite 300</i>
	Telephone Number:	<i>202-434-8022</i>
	Email Address:	<i>ssanders@naswa.org</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>X</i>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	<i>X</i>	No
	Amendment:	#		
	CETS:	# 23375		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>Upon Approval</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	

Other (Explain):	<i>Penalties and Interest (4771-Cat 74)</i>
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Purchasing Use Only:	
Approval #:	<i>#200707C</i>

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: <i>\$28,944.50</i>
----	--

2	Provide a description of work/services to be performed or commodity/good to be purchased: <i>NASWA CESER will provide Unemployment Insurance (UI) division with advisory support services in the area of IT assessment of the current UI IT system (UInv).</i>
---	--

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor: <i>NASWA is a unique organization which has membership from all the states in the country for workforce services and activities. This allows NASWA to have the access and ability to draw upon all the other states for expertise in the workforce (UI) arena.</i>
---	--

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source: <i>The service provided by NASWA to DETR is unique to workforce organizations and to acquire this service from a private party would be more costly due to the sear fact that the private party doesn't have the networking and access to the other states providing the same service DERT is providing to Nevadans.</i>
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5	Were alternative services or commodities evaluated? Check One.		Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	a. <i>If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>					
	b. <i>If not, why were alternatives not evaluated?</i> <i>This is a service that NASWA provides to it's membership and as state above there no other vendors who can provide this level of expertise.</i>					

Purchasing Use Only:

Approval #:

#2009040

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.			Yes:		No:	X
	a. If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:						
	Term Start and End Dates		Value	Short Description		Type of Procurement (RFP#, RFQ#, Waiver #)	
			\$				
			\$				
			\$				
			\$				

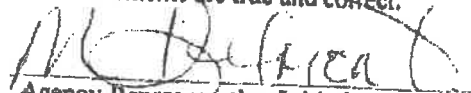
7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	DETR UI needs this assessment to improve the UI IT system and response to the Nevadans' in need at this very trying economic time.

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	As stated above this service is not provided by any other vendor that has the same level of access to the various UI IT systems in the country.

9	Will this purchase obligate the State to this vendor for future purchases? Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.			Yes:		No:	X
	a. If yes, please provide details regarding future obligations or needs.						

Purchasing Use Only:	
Approval #:	#2007-07(2)

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.


Agency Representative Initiating Request

Dr. Marilyn Delmont
Print Name of Agency Representative Initiating Request

July 7, 2020
Date


Signature of Agency Head Authorizing Request

7-8-20

Dennis Perea
Print Name of Agency Head Authorizing Request

July 7, 2020
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review


Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Approved by:


Administrator, Purchasing Division or Designee

7/14/2020
Date

Steve Sisolak
Governor



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**


209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Date: August 13, 2020

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Shauna Tilley, Executive Branch Budget Officer
Governor's Finance Office, Budget Division 

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

FISCAL YEAR 2020 – 4th QUARTER OVERTIME REPORT

Agenda Item Write-up:

Fiscal year 2020 April through June overtime report by department.

Additional Information:

As of the fourth quarter of fiscal year 2020, year to date overtime pay and accrued compensatory leave accounted for a total of approximately \$48.052 million, or 4.25% of total pay, a 3.9% increase from fiscal year 2019.

The 5 agencies with the highest dollar amount of overtime and accrued comp time for the quarter accounted for 20.7% of the total:

1. Department of Corrections – \$3.77 million
2. Department of Health & Human Services – \$1.97 million
3. Department of Public Safety – \$1.96 million
4. Department of Employment, Training and Rehab – \$1.44 million
5. Department of Transportation – \$0.82 million

The 5 agencies with the highest percentage of overtime and accrued comp time as a share of total pay for 4th quarter FY20 were:

- 1. Department of Employment, Training and Rehab – 11.6%
- 2. Department of Veterans Service – 11.4%
- 3. Department of Corrections – 8.3%
- 4. Department of Public Safety – 7.7%
- 5. Department of Conservation and Natural Resources – 3.1%

At the Department of Corrections, overtime and comp time decreased by \$416,000 (12.4%) from the prior quarter and continued to be driven by the large correctional centers and medical personnel. Overtime and comp time for 4th quarter FY20 were highest at these 7 locations, which accounted for 89.6% of the total overtime for the department:

- 1. Ely State Prison – \$767k
- 2. High Desert State Prison – \$706k
- 3. Southern Desert Correctional Center – \$698k
- 4. Lovelock Correctional Center– \$476k
- 5. Prison Medical Care – \$319k
- 6. Northern Nevada Correctional Center – \$249k
- 7. Florence McClure Women’s Correctional Center – \$164k

By event code, the highest four causes accounted for 81.4% of the overtime:

- 1. Related to COVID-19 – \$1.37 million
- 2. Covering annual and military leave – \$1.10 million
- 3. Hospital coverage – \$594k
- 4. Fire time – \$233k

At the Department of Health and Human Services, overtime was driven by Public & Behavioral Health (\$777k - primarily in Southern Nevada Adult Mental Health (\$188k) and Facility for the Mental Offender (\$273k) budget accounts), Child and Family Services (\$743k) and Aging & Disability Services (\$371k). By event code, the highest four causes accounted for 68.9% of the overtime:

- 1. Covering 24-hour shifts – \$461k
- 2. Related to COVID-19 – \$394k
- 3. Covering vacant shifts – \$310k
- 4. Workload – \$193k

REVIEWED: 

INFO ITEM: _____

Agency:

440 DEPARTMENT OF CORRECTIONS

Code	Reason	Accr Comp Hrs	Comp Dollars	Pd OT Hours	Pd OT Dollars	Total Hrs	Total Dollars
1	ACCIDENTS	0:00:00	\$0.00	18:00:00	\$ 923.73	18:00	\$ 923.73
2	ACCT/FISCAL	0:00:00	\$0.00	55:10:00	\$ 4,561.68	7:10	\$ 4,561.68
4	ADMIN SUPPRT	12:00:00	\$366.36	10:00:00	\$ 340.40	22:00	\$ 706.76
5	BACKLOG REDU	0:00:00	\$0.00	21:00:00	\$ 736.59	21:00	\$ 736.59
6	BUDGET PREP	82:44:00	\$3,054.09	171:55:00	\$ 10,071.44	14:39	\$ 13,125.53
10	COURT	0:00:00	\$0.00	7:00:00	\$ 481.10	7:00	\$ 481.10
11	COVER-AL/MIL	781:53:00	\$21,164.70	25152:39:00	\$ 1,082,583.42	25934:32:00	\$ 1,103,748.12
12	COVER-24 HR	0:00:00	\$0.00	8:00:00	\$ 259.44	8:00	\$ 259.44
13	COVER-HOL/WK	2182:00:00	\$60,095.10	6208:05:00	\$ 172,937.38	14:05	\$ 233,032.48
15	COVER-SICK	6:00:00	\$167.76	494:20:00	\$ 27,273.34	20:20	\$ 27,441.10
16	COVER-TRAIN	0:00:00	\$0.00	28:30:00	\$ 1,142.76	4:30	\$ 1,142.76
17	COVER-VACANT	51:00:00	\$1,748.77	1558:05:00	\$ 91,772.49	1:05	\$ 93,521.26
18	EMERGENCIES	0:00:00	\$0.00	44:50:00	\$ 2,295.23	20:50	\$ 2,295.23
19	INVESTIGATE	2:15:00	\$64.44	91:15:00	\$ 4,978.09	21:30	\$ 5,042.53
20	MEETINGS	0:00:00	\$0.00	7:05:00	\$ 312.37	7:05	\$ 312.37
22	PERSONNEL	0:00:00	\$0.00	24:55:00	\$ 1,140.46	0:55	\$ 1,140.46
23	PROGRAM DEAD	14:38:00	\$735.71	18:30:00	\$ 740.83	9:08	\$ 1,476.54
24	SITE REPAIR	29:15:00	\$849.57	351:40:00	\$ 15,765.99	20:55	\$ 16,615.56
26	STAFF MEET	3:00:00	\$67.80	9:00:00	\$ 294.14	12:00	\$ 361.94
27	TRAINING	21:00:00	\$494.34	18:00:00	\$ 1,101.60	15:00	\$ 1,595.94
29	TRAVEL	0:00:00	\$0.00	113:50:00	\$ 4,866.25	17:50	\$ 4,866.25
30	WORKLOAD	51:23:00	\$1,515.25	2143:01:00	\$ 98,720.42	10:24	\$ 100,235.67
31	WORKSHOPS	0:00:00	\$0.00	37:00:00	\$ 1,336.88	13:00	\$ 1,336.88
32/33	COVID-19	787:53:00	\$21,814.53	0:00:00	\$ 1,350,690.90	0:00	\$ 1,372,505.43
51	AGENCY DEFINE	0:00:00	\$0.00	4:00:00	\$ 219.87	4:00	\$ 219.87
52	AGENCY DEFINE	0:00:00	\$0.00	16:00:00	\$ 655.79	16:00	\$ 655.79
54	AGENCY DEFINE	0:00:00	\$0.00	1:00:00	\$ 40.44	1:00	\$ 40.44
55	AGENCY DEFINE	0:00:00	\$0.00	32:00:00	\$ 1,516.57	8:00	\$ 1,516.57
56	AGENCY DEFINE	28:53:00	\$928.64	450:35:00	\$ 19,891.71	23:28	\$ 20,820.35
58	AGENCY DEFINE	0:00:00	\$0.00	6:45:00	\$ 503.42	6:45	\$ 503.42
59	AGENCY DEFINE	48:45:00	\$1,358.38	461:50:00	\$ 21,016.80	6:35	\$ 22,375.18
63	AGENCY DEFINE	15:45:00	\$468.69	14734:05:00	\$ 593,663.61	14749:50:00	\$ 594,132.30
64	AGENCY DEFINE	69:36:00	\$2,075.47	1723:01:00	\$ 71,311.35	16:37	\$ 73,386.82
65	AGENCY DEFINE	0:00:00	\$0.00	22:00:00	\$ 804.60	22:00	\$ 804.60
66	AGENCY DEFINE	0:00:00	\$0.00	6:50:00	\$ 196.10	6:50	\$ 196.10
69	AGENCY DEFINE	0:00:00	\$0.00	1:00:00	\$ 50.10	1:00	\$ 50.10
73	AGENCY DEFINE	0:00:00	\$0.00	8:00:00	\$ 214.40	8:00	\$ 214.40
74	AGENCY DEFINE	0:00:00	\$0.00	1136:00:00	\$ 50,662.91	8:00	\$ 50,662.91
81	AGENCY DEFINE	0:00:00	\$0.00	385:00:00	\$ 17,488.76	1:00	\$ 17,488.76
86	AGENCY DEFINE	0:00:00	\$0.00	14:00:00	\$ 932.24	14:00	\$ 932.24
		0:00:00	\$0.00	12:00:00	\$ 343.68	12:00	\$ 343.68

4188:00:00	\$	116,969.60	85734:48	\$	3,654,839.28	89922:48	\$	3,771,808.88
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32 COVID-19	542:23:00	\$15,107.12	16383:38:00	\$	742,133.15	16926:01:00	\$	757,240.27
33 COVID-19	245:30:00	\$6,707.41	13745:14:00	\$	608,557.75	13990:44:00	\$	615,265.16

Highest 4 Causes of Overtime by Event Code											
1	32/33	COVID-19	787:53:00	\$	21,814.53	0:00:00	\$	1,350,690.90	0:00:00	\$	1,372,505.43
2	11	COVER-AL/MIL	781:53:00	\$	21,164.70	25152:39:00	\$	1,082,583.42	25934:32:00	\$	1,103,748.12
3	63	HOSPITAL COVRAG	15:45:00	\$	468.69	14734:05:00	\$	593,663.61	14749:50:00	\$	594,132.30
4	13	FIRE TIME	2182:00:00	\$	60,095.10	6208:05:00	\$	172,937.38	8390:05:00	\$	233,032.48
										\$	3,303,418.33
											87.6%

Overtime Analysis by Event Date
Overtime Analysis Settings
Agency: ALL DEPT OF HEALTH AND HUMAN SERV
FY2020 Q4

Row Labels	Sum of Dollars12
COVER-24 HR	\$ 460,934.93
COVID-19	\$ 394,369.69
COVER-VACANT	\$ 310,419.44
WORKLOAD	\$ 192,875.88
COVER-HOL/WK	\$ 137,510.80
AGNCY DEFINE	\$ 91,395.04
COVER-SICK	\$ 84,796.23
BUDGET PREP	\$ 70,058.96
CLIENT SVCS	\$ 47,095.19
PROGRAM DEAD	\$ 35,232.79
COVER-AL/MIL	\$ 33,013.12
EMERGENCIES	\$ 26,353.60
TRAINING	\$ 19,720.34
INVESTIGATE	\$ 17,727.51
ACCT/FISCAL	\$ 14,324.71
SITE REPAIR	\$ 4,992.85
TRAIN-PERSON	\$ 4,619.51
TRAVEL	\$ 4,441.48
COVER-INJURY	\$ 4,270.03
COVER-TRAIN	\$ 2,578.58
PERSONNEL	\$ 2,576.48
ADMIN SUPPRT	\$ 2,337.60
STAFF MEET	\$ 1,607.71
ADMIN	\$ 1,534.36
MEETINGS	\$ 1,400.51
SPECIAL EVNT	\$ 1,361.09
ACCIDENTS	\$ 1,333.17
OFFICE SPRT	\$ 949.47
COURT	\$ 512.97
BACKLOG REDU	\$ 502.48
CLIENT MEET	\$ 159.31
(blank)	
WORKSHOPS	\$ -
Grand Total	\$ 1,971,005.83

1 COVER-24 HR	460,934.93
2 COVID-19	394,369.69
3 COVER-VACANT	310,419.44
4 WORKLOAD	192,875.88
	1,358,599.94
	68.9%

Row Labels	Sum of Dollars5
406	\$ 777,011.02
HR-FAC FOR MENTAL OFFENDER	\$ 273,079.19
HR-SO NEV ADULT MENTAL HEALTH	\$ 188,337.43
HR-OFF OF STATE HEALTH ADMIN	\$ 68,432.83
HR-NNV ADULT MENTAL HEALTH SVC	\$ 66,816.44
HR-HEALTH CARE FACILITY REG	\$ 60,028.19
HR-HHS HD BIOSTATS & EPIDMILG	\$ 51,703.19
HR-MATERNAL CHILD HEALTH SRVC	\$ 22,626.74
HR-HEALTH ALERT NETWORK	\$ 14,978.53
HR-COMMUNITY HEALTH SERVICES	\$ 14,348.79
HR-CHRONIC DISEASE	\$ 4,466.57
HR-WIC FOOD SUPPLEMENT	\$ 3,860.08
HR-IMMUNIZATION PROGRAM	\$ 3,794.22
HR-BEHAVIORAL HEALTH PREV & TR	\$ 3,725.10
HR-HHS DPBH RURAL CLINICS	\$ 719.63
HR-RADIATION CONTROL PROGRAM	\$ 94.09
HR-ENVIRONMENTAL HEALTH SRVCS	\$ -
HR-HEALTH STATISTICS&PLANNING	\$ -
HR- MARIJUANA HEALTH REGISTRY	\$ -
HR-EARLY INTERVENTION SVCS	\$ -
HR-EMERGENCY MEDICAL SERVICES	\$ -
HR-BEHAVIORIAL HLTH INFO SYSTM	\$ -
HR-CHILD CARE SERVICES	\$ -
HR-OFFICE OF MINORITY HEALTH	\$ -
HR-CANCER CONTROL REGISTRY	\$ -
HR- MED MARIJUANA ESTABLISHMEN	\$ -
HR-BEHAVIORIAL HEALTH ADMINSTR	\$ -
(blank)	\$ -
HR-COMMUNICABLE DISEASES	\$ -
409	\$ 742,587.99
HR-SO NEV CHILD & ADLSCNT SVCS	\$ 158,631.80
HR-SUMMIT VIEW YOUTH CENTER	\$ 157,462.03
HR-NEVADA YOUTH TRAINING CTR	\$ 154,771.88
HR-CALIENTE YOUTH CENTER	\$ 124,181.97
HR-RURAL CHILD WELFARE	\$ 60,709.78
HR-CHILDREN/YOUTH/FAMILY ADMIN	\$ 44,621.47
HR-NO NEV CHILD & ADLSCNT SVCS	\$ 34,347.88
HR-YOUTH PAROLE SERVICES	\$ 5,461.46
HR-INFORMATION SERVICES	\$ 1,554.06
HR-COMMUNITY JUV JUSTICE PRG	\$ 845.66
(blank)	\$ -
HR-VICTIMS OF CRIME	\$ -
HR-CHILD CARE SERVICES	\$ -
402	\$ 371,112.55
HR-DESERT REGIONAL CENTER	\$ 301,789.27
HR-AGING FEDERAL PROG & ADMIN	\$ 49,348.05
HR-COMMUNITY BASED SERVICES	\$ 16,225.42
HR-SIERRA REGIONAL CENTER	\$ 2,043.78
HR-RURAL REGIONAL CENTER	\$ 850.30
HR-EARLY INTERVENTION SVCS	\$ 698.68
HR-AUTISM TREATMENT PROGRAM	\$ 157.05
HR-COMMUNICATION ACCESS SRVCS	\$ -
HR-HOME&COMMUNITY BASED PROG	\$ -
HR-TOBACCO SETTLEMENT PROGRAM	\$ -
HR-SENIOR RX AND DISABILITY RX	\$ -
HR-HR HOMEMAKER	\$ -
(blank)	\$ -
HR-SR CITIZEN PROP TAX ASSIST	\$ -
407	\$ 22,359.23
HR-WELFARE ADMINISTRATION	\$ 22,222.53
HR-WELFARE FIELD SERVICES	\$ 136.70
HR-ENERGY ASSISTANCE - WELFARE	\$ -
HR-CHILD CARE ASSIST & DEVEL	\$ -
(blank)	
HR-CHILD SPRT ENFORCEMNT PROG	\$ -
403	\$ 50,051.38
HR-HEALTH CARE FIN & POLICY	\$ 50,051.38
(blank)	
HR-NEVADA MEDICAID	\$ -
HR-NEVADA CHECK-UP PROGRAM	\$ -
400	\$ 7,883.66
HR-GRANTS MANAGEMENT UNIT	\$ 3,283.20
HR-IDEA PART C COMPLIANCE	\$ 2,928.54
HR-ADMINISTRATION	\$ 1,671.92
HR-PUBLIC DEFENDER	\$ -
HR-DEVELOPMENTAL DISABILITIES	\$ -
HR-INDIAN COMMISSION	\$ -
HR- HEALTHY NV FUND ADMIN	\$ -
HR-DISABILITY SERVICES	\$ -
(blank)	
HR-CONSUMER HEALTH ASSISTANCE	\$ -
Grand Total	\$ 1,971,005.83

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2020 SUMMARY (QTR 4)
NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, September 8, 2020



CUMULATIVE STATEWIDE TOTALS (QTR 4)

	2018	2019	2020
BASE PAY	\$989,606,654	\$1,036,806,154	\$1,083,535,112
OVERTIME PAY + ACCRUED COMP	\$46,271,721	\$46,245,118	\$48,052,182
TOTAL PAY	\$1,035,878,375	\$1,083,051,272	\$1,131,587,294
OT/COMP AS A SHARE OF TOTAL PAY	4.47%	4.27%	4.25%

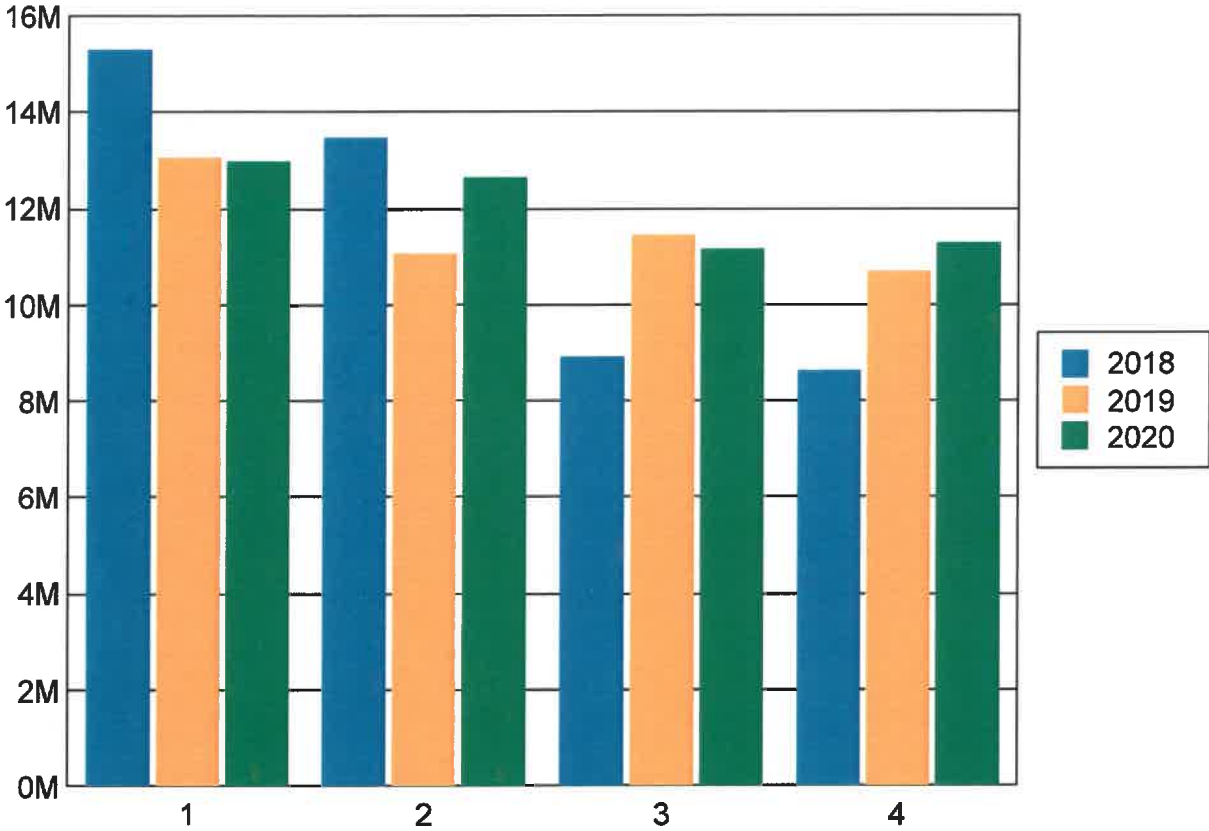
Highest OT/Comp expenditures in dollars

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$3,771,067	8.25%
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$1,969,718	2.24%
65	DEPARTMENT OF PUBLIC SAFETY	\$1,960,482	7.67%
90	DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$1,444,374	11.60%
80	DEPARTMENT OF TRANSPORTATION	\$823,006	3.11%

Highest percentages of OT/Comp as a share of Total Pay

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
90	DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$1,444,374	11.60%
24	DEPARTMENT OF VETERANS SERVICE	\$410,348	11.35%
44	DEPARTMENT OF CORRECTIONS	\$3,771,067	8.25%
65	DEPARTMENT OF PUBLIC SAFETY	\$1,960,482	7.67%
70	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$395,814	3.11%

Statewide OT/Comp Distribution by Quarter



	Q1 Base Pay	Q2 Base Pay	Q3 Base Pay	Q4 Base Pay
2018	\$231,107,555	\$261,148,019	\$232,575,644	\$264,775,436
2019	\$242,680,998	\$274,890,264	\$242,211,466	\$277,023,426
2020	\$252,721,968	\$285,122,232	\$252,205,103	\$293,485,810

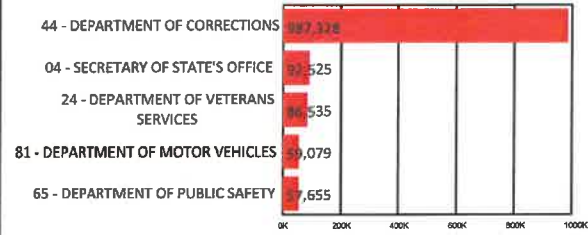
OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2020 QUARTERLY ANALYSIS vs FY2019
NEVADA DEPARTMENT OF ADMINISTRATION
Tuesday, September 8, 2020

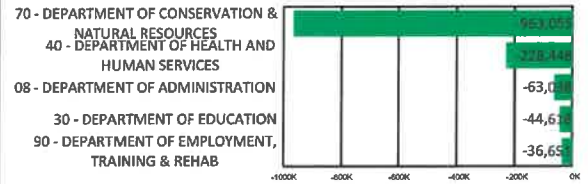


FY2020 - QTR1

Greatest increases in OT/Comp expenditures vs FY2019

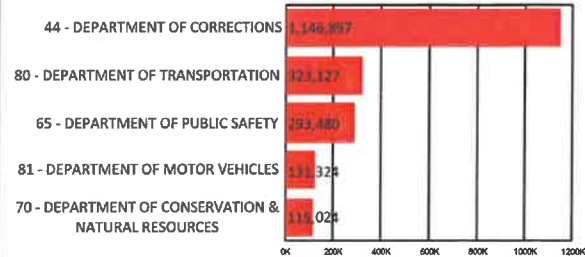


Greatest reductions in OT/Comp expenditure vs FY2019

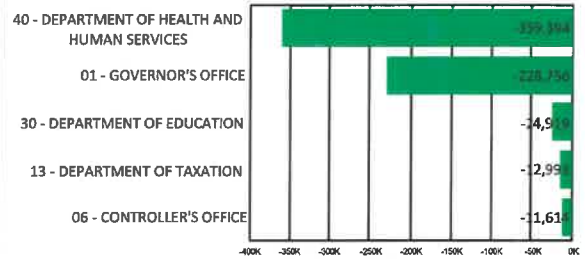


FY2020 - QTR2

Greatest increases in OT/Comp expenditures vs FY2019

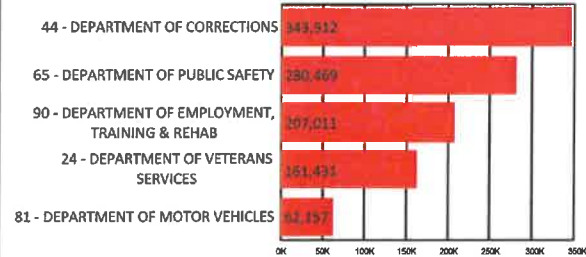


Greatest reductions in OT/Comp expenditure vs FY2019

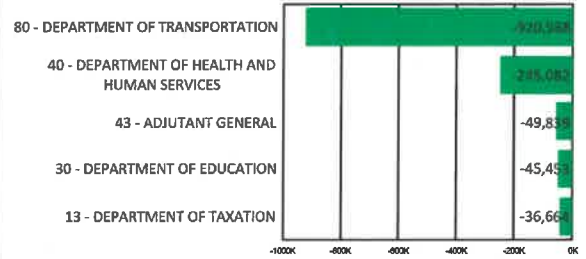


FY2020 - QTR3

Greatest increases in OT/Comp expenditures vs FY2019

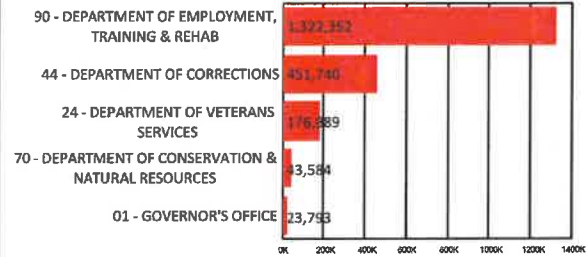


Greatest reductions in OT/Comp expenditure vs FY2019

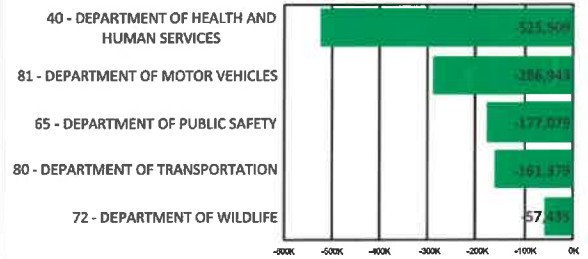


FY2020 - QTR4

Greatest increases in OT/Comp expenditures vs FY2019



Greatest reductions in OT/Comp expenditure vs FY2019

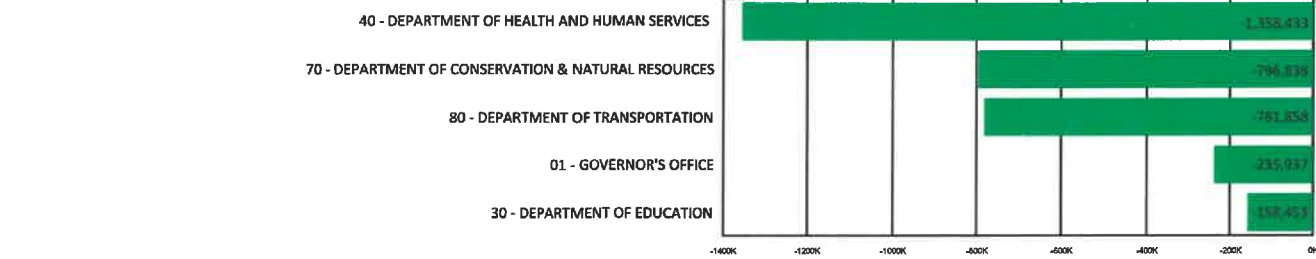


FY2020 - YEAR-TO-DATE TOTALS

Greatest increases in OT/Comp expenditures vs FY2019



Greatest reductions in OT/Comp expenditure vs FY2019



OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2020 QUARTERLY DETAILED ANALYSIS
NEVADA DEPARTMENT OF ADMINISTRATION



Tuesday, September 8, 2020

	FY2020QTR1				FY2020QTR2				FY2020QTR3				FY2020QTR4			
	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2019	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2019	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2019	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2019
01 - GOVERNOR'S OFFICE	\$14,038	\$1,735,789	0.81%	\$-21,827	\$13,648	\$2,192,848	0.62%	\$-228,756	\$13,246	\$1,885,153	0.70%	\$-9,148	\$28,922	\$2,305,563	1.25%	\$23,793
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$74,677	0.00%	\$0	\$0	\$87,916	0.00%	\$0	\$0	\$80,024	0.00%	\$0	\$0	\$97,029	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$35,380	\$6,471,841	0.55%	\$18,795	\$17,690	\$7,506,809	0.24%	\$-7,451	\$30,090	\$6,656,223	0.45%	\$4,223	\$31,256	\$8,109,052	0.39%	\$4,412
04 - SECRETARY OF STATE'S OFFICE	\$98,049	\$1,825,564	5.37%	\$92,525	\$97,719	\$2,125,795	4.60%	\$78,399	\$19,228	\$1,720,641	1.12%	\$-3,114	\$2,882	\$1,933,252	0.15%	\$-22,913
05 - TREASURER'S OFFICE	\$1,399	\$663,222	0.21%	\$1,037	\$1,400	\$742,741	0.19%	\$-1,030	\$4,046	\$671,451	0.60%	\$2,709	\$1,404	\$832,470	0.17%	\$-4,356
06 - CONTROLLER'S OFFICE	\$3,371	\$656,324	0.51%	\$-3,745	\$41,498	\$802,334	5.17%	\$-11,614	\$6,417	\$674,155	0.95%	\$-2,845	\$2,481	\$779,308	0.32%	\$557
08 - DEPARTMENT OF ADMINISTRATION	\$101,189	\$7,829,255	1.29%	\$-63,038	\$109,287	\$9,084,152	1.20%	\$7,893	\$132,134	\$7,887,184	1.68%	\$-15,822	\$102,052	\$9,347,372	1.09%	\$23,746
09 - JUDICIAL BRANCH	\$0	\$6,728,762	0.00%	\$-2,506	\$1,685	\$8,303,668	0.02%	\$-2,264	\$2,831	\$6,816,638	0.04%	\$1,643	\$0	\$8,277,075	0.00%	\$-4,824
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$9,512	\$1,561,253	0.61%	\$1,429	\$15,934	\$1,786,688	0.89%	\$2,357	\$5,961	\$1,513,209	0.39%	\$1,424	\$4,593	\$1,618,858	0.28%	\$-7,621
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$276,304	0.00%	\$0	\$0	\$334,192	0.00%	\$0	\$0	\$376,660	0.00%	\$0	\$0	\$497,087	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$677,229	0.00%	\$0	\$0	\$773,446	0.00%	\$0	\$0	\$684,506	0.00%	\$0	\$0	\$808,811	0.00%	\$-750
13 - DEPARTMENT OF TAXATION	\$43,151	\$4,618,528	0.93%	\$-4,969	\$25,311	\$5,289,167	0.48%	\$-12,993	\$41,224	\$4,606,224	0.89%	\$-36,664	\$30,356	\$5,571,639	0.54%	\$-38,622
15 - COMMISSION ON ETHICS	\$0	\$114,165	0.00%	\$0	\$0	\$134,826	0.00%	\$0	\$0	\$120,869	0.00%	\$0	\$0	\$141,849	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$0	0.00%	\$0	\$0	\$7,050	0.00%	\$0	\$0	\$33,624	0.00%	\$0	\$0	\$47,399	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$93,703	0.00%	\$0	\$0	\$122,035	0.00%	\$0	\$0	\$104,444	0.00%	\$0	\$0	\$130,424	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$53	\$245,641	0.02%	\$-164	\$332	\$256,289	0.13%	\$-330	\$128	\$212,874	0.06%	\$-16	\$617	\$260,896	0.24%	\$-109
24 - DEPARTMENT OF VETERANS SERVICES	\$262,337	\$2,876,904	9.12%	\$86,535	\$294,748	\$3,362,679	8.77%	\$64,627	\$372,864	\$3,043,463	12.25%	\$161,431	\$410,348	\$3,614,150	11.35%	\$176,889
30 - DEPARTMENT OF EDUCATION	\$34,073	\$2,633,215	1.29%	\$-44,618	\$19,156	\$3,067,020	0.62%	\$-24,919	\$11,267	\$2,636,852	0.43%	\$-45,453	\$10,039	\$3,252,500	0.31%	\$-43,462
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$6,745	\$308,606	2.19%	\$-5,431	\$12,129	\$368,572	3.29%	\$11,984	\$16,899	\$339,613	4.98%	\$11,670	\$2,902	\$424,773	0.68%	\$165
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$2,698,351	\$75,149,254	3.59%	\$-228,448	\$2,727,431	\$85,423,605	3.19%	\$-359,394	\$2,902,711	\$76,203,794	3.81%	\$-245,082	\$1,969,718	\$87,813,831	2.24%	\$-525,509
43 - ADJUTANT GENERAL	\$61,668	\$1,317,652	4.68%	\$-1,798	\$74,482	\$1,335,222	5.58%	\$11,181	\$45,606	\$1,216,672	3.75%	\$-49,839	\$29,505	\$1,515,045	1.95%	\$-55,741
44 - DEPARTMENT OF CORRECTIONS	\$3,830,672	\$38,908,524	9.85%	\$987,328	\$4,371,415	\$45,219,596	9.67%	\$1,146,897	\$3,356,249	\$38,406,026	8.74%	\$343,912	\$3,771,067	\$45,709,487	8.25%	\$451,740
50 - COMMISSION ON MINERAL RESOURCES	\$16,395	\$234,140	7.00%	\$-63	\$357	\$215,636	0.17%	\$314	\$5,624	\$194,884	2.89%	\$937	\$3,454	\$214,718	1.61%	\$-18,143
55 - DEPARTMENT OF AGRICULTURE	\$27,711	\$1,969,780	1.41%	\$-10,072	\$13,104	\$2,133,128	0.61%	\$-3,391	\$19,651	\$1,841,895	1.07%	\$4,375	\$22,170	\$2,291,368	0.97%	\$2,524
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,904,515	0.00%	\$0	\$0	\$2,270,664	0.00%	\$0	\$0	\$1,933,014	0.00%	\$0	\$0	\$2,277,821	0.00%	\$0
61 - GAMING CONTROL BOARD	\$181,874	\$6,306,478	2.88%	\$25,461	\$183,032	\$7,189,081	2.55%	\$38,415	\$157,342	\$6,205,936	2.54%	\$-23,106	\$125,465	\$7,361,542	1.70%	\$-3,164
65 - DEPARTMENT OF PUBLIC SAFETY	\$2,391,179	\$22,267,131	10.74%	\$57,655	\$2,175,594	\$25,272,674	8.61%	\$293,480	\$2,020,674	\$21,794,909	9.27%	\$280,469	\$1,960,482	\$25,565,063	7.67%	\$-177,079
69 - COLORADO RIVER COMMISSION	\$1,845	\$710,076	0.26%	\$1,400	\$3,356	\$840,019	0.40%	\$1,275	\$0	\$708,395	0.00%	\$-10,318	\$3,050	\$854,915	0.36%	\$-4,738
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,287,411	\$12,121,779	10.62%	\$-963,055	\$428,221	\$11,807,803	3.63%	\$115,024	\$73,226	\$9,961,738	0.74%	\$7,610	\$395,814	\$12,728,076	3.11%	\$43,584
72 - DEPARTMENT OF WILDLIFE	\$106,835	\$3,860,012	2.77%	\$33,879	\$67,016	\$4,244,466	1.58%	\$-519	\$83,427	\$3,683,582	2.26%	\$7,939	\$57,877	\$4,304,041	1.34%	\$-57,435
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$34,705	\$8,654,291	0.40%	\$-33,866	\$40,676	\$10,097,314	0.40%	\$-746	\$32,429	\$8,749,903	0.37%	\$-3,629	\$5,428	\$10,463,304	0.05%	\$-53,691
80 - DEPARTMENT OF TRANSPORTATION	\$1,316,619	\$27,510,065	4.79%	\$-22,618	\$1,534,191	\$27,690,455	5.54%	\$323,127	\$1,200,524	\$27,133,936	4.42%	\$-920,988	\$823,006	\$26,480,299	3.11%	\$-161,379
81 - DEPARTMENT OF MOTOR VEHICLES	\$254,301	\$13,543,739	1.88%	\$59,079	\$291,346	\$15,795,268	1.84%	\$131,324	\$260,131	\$13,458,085	1.93%	\$62,157	\$19,824	\$15,823,446	0.13%	\$-286,943
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$154,357	\$11,206,461	1.38%	\$-36,651	\$85,977	\$11,041,523	0.78%	\$-2,293	\$356,224	\$11,110,775	3.21%	\$207,011	\$1,444,374	\$12,449,506	11.60%	\$1,322,352
95 - PUBLIC EMPLOYEES BENEFITS PROGRAM	\$0	\$415,866	0.00%	\$0	\$0	\$497,287	0.00%	\$0	\$329	\$398,216	0.08%	\$-413	\$0	\$470,685	0.00%	\$-2,801
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$224,444	0.00%	\$0	\$0	\$347,000	0.00%	\$0	\$982	\$310,998	0.32%	\$982	\$1,675	\$373,922	0.45%	\$1,675
Total	\$12,973,220	\$265,695,187	4.88%	\$-77,748	\$12,646,735	\$297,768,967	4.25%	\$1,570,596	\$11,171,464	\$263,376,566	4.24%	\$-267,944	\$11,260,764	\$304,746,574	3.70%	\$582,160

OVERTIME/ACCRUED COMP USE BY DEPARTMENT
FISCAL YEAR 2020 COMPARATIVE YEAR-TO_DATE ANALYSIS (QTR1-QTR4) VS FY2018-FY2019
NEVADA DEPARTMENT OF ADMINISTRATION



Tuesday, September 8, 2020

	FY 2018 QTR1-QTR4				FY 2019 QTR1-QTR4				FY 2020 QTR1-QTR4			
	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year
01 - GOVERNOR'S OFFICE	\$3,924	\$6,354,293	0.06%	\$-223,606	\$305,792	\$6,913,877	4.42%	\$301,868	\$69,854	\$8,119,353	0.86%	\$-235,937
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$319,134	0.00%	\$0	\$0	\$328,082	0.00%	\$0	\$0	\$339,647	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$134,291	\$26,360,273	0.51%	\$56,090	\$94,437	\$26,922,993	0.35%	\$-39,854	\$114,416	\$28,743,925	0.40%	\$19,979
04 - SECRETARY OF STATE'S OFFICE	\$19,323	\$7,069,438	0.27%	\$-14,904	\$72,981	\$7,361,833	0.99%	\$53,657	\$217,878	\$7,605,253	2.86%	\$144,898
05 - TREASURER'S OFFICE	\$6,187	\$2,537,335	0.24%	\$-1,548	\$9,888	\$2,675,210	0.37%	\$3,702	\$8,249	\$2,909,884	0.28%	\$-1,640
06 - CONTROLLER'S OFFICE	\$52,830	\$2,747,003	1.92%	\$-10,174	\$71,414	\$2,898,860	2.46%	\$18,585	\$53,767	\$2,912,121	1.85%	\$-17,647
08 - DEPARTMENT OF ADMINISTRATION	\$595,027	\$31,946,017	1.86%	\$110,724	\$491,883	\$33,687,463	1.46%	\$-103,144	\$444,662	\$34,147,964	1.30%	\$-47,222
09 - JUDICIAL BRANCH	\$27,165	\$29,021,206	0.09%	\$8,462	\$12,467	\$29,642,092	0.04%	\$-14,698	\$4,516	\$30,126,142	0.01%	\$-7,951
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$37,202	\$6,512,338	0.57%	\$3,736	\$38,410	\$6,617,744	0.58%	\$1,208	\$35,999	\$6,480,008	0.56%	\$-2,411
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0	\$0	\$1,484,244	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$3,062,267	0.00%	\$0	\$750	\$2,909,191	0.03%	\$750	\$0	\$2,943,991	0.00%	\$-750
13 - DEPARTMENT OF TAXATION	\$199,611	\$19,646,221	1.02%	\$24,903	\$233,291	\$21,303,161	1.10%	\$33,680	\$140,043	\$20,085,557	0.70%	\$-93,248
15 - COMMISSION ON ETHICS	\$0	\$467,118	0.00%	\$0	\$0	\$482,771	0.00%	\$0	\$0	\$511,709	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0	\$0	\$88,073	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$418,556	0.00%	\$0	\$0	\$427,439	0.00%	\$0	\$0	\$450,605	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$2,188	\$923,494	0.24%	\$371	\$1,749	\$984,916	0.18%	\$-439	\$1,129	\$975,700	0.12%	\$-619
24 - DEPARTMENT OF VETERANS SERVICES	\$863,879	\$11,517,994	7.50%	\$-228,133	\$850,815	\$12,126,702	7.02%	\$-13,064	\$1,340,297	\$12,897,196	10.39%	\$489,482
30 - DEPARTMENT OF EDUCATION	\$210,782	\$10,175,955	2.07%	\$30,719	\$232,987	\$11,191,755	2.08%	\$22,205	\$74,534	\$11,589,587	0.64%	\$-158,453
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$6,162	\$889,652	0.69%	\$-1,137	\$20,287	\$1,200,321	1.69%	\$14,125	\$38,676	\$1,441,565	2.68%	\$18,389
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$11,026,335	\$290,685,399	3.79%	\$438,341	\$11,656,644	\$309,197,484	3.77%	\$630,309	\$10,298,211	\$324,590,483	3.17%	\$-1,358,433
43 - ADJUTANT GENERAL	\$219,665	\$4,844,299	4.53%	\$12,408	\$307,458	\$5,201,610	5.91%	\$87,794	\$211,261	\$5,384,591	3.92%	\$-96,197
44 - DEPARTMENT OF CORRECTIONS	\$14,397,884	\$155,895,704	9.24%	\$-1,104,137	\$12,399,525	\$157,481,040	7.87%	\$-1,998,359	\$15,329,402	\$168,243,634	9.11%	\$2,929,877
50 - COMMISSION ON MINERAL RESOURCES	\$42,376	\$854,865	4.96%	\$7,299	\$42,785	\$854,433	5.01%	\$409	\$25,830	\$859,377	3.01%	\$-16,955
55 - DEPARTMENT OF AGRICULTURE	\$79,804	\$7,225,684	1.10%	\$-19,134	\$89,200	\$7,560,656	1.18%	\$9,396	\$82,636	\$8,236,172	1.00%	\$-6,564
58 - PUBLIC UTILITIES COMMISSION	\$0	\$7,488,146	0.00%	\$0	\$0	\$8,025,301	0.00%	\$0	\$0	\$8,386,015	0.00%	\$0
61 - GAMING CONTROL BOARD	\$627,146	\$25,150,050	2.49%	\$81,137	\$610,108	\$26,220,175	2.33%	\$-17,038	\$647,714	\$27,063,036	2.39%	\$37,606
65 - DEPARTMENT OF PUBLIC SAFETY	\$7,657,535	\$87,676,377	8.73%	\$309,448	\$8,093,404	\$91,804,853	8.82%	\$435,869	\$8,547,929	\$94,899,777	9.01%	\$454,524
69 - COLORADO RIVER COMMISSION	\$7,022	\$2,863,674	0.25%	\$-1,106	\$20,631	\$2,981,286	0.69%	\$13,608	\$8,250	\$3,113,405	0.26%	\$-12,380
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$3,062,006	\$42,913,215	7.14%	\$-128,136	\$2,981,509	\$45,402,033	6.57%	\$-80,497	\$2,184,672	\$46,619,396	4.69%	\$-796,838
72 - DEPARTMENT OF WILDLIFE	\$339,207	\$14,788,352	2.29%	\$108,497	\$331,292	\$15,589,738	2.13%	\$-7,915	\$315,155	\$16,092,100	1.96%	\$-16,137
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$261,421	\$35,781,118	0.73%	\$-19,846	\$205,171	\$37,309,333	0.55%	\$-56,250	\$113,239	\$37,964,812	0.30%	\$-91,932
80 - DEPARTMENT OF TRANSPORTATION	\$5,202,895	\$100,808,532	5.16%	\$-415,801	\$5,656,198	\$105,235,031	5.37%	\$453,302	\$4,874,340	\$108,814,755	4.48%	\$-781,858
81 - DEPARTMENT OF MOTOR VEHICLES	\$662,316	\$53,631,609	1.23%	\$209,730	\$859,986	\$55,975,499	1.54%	\$197,670	\$825,603	\$58,620,538	1.41%	\$-34,384
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$525,209	\$42,699,100	1.23%	\$199,060	\$550,513	\$43,718,941	1.26%	\$25,304	\$2,040,932	\$45,808,264	4.46%	\$1,490,419
95 - EMPLOYEES' BENEFITS DIVISION	\$2,328	\$1,698,117	0.14%	\$2,328	\$3,543	\$1,876,161	0.19%	\$1,215	\$0	\$0	0.00%	\$0
95 - PUBLIC EMPLOYEES BENEFITS PROGRAM	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0	\$329	\$1,782,054	0.02%	\$-3,214
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$905,840	0.00%	\$-4,226	\$0	\$943,287	0.00%	\$0	\$2,658	\$1,256,364	0.21%	\$2,658
Total	\$46,271,721	1,035,878,374.53	4.47%	\$-568,636	\$46,245,118	1,083,051,272.19	4.27%	\$-26,603	\$48,052,182	1,131,587,293.61	4.25%	\$1,807,064

Steve Sisolak
Governor



Susan Brown
Director


Tiffany Greenameyer
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
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Date: August 27, 2020

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Tiffany Greenameyer, Deputy Director 
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners' meeting.

GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION

Agenda Item Write-up:

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of August 27, 2020.

Additional Information:

The TORT Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency supplement funding for eligible agencies within statutory authority.

Below is the available balance for each account prior to any projected outstanding claims. **The below numbers were updated on September 2, 2020.**

TORT Claim Fund	\$ 5,382,032.83
Statutory Contingency Account	\$ 2,165,837.60
State Claims Account	\$ 646,088.73
Emergency Account	\$ 115,552.00
Disaster Relief Account	\$ 6,904,023.21
IFC Unrestricted Contingency Fund General Fund	\$ 17,859,684.44
IFC Unrestricted Contingency Highway Fund	\$ 1,638,068.35
IFC Restricted Contingency Fund General Fund	\$ 14,772,194.00
IFC Restricted Contingency Highway Fund	\$ 2,346,784.00

Statutory Authority:

NRS 331.187, 353.097, 353.263, 353.264, 353.266, 353.268, 353.2735 and
AB417, AB499, AB504, AB518, SB187 and SB553 of the 2017 Legislative Session

REVIEWED:

ACTION ITEM:

BA 1348 TORT Claim Fund
NRS 331.187
FY 2020 (as of August 27, 2020)

Beginning Cash	5,612,424.00	
Insurance Premiums - A	108,086.86	
Insurance Premiums	3,688,142.10	
AG Loan Repayment	5,000.00	
	-	
	9,413,652.96	
Total Revenue		\$ 9,413,652.96

Paid Claims:

Attorney General's Office (Operating)	(211,124.59)	
Tort Claims	(3,820,495.54)	
Total Payments	(4,031,620.13)	
Account Balance		\$ 5,382,032.83

Claims Submitted for Payment:

Submitted for Payment	\$ -
Account Balance	\$ 5,382,032.83

Projected Outstanding Claims:

Attorney General's Office (projection)	-
Total Pending Claims	\$ -
Account Balance	\$ 5,382,032.83

BA 4892 Statutory Contingency Account
NRS 353.264
FY 2020 (as of August 27, 2020)

Beginning Cash	4,763,795.00
Partial Balance Forward to FY 2021	(2,275,000.00)
	-
Total Revenue	\$ 2,488,795.00

Paid Claims:

Post Conviction Stale Claims	(29,170.56)
DCFS Interstate Compact - 1st Qtr Reimbursement	(2,199.12)
DCFS Interstate Compact - 2nd Qtr Reimbursement	(2,237.86)
DCFS Interstate Compact - 3rd Qtr Reimbursement	(1,943.82)
DCFS Interstate Compact - 4th Qtr Reimbursement	(1,646.40)
Attorney General's Office (Professional Service)	(285,759.64)
Little Valley Fire Settlement	-
	-
Total Payments	(322,957.40)
Account Balance	\$ 2,165,837.60

Claims Submitted for Payment:

	0.00
	-
Submitted for Payment	\$ -
Account Balance	\$ 2,165,837.60

Projected Outstanding Claims:

Total Pending Claims	\$ -
Account Balance	\$ 2,165,837.60

BA 4888 State Claims Account
NRS 353.097
FY 2020 (as of August 27, 2020)

Beginning Cash	2,298,629.00	
Transfer from Interim Finance	-	
Appropriations	-	
Total Revenue		\$ 2,298,629.00

Paid Claims:

Post Conviction	(265,774.04)	
Library	(4,755.70)	
UNR	(39,182.53)	
Conservation	(14,528.83)	
Parks	(9,696.86)	
Forestry	(7,475.18)	
Parole & Probation	(7,775.68)	
Youth Parole	(518.65)	
Education	(361,045.26)	
Youth Service Division	(125,717.67)	
DHHS Health Division	(877.50)	
DHHS Child and Family Services	(126,780.35)	
DHHS Northern NV Mental Health	(27,920.92)	
DHHS Southern NV Mental Health	(29,111.05)	
DHHS Southern NV Adult Mental Health	(78,773.22)	
DHHS Mental Health & Development Services	(8,460.00)	
DHHS Mental Health Instance	(30,686.35)	
DHHS Aging Services	(134,712.74)	
DHHS LV Children's Behavioral Service	(1,808.17)	
Rural Clinics	(14,092.69)	
Department of Corrections	(244,916.51)	
DETR	(1,353.77)	
NDOT	(897.55)	
Controller's Office	(49,138.97)	
Taxation	(333.59)	
Military	(9,453.37)	
Department of Public Safety	(12,800.39)	
DPS Investigation s Division	(35,631.23)	
Real Estate Division	(600.00)	
Attorney General	(601.50)	
Secretary of State	(6,620.00)	
Board of Examiners	(500.00)	
Total Payments	(1,652,540.27)	
Account Balance		\$ 646,088.73

Claims Pending BOE Approval

	0.00	
	0.00	
Submitted for Payment	0.00	
Account Balance		\$ 646,088.73

Projected Outstanding Claims :

	0.00	
	0.00	
	0.00	
	0.00	
	0.00	
	0.00	
Total Pending Claims	0.00	
Estimated Account Balance - Including all Claims		\$ 646,088.73

**BA 4889 Emergency Fund
NRS 353.263
FY 2020 (as of August 27, 2020)**

Beginning Cash 279,841.00

Total Revenue **\$ 279,841.00**

Paid Claims:

DHHS- Public and Behavioral Health Gardner Engineering (164,289.00)

Payments \$ (164,289.00)
Account Balance **\$ 115,552.00**

Claims Submitted for Payment:

-
Total Submitted Payments \$ -
Account Balance **\$ 115,552.00**

Projected Outstanding Claims

-
Total Pending Claims \$ -
Estimated Account Balance - Including all Claims **\$ 115,552.00**

**BA 1335 Disaster Relief Account
NRS 353.2735
FY 2020 (as of August 27, 2020)**

Beginning Cash	11,666,800.00
Treasurer's Interest	215,967.01
1st - 2nd Qtr Transfers Per NRS 353.288(4)	1,500,000.00

Total Revenue	\$ 13,382,767.01
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<u>Paid Claims:</u>	
Transferred to Emergency Management	(6,250,000.00)
Annual Transfer per NRS 414.135	(228,743.80)
	-
Payments	(6,478,743.80)
Account Balance	\$ 6,904,023.21

Projected Outstanding Claims :

	-
Total Pending Claims	\$ -
Estimated Account Balance - Including all Claims	

IFC Contingency Fund Unrestricted
NRS 353.266
FY 2020 (as of August 27, 2020)

Unrestricted General Fund

FY 2020 Beginning Cash Balance	24,997,345.89	
Reversion to IFC	3,106,063.00	
Total Revenue		<u>28,103,408.89</u>

Paid Claims:

Meeting Cost	(67,892.45)	
Patient Protection Commission	(296,072.00) *	Approved @ August IFC 2019
B&I Labor Commissioner Task Force	(85,841.00) *	Approved @ August IFC 2019 request \$14
Emergency Management	(343,908.00)	Approved @ December IFC 2019
DPS Dignitary Protection	(15,500.00)	Approved @ December IFC 2019
Department of Education SB 475	(175,000.00)	Approved @ December IFC 2019
Department of Education SPED Contingency Acct	(342,179.00)	Approved @ December IFC 2019
NDOC Department Wide shortfall	(5,386,203.00)	Approved @ April IFC 2020
NDOC Medical Shortfall	(2,952,949.00)	Approved @ April IFC 2020 and June IFC ;
Indigent Defense	(525,036.00)	Approved @ April IFC 2020
Judicial Discipline	(49,593.00)	Approved @ April IFC 2020
Attorney General	(3,551.00)	Approved @ August IFC 2020
Total Payments	(10,243,724.45)	
Account Balance		<u>17,859,684.44</u>

Pending Reimbursement:

	0.00	
	0.00	
	0.00	
Total Pending	0.00	
Account Balance-GF		<u>17,859,684.44</u>

Unrestricted Highway Fund

Beginning Cash	1,620,336.35	
Reversion to IFC	17,732.00	
Total Revenue		<u>1,638,068.35</u>

Paid Claims:

Total Payments	0.00	
Account Balance-HWY		<u>1,638,068.35</u>

IFC Contingency Fund Restricted
NRS 353.266
FY 2020 (as of August 27, 2020)

Restricted General Fund

Beginning Balance July 1, 2019	43,373,452.00	
2019 Appropriations Effective July 1, 2019	19,575,807.00	
Total Revenue		62,949,259.00
<u>Paid Claims:</u>		
NDE -New Education Funding Model	(271,878.00)	Approved @ August IFC 2019
Taxation	(295,052.00)	Approved @ August IFC 2019
NDE SB467 Implementation for new desk top	(305,000.00)	Approved @ October IFC 2019
NDE SB543 Contracts for New Education Funding Model	(900,000.00)	Approved @ October IFC 2019
SB533 NV Museum of Arts	(5,000,000.00)	Approved @ October IFC 2019
SB501 NV Atomic Testing Museum	(250,000.00)	Approved @ October IFC 2019
SB501 NV Atomic Testing Museum	(55,000.00)	Approved @ December IFC 2019
SB501 NV Atomic Testing Museum	(26,489.00)	Approved @ May IFC 2020
SB501 NV Atomic Testing Museum	(354,423.00)	Approved @ June IFC 2020
SB 501 UNLV Harrah College of Hotel Administration	(500,000.00)	Approved @ December IFC 2019
SB 528 DOA Office of Grant Procurement	(1,000,000.00)	Approved @ December IFC 2019
Forestry AB543	(3,539,194.00)	Approved @ May IFC 2020
Forestry Match funds SB508	(209,880.00)	Approved @ May IFC 2020
Forestry AB543	(1,238,890.00)	Approved @ June IFC 2020
Forestry AB543	(4,790,120.00)	Approved @ June IFC 2020
Forestry AB543	(3,212,840.00)	Approved @ August IFC 2020
Payments	(21,948,766.00)	
Account Balance		41,000,493.00
<u>Pending:</u>		
31st Special Session-AB3 Transfer Restricted funds to the General Fund (July 2020).	(26,228,299.00)	
Total Pending	(26,228,299.00)	
Account Balance		14,772,194.00

Restricted Highway Fund

Beginning Balance July 1, 2019	2,220,935.00	
2019 Appropriations Effective July 1, 2019	125,849.00	
Total Revenue	2,346,784.00	2,346,784.00
<u>Paid Claims:</u>		
Payments	0.00	
Account Balance		2,346,784.00
Total Restricted Balance:		17,118,978.00