

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: April 14, 2020, 10:00 AM

Location:

Pursuant to the Governor's Emergency Directive 006, 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

For Public Comments

775-687-0999
Collaboration code: 40270

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 March 10, 2020 Minutes** (For possible action)

4. **State Vehicle Purchases** (For possible action)

Pursuant to NRS 334.010, no automobile may be purchased by any department, office, bureau, officer or employee of the state without prior written consent of the State Board of Examiners.

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Colorado River Commission	1	\$25,048
Department of Conservation and Natural Resources – Forestry Division	12	\$2,403,001
Total	13	\$2,428,049

5. **Authorization to Contract with a Current and/or Former State Employees** (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 Tammy Trio to perform fiscal management duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

6. **Request for an Extension on Current Critical Labor Designated Positions in State Government as Continuing Critical Labor Shortages** (For possible action)

Department of Public Safety – Capitol Police

Pursuant NRS 286.523, the Department requests an 18-month extension of the Board of Examiners' "critical labor" designation and a Public Employees Retirement System exception for four DPS Officer I positions and one DPS Officer II position.

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

A. Department of Corrections

Pursuant to NRS 353.268, Nevada Department requests the Board's recommendation to the Interim Finance Committee for \$4,870,606 from Contingency Account, to cover the cost of the projected shortfalls in Inmate Driven and Utilities expenditure categories for the remainder of the fiscal year.

Pursuant to NRS 353.268, the Department requests an allocation of \$2,149,866 in Fiscal Year (FY) 2020 from the Interim Finance Committee Contingency account to fund projected shortfalls in Medical Inmate Driven expenditures.

B. Department of Indigent Defense Services

Pursuant to NRS 353.268, the Department requests the Board's recommendation to the Interim Finance Committee for \$525,036 from the Contingency Account, for use over the biennium (Fiscal Year 2020 and Fiscal Year 2021), as an effort to reach a mutually agreeable resolution in the lawsuit with the American Civil Liberties Union.

C. Judicial Discipline Commission

Pursuant to NRS 353.268, the Commission requests the Board's recommendation to the Interim Finance Committee for \$49,593 from the Contingency Account, to cover the cost of judicial discipline investigations.

8. Request for Authorization to Amend a Current Contract for a Price Increase (For possible action)

Department of Motor Vehicles

Pursuant to the contract #21527 section 17.1.5 for services of independent contractor between the State of Nevada and contracted vendor Idemia Identity & Security USA LLC, any increase in the price per card requires approval of the Board of Examiners (BOE). The department is requesting a price per card increase from \$2.16 per card to \$3.0704 or \$3.1039.

9. Approval of Proposed State Administration Manual Changes (For possible action)

Pursuant to NRS 353.040 the Governor's Finance Office – Budget Division requests modifications to the policies and procedures of the State Board of Examiners adopted and collected in the following section of the State Administrative Manual.

1. SAM Section 100 – Agency Attendance and Notification

10. Approval of Proposed Leases (For possible action)

11. Approval of Proposed Contracts (For possible action)

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

13. 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 February 15, 2020 through March 23, 2020.

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.

15. 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

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MEETING MINUTES

Date and Time: March 10, 2020, 10:00 AM

Location: Old Assembly Chambers of the Capitol Building
101 North Carson Street
Carson City, Nevada 89701

Video Conference Location: Grant Sawyer Building
555 East Washington Avenue, Suite 5100
Las Vegas, Nevada 89101

MEMBERS PRESENT:

Governor Steve Sisolak
Secretary of State Barbara Cegavske

MEMBER ABSENT:

Attorney General Ford

STAFF PRESENT:

Susan Brown, Clerk of the Board
Dale Ann Luzzi, Board Secretary

OTHERS PRESENT:

John Borrowman, Deputy Director, Department of Corrections

1. Call to Order / Roll Call

Governor: Good morning. I would like to call to order today's meeting of the State of Nevada, Board of Examiners for March 10, 2020. Could I ask the Clerk to take a roll, please?

Board Secretary: Good morning, Governor.

Governor: Good morning.

Board Secretary: Governor Sisolak?

Governor: Here.

Board Secretary: Madam Secretary?

Secretary of State: I'm here.

Board Secretary: Attorney General Ford will not be attending the meeting today as he's traveling.

Let the record reflect, we do have a quorum.

Governor: We have a quorum.

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: *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, please step forward, identify yourself for the record and comments will be limited to three minutes.

Secretary of State: Nobody in Vegas, Governor.

Governor: Hearing and seeing none.

3. Approval of the February 18, 2020 Minutes (For possible action)

Governor: Moving on to item number 3, *Approval of the February 18, 2020 Minutes*. Secretary, do we have a motion for approval?

Secretary of State: Yes, move approval, Governor.

Governor: Any discussion on that motion? Hearing and seeing none. All in favor signify by saying aye. Are any opposed? The motion passes.

4. State Vehicle Purchases (For possible action)

Pursuant to NRS 334.010, no automobile may be purchased by any department, office, bureau, officer or employee of the state without prior written consent of the State Board of Examiners.

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Department of Administration – Enterprise Information Technology Services Division	2	\$78,690
Colorado River Commission	1	\$49,734
Total	3	\$128,424

Governor: Item number 4, *State Vehicle Purchases*.

Clerk: This morning there are 2 items on the agenda. Item 1 for vehicle purchases from the Department of Administration, Enterprise Information Technology Services Division has been withdrawn.

The second request is from the Colorado River Commission for one replacement vehicle, not to exceed \$49,734. This vehicle meets the age requirements in SAM and funds for the vehicle are included in the agency budget. Are there any questions on this item?

Secretary of State: I move for approval, Governor.

Governor: We have a motion for approval. Any discussion on that motion? Hearing and seeing none. All in favor signify by saying aye. Are any opposed? The motion passes.

5. Authorization to Contract with a Current and/or Former State Employees
(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 Penelope Hampton to perform revenue projection oversight and training on a part-time basis to the Department of Taxation through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Governor: Moving on to item number 5, *Authorization to Contract with a Current and/or Former State Employee*.

Clerk: This item includes 1 request to contract with current and/or former employees. This request is from the Department of Administration, Purchasing Division to contract with a former employee to perform revenue projection oversight and training for the Department of Taxation. This individual will be employed by Manpower through MSA#18404. Are there any questions on this item?

Secretary of State: Not from me and I move for approval, Governor.

Governor: We have a motion on the floor for approval. Is there any discussion? Hearing and seeing none. All in favor signify by saying aye. Are any opposed? The motion passes.

6. Approval of Payment to the Secretary of the U.S. Treasury Pursuant to the Cash Management Improvement Act (For possible action)

The State Controller requests approval of a payment to the U.S. Treasury in an amount not to exceed \$484,484 from the General Fund. This is the highest possible liability payment for 2019. The U.S. Treasury is reviewing the report and is expected to have a final liability amount by March 16, 2020. Payment to the U.S. Treasury is required by March 31, 2020.

Governor: Item number 6, *Approval of Payment to the Secretary of the United States Treasury, pursuant to the Cash Management Improvement Act*.

Clerk: Item 6 is a request from the State Controller pursuant to Section 85 of Assembly Bill 543 from the 2019 Legislative Session to authorize a payment not to exceed \$484,484 to the U.S. Treasury for interest owed under the Cash Management Improvement Act. The Cash Management Improvement Act ensures efficiency and equity between the time that federal funds are drawn and expended with the State incurring an interest liability if it draws funds too early and the federal government incurring liability to the State if the State uses its funds for federal program purposes.

The amount shown is the highest possible state liability for Fiscal Year 2019. The U.S. Treasury is reviewing the report submitted by the State Controller and should provide a final determination by March 16, 2020. If the calculations by the State Controller are accepted by the U.S. Treasury, the federal government will owe the State \$2,066. Last March, the Board approved a payment not to exceed \$255,302 for Fiscal Year 2018 and the final amount was a payment to the federal government of \$226,753.

Are there any questions on this item?

Secretary of State: I have none and I'll move for approval, Governor.

Governor: We have a motion on the floor for approval.

I just want to make the record clear that this was an expected amount, an amount not to exceed \$484,484. If the calculations are accurate, it's \$2,066.

Clerk: That is correct.

Governor: Is there any further discussion on the motion? Hearing and seeing none. All in favor signify by saying aye. Are any opposed? The motion passes.

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

Department Of Business and Industry – Office of the Labor Commissioner

Pursuant to Nevada Revised Statute NRS 353.268, the Office requests the Board's recommendation to the Interim Finance Committee for an allocation of \$71,465 from the Interim Finance Committee Contingency Account to cover costs for Fiscal Year 2021 related to the Task Force on Employee Misclassification from the passage of Senate Bill 493 in the 2019 Legislature.

Governor: Item number 7, *Request for Recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account.*

Clerk: This item includes 1 request for a positive recommendation to the Interim Finance Committee Pursuant to NRS 353.268. The General Fund contingency account has an approximate balance of \$26.8 million to cover unanticipated costs for the remainder of the 2019-2021 biennium. If this item is approved the remaining balance in the account will be approximately \$26.7 million.

This request is from the Department of Business and Industry, Office of the Labor Commissioner in the amount of \$71,465 to continue to cover costs related to the Task Force on Employee Misclassification arising from the passage of Senate Bill 493 of the 2019 Legislative Session.

Are there any questions on this item?

Governor: Do you have any questions?

Secretary of State: No, I don't have any.

Governor: None.

Secretary of State: I'll move for approval.

Governor: We have a motion for approval on item number 7. Is there any discussion? Hearing and seeing none. All in favor signify by saying aye. The motion passes.

8. Request for Designations of Bad Debts (For possible action)

Pursuant to NRS 463.123(2), the Nevada Gaming Control Board requests the approval to remove delinquent debt from the Nevada Gaming Commission's records.

Governor: Item number 8, *Request for Designation of Bad Debts*.

Clerk: Most State agencies turn their uncollectable debt over to the State Controller who has the authority to request the Board of Examiners write off bad debt that has become impossible or impractical to collect. Bad debt under the purview of the State Controller cannot be removed from the State's books unless the Board of Examiners designates the bad debt as uncollectable.

NRS 463.123 requires the Gaming Commission to report the debt determined to be impossible or impractical to collect to the Board of Examiners for the designation of bad debt. Upon such designation, the Clerk shall notify the State Controller to remove the debt from the State's Books.

This item includes 1 request to designate debts as a bad debt under the provisions of NRS 463.123. The request is from the Nevada Gaming Control Board to designate \$44,688.56 as bad debt for the purpose of removing the 5 debts from the State's books.

Are there any additional questions on this item?

Secretary of State: I have none and I just want to tell you, Governor, that your staff answered all my questions again, so I have nothing to bring up now. So, thank you very much for that and I will move for approval.

Governor: Thank you very much. We have a motion on the floor. Is there any discussion? Hearing and seeing none. All in favor signify by saying aye. The motion passes.

I want to say to those that are present in Las Vegas or Carson City, we're moving through this quickly but we do have an extensive briefing ahead of this meeting, individually, where staff usually answers our questions and thus makes it a little easier during the meeting. So, that is the reason.

9. Approval of Proposed Leases (For possible action)

Governor: Item number 9, *Approval of Proposed Leases*.

Clerk: There are three leases under agenda item 9 for approval by the Board this morning, are there any questions on any of these items?

Secretary of State: I have none, Governor. I'll move for approval.

Governor: We have a motion for approval. Is there any discussion on that motion? Hearing and seeing none. All in favor signify by saying aye. The motion passes.

10. Approval of Proposed Contracts (For possible action)

Governor: Item number 10.

Clerk: Item number 10 includes 28 contracts for approval by the Board this morning. Are there any questions on any of these items?

Governor: I'm going to throw you a curve here. It's more of a comment on number 19. Do we have anybody here from the Clark County School District or Department of Corrections?

This is more of a comment than it is a question. This is my understanding – a program that Corrections has worked with our school district for our re-entry of our inmates, our trustees, do we have any statistics on the success or the viability of this program?

John Borrowman: Good morning. Thank you. Deputy Director, Brian Williams, was unavailable today and I apologize for that but he did put some information together for us to represent this particular request.

We do track the success of this program. It is not the only school district in the State that provides this service to inmates within the Department of Corrections but this particular one is from Clark County, for the Youthful Offender. These are the people that are under the age of 21 and we do provide credits, not only toward their education but also high school equivalencies and high school degrees, as well as vocational certificates earned. We had enrollments of over 200 in 2017, just under 300 in 2018 and currently, around 144 up through the end of Fiscal Year 2019 in this particular program, not including all the school districts.

We have given, say in 2019, with 144 enrollees: 253 credits towards their education; 10 of them earned high school equivalencies; 12 of them earned high school degrees; 11 of them earned vocational certificates.

Governor: Well, I just want to, not just specifically as it relates to the contract and participation but want to thank you for the program in general. That it's helping, especially our youthful offenders get some education while they're incarcerated so that hopefully we will not see them back in our facilities again and reduce recidivism. So, I think this is an investment on the front end that is well spent in terms of return for the families and the individuals that are affected by the services that you're providing. So, on behalf of my office, thank you for what you're doing.

John Borrowman: Thank you.

Governor: Do you have any questions, Secretary?

Secretary of State: No, as I said, Governor, your staff did an excellent job of answering my questions and I find it very interesting that you and I had similar questions on this one. So, thank you for stating that.

Governor: It's my pleasure, thank you. It's an important function and I appreciate that. Do we have a motion on this one?

Secretary of State: Yes, I move for approval, Governor.

Governor: We have a motion for approval on item number 10. Is there any discussion? Hearing and seeing none. All in favor signify by saying aye. The motion passes.

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

Governor: Item number 11, *Approval of Proposed Master Service Agreements*.

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

Governor: I do not have any questions. Do you have any questions?

Secretary of State: I have none and I'll move for approval.

Governor: We have a motion for approval on item number 11. Is there any discussion? Hearing and seeing none. All in favor signify by saying aye. The motion passes.

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 January 18, 2020 through February 14, 2020.

Governor: Item number 12, Information Item, *Clerk of the Board Contracts*.

Clerk: There were 40 contracts under the \$50,000 threshold approved by the Clerk between January 18, 2020 and February 14, 2020. This item is informational only. Is there any additional information requested for any of these items?

Governor: I do not have any but I did have some and you answered all my questions. So, do you have any, Madam Secretary?

Secretary of State: No, ours were taken care of and I want to thank Susan and her team again, for helping through all of our questions.

Governor: I do too and I want to acknowledge to the folks that are here, you might just see Susan and her team here making us look good and they do but they are terrific and very efficient in providing information to us when we have questions and they always get back to us immediately.

So, this is an information item, thank you very much.

13. Information Item and Reports

Statewide Quarterly Overtime Report – Fiscal Year 2020 2nd 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 2nd Quarter Overtime Report and analysis for Fiscal Year 2020.

Governor: Item number 13.

Clerk: Item number 13 - this informational report in agenda item 13 is on overtime and accrued compensatory leave for the second quarter of Fiscal Year 2020. My staff summarized the report into a two-page summary, so I will not read all of the details but will hit a few highlights.

For the first half of Fiscal Year 2020, overtime pay and compensatory (comp) leave accounted for a total of approximately \$25.66 million, which is 4.55% of total pay, this is a slight increase from Fiscal Year 2019. The Department of Corrections had the highest amount of overtime and comp time at \$4.37 million or 9.7% of their base pay for the second quarter. This is an increase from the same period last year of \$1.15 million, followed by the Department of Health and Human Services at \$2.73 million or 3.19% of base pay. This was a slight decrease from the same period last year. These two agencies accounted for 56% of the overtime for the quarter.

At the Department of Corrections, overtime and comp time at the seven locations on page 2 accounted for 84.7% of the total overtime for the Department. By event code, the highest four causes on page 2 accounted for 85.5% of the overtime at the Department of Corrections for the 2nd quarter, Fiscal Year 2019. At the Department of Health and Human Services, the four event codes on the bottom of page 2 accounted for 77.2% of their overtime.

Are there any questions on this item?

Governor: There are none and I appreciate you bringing to my attention some of these totals and we're working with the agencies to reduce this overtime, when possible. Do you have any questions, Secretary?

Secretary of State: I do not, thank you.

Governor: Thank you. That's an information item.

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: Item number 14 is *Public Comment*. Anyone wishing to address the Board on any item, please step forward, identify yourself for the record and comments will be limited to three minutes. Do we have any in Las Vegas?

Secretary of State: No, none in Las Vegas.

Governor: Hearing and seeing no one.

Do we have a motion for adjournment?

Secretary of State: So moved.

Governor: We have a motion on the floor. All in favor signify by saying aye. The motion passes, we are adjourned, thanks for coming everybody.

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
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: March 16, 2020

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

From: Nikki Hovden, Executive Branch Budget Officer
Budget Division

A handwritten signature in blue ink, likely belonging to Nikki Hovden.

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.

COLORADO RIVER COMMISSION

Agenda Item Write-up:

Pursuant to NRS 334.010, the Division requests approval to purchase one replacement vehicle not to exceed \$25,048.

Additional Information:

The request is to purchase a vehicle to replace a current vehicle which complies with the Vehicle Replacement Policy of SAM 1316. The agency was approved for a replacement vehicle in decision unit E-712 of the 2019 Legislative Session in the amount of \$25,411 for fiscal year 2020.

Statutory Authority:

NRS 334.010

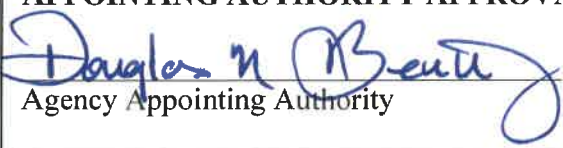
REVIEWED: _____
ACTION ITEM: _____

RECEIVED

MAR 11 2020

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Agency Name: Colorado River Commission of Nevada	Budget Account #: 4490
Contact Name: Gail Benton	Telephone Number: 702-486-2670
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: 1	Amount of the request: \$25,018.00 825,048
Is the requested vehicle(s) new or used: New	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: SUV	
Mission of the requested vehicle(s): The 2006 Grand Prix (GP) will be excessed. <small>The new vehicle will be used in the same capacity as the (GP) for operational needs requiring travel throughout the Las Vegas Valley and out-of-state for delivery of materials to Commissioners, transport of Commissioners and Staff to conferences, off-site meetings, pickup and deliveries of plans, drawings, legal documents, contracts, posting for meetings, signage, and other important documents.</small>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: E712 If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)	
Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain. No, not a compact or intermediate vehicle classification	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: 2006 Odometer Reading: 54,098 Type of Vehicle: Pontiac Grand Prix Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. Yes If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. N/A
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
 Agency Appointing Authority	<i>Administrative Services Officer</i> Title
	FEB 24 2020 Date
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
Board of Examiners	Date

Revised 1/2020

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2019 GMC Terrain SUV (TXB26) (AWD)		
Dealer Name:	Reno Isuzu Trucks		
Delivery Location:	555 E Washington Ave, Suite #3100 LV, NV 89101		
Vehicle Colors:	Exterior: White	Interior: Med. Ash Gray	<input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$25,018.00	\$25,018.00
SPECIFY OPTIONS: (description)			\$
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:			\$25,047.25

Registered Owner:	Agency Name & Address: Colorado River Commission of Nevada 555 E. Washington Ave #3100 Las Vegas, NV 89101
Legal Owner:	Agency Name & Address: Colorado River Commission of Nevada 555 E. Washington Ave #3100 Las Vegas, NV 89101
County Vehicle Based In:	Clark
Name & Phone of Person to contact when vehicle is ready for delivery:	Gail Benton or Doug Beatty (702) 486-2670

STANDARD PAGE - FLEET VEHICLES 8475

(Use separate page for each package)

DEALER NAME: RENO * BUICK * GMC * CADILLAC* & *ISUZU* MEDIUM DUTY TRUCKS		
Specify State's Vehicle Item Number: 5.1		
(5.1 Sport Utility Vehicle: 4x4; 4 Door; 4-5 Passenger)		
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2019 GMC Terrain SUV (TXB26) (AWD)	\$24,718	\$25,018
Municipal Lease Payment (As Low As) \$		See dealer for terms and details.
State vehicle miles per gallon (MPG): 24 MPG City / 28 MPG Hwy (Estimate)		
State manufactures warranty: Bumper to Bumper 3yr / 36,000 miles Powertrain 5yr / 100,000		
Specify engine size and emission rating: ECOTEC Turbo 1.5L 170 Hp		
Includes Minimum Standard Equipment Listed: __XX__ Yes ____ No If no, state exceptions: (Refer to page 6 of bid)		
A/C, Cloth Seats, Tilt Wheel, 4 Wheel ABS		
Power Steering and Brakes, M/S Tires, AM/FM Stereo 7" Color Touch Screen w/ USB ports		
Front Air Bags, Tire Pressure Monitor, Carpeted Floor Covering		
Tinted Glass, Compact Spare Tire, Cruise Control		
Exterior Color: List available colors: Available at Additional Charge \$348		
(GAN) QUICKSILVER METALLIC, (GPJ) RED QUARTZ METALLIC (GS6) Smokey Quartz Metallic		
(G35) BLUE STEEL METALLIC, (GB8) EBONY TWILIGHT, (G8K) COPPERTINO METALLIC,		
(G9K) SATIN STEEL METALLIC, (G7Q) GRAPHITE GRAY METALLIC,		
(GAZ) SUMMIT WHITE (No Charge)		
Seats, Cloth: List available colors:		
(H1T) JET BLACK UPSCALE CLOTH SEAT TRIM		
(H72) MEDIUM ASH GRAY CLOTH SEAT TRIM		
GVW:	WHEELBASE: 107.3	
(When Applicable)	(When Applicable)	

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: RENO * BUICK * GMC * CADILLAC* & *ISUZU* MEDIUM DUTY TRUCKS			
Specify State's Vehicle Item Number: 5.1			
(5.1 Sport Utility Vehicle: 4x4; 4 Door; 4-5 Passenger)			
Option Package Name/Code: SLE TRIM		NO CHARGE/INCLUDED	
List Equipment Features Below:			
17" ALLOY WHEELS , USB data ports, 2			
BODY COLOR CHROME MIRROR CAPS			
BLUETOOTH FOR PHONE			
CARPETED FLOOR MATS,			
AUTO DIMMING MIRROR			
DAYTIME RUNNING LIGHTS			
REAR VIEW BACKUP CAMERA			
Option Package Name/Code: Drivers Convenience Package		ZQ2	\$1,299
List Equipment Features Below:			
Remote Start (BTV)			
Dual Zone Climate Controls (CJ2)			
Driver and front passenger heated seats (KA1)			
8 way power drivers seat (AG1)			
Drivers seat power lumbar control (AL9)			
Roof Mounted Luggage Rack Side Rails (V2P)			

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME:	RENO * BUICK * GMC * CADILLAC* & *ISUZU* MEDIUM DUTY TRUCKS
Specify State's Vehicle Item Number: 5.1	
(5.1 Sport Utility Vehicle: 4x4; 4 Door; 4-5 Passenger)	

		DEDUCT AMOUNT
ABS Brake System	Included	\$-
Air Conditioning	Included	\$-
Cruise Control	Included	\$-
Diesel Engine	N/A	\$-
Engine Block Heater K05	\$88	\$-
Four Wheel Drive (AWD)	Included	(\$1,510)
Heavy Duty Alternator	N/A	\$-
Hitch Receiver	N/A	\$-
Integrated Trailer Brake (3/4 ton only)	N/A	\$-
Keyless Entry w/Fob (must have power door locks)	Included	\$-
Limited Slip Differential	N/A	\$-
Paint, Metallic	\$348	\$-
Power Mirrors	Included	\$-
Power Locks	Included	\$-
Power Seats	see ZQ2 Pkg	\$-
Power Windows	Included	\$-
Radio; AM/FM Stereo, CD	Included no CD	\$-
Rear Window Wiper	Included	\$-
Seats, Vinyl	N/A	\$-
Skid Plate	N/A	\$-
Tilt Steering	Included	\$-
Tire, Spare, Full Size	Compact Included	\$-
Trailer Tow Mirrors	N/A	\$-
Trailer Tow Package	N/A	\$-
Maintenance:2 years or 24K miles (dealer) (R9)	\$60.00	\$-
Other Options&GM Accessories by quote	By Quote	\$-
Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$		\$4 per mile.



**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: March 16, 2020

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

From: Nikki Hovden, Executive Branch Budget Officer
Budget Division

A handwritten signature in black ink, appearing to be "NH", written over the name Nikki Hovden.

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 CONSERVATION AND NATURAL RESOURCES
FORESTRY DIVISION**

Agenda Item Write-up:

Pursuant to NRS 334.010, the division requests approval to purchase 12 replacement vehicles not to exceed \$2,403,001.

Additional Information:

The request is to purchase 15 vehicles to replace current vehicles which complies with the Vehicle Replacement Policy of SAM 1316. The agency was approved for replacement vehicles in Senate Bill 525 of the 2019 Legislative Session as shown in the table below.

Budget Account	Vehicles	Bill Sec - DU	Authority	Req Amt
BA4198-Cat 52	10-crew carrier	Sec 6 - E891	\$2,527,420	\$2,305,268
BA4195-Cat 52	2-PU w/field eq	Sec 3 - E890, E893	\$ 729,518	\$ 97,733


Statutory Authority:

NRS 334.010 and Senate Bill 525

REVIEWED: _____

ACTION ITEM: _____

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: Nevada Division of Forestry	Budget Account #: 4198
Contact Name: Paul A. Coates	Telephone Number: 775-849-2500 ext 239
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: <u>10</u> Amount of the request: <u>\$ 2,305,268</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Crew Carriers</p> <p>Mission of the requested vehicle(s): Natural resource project management / wildland fire suppression, mitigation and rehabilitation.</p>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: SB 525 If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> Replacement(s)	
Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain. The vehicles are exempt per NAC 486A.135 SS 4	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) <u>Current Vehicle Information:</u> Vehicle #1 Model Year: See attached Odometer Reading: Type of Vehicle: <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. Yes If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%; text-align: center;">  _____ Agency Appointing Authority </div> <div style="width: 30%; text-align: center;"> <u>State Forester</u> _____ Title </div> <div style="width: 30%; text-align: center;"> <u>3/5/2020</u> _____ Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> _____ Board of Examiners </div> <div style="width: 45%;"> _____ Date </div> </div>	

**REPLACEMENT EQUIPMENT REQUEST
FISCAL YEAR - YEAR 1 AND YEAR 2**

Budget Account #:

Budget Account Title:

4198

Conservation Camps

Dec. Unit	Cat.	Object	NEBS Location	Equipment Type	Item Requested	Year 1	Year 2	Item being Replaced	State ID #	Month/Year	Condition / Reason for Replacement
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS 13 PASSENGER	V005785	Jul-98	(EX35888) 140,561mi Currently OOS / replacement is best value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005756	Apr-96	(EX31957) 213,363mi Currently OOS / needed repairs exceed value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CCV: INTL CREW CARRIER	279083	Apr-05	(EX48201) 267,623mi High mileage / continued maintenance exceeds value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005780	Apr-96	(EX31595) 166,500mi Very poor condition/engine issues
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005776	Apr-96	(EX31968) 220,729mi High mileage / continued maintenance exceeds value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005769	Apr-96	(EX31969) 214,942mi High mileage / continued maintenance exceeds value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005773	Apr-96	(EX31963) 214,416mi High mileage / continued maintenance exceeds value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005794	Jul-98	(EX35884) 208,834mi High mileage / continued maintenance exceeds value
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CAB & CHASSIS: 2002, 4400SBA	V005766	Apr-96	(EX31964) 145,659 Currently OOS/needs major repairs and is older
	05		Equipment Schedule	Vehicle	ECT	\$252,742.68		CREW BUS DIESEL 30 000 GVW	V005792	Apr-96	(EX31966) 201,614mi High mileage / continued maintenance exceeds value



QUOTE

Printed: 3/3/2020

State of Nevada
515 E. Musser Street, Suite 300
Carson City, NV 89701


Required Date:		Quote ID
Promise Date:	6/26/20 12:00 AM	
Bid Number:	70CNR-S938	
Department:	Forestry Division	70CNR-VQ6291

V E N D O R	Silver State International Trucks 2255 Larkin Circle Sparks, NV 89431
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S H I P T O	State of Nevada 885 Eastlake Blvd Division of Forestry Carson City, NV 89704
----------------------------	---

Item	Class-Item Description	Quantity	Unit	Unit Price	Discount	Total
1	Emergency Crew Carriers --- Please see the 'Attachments' tab for additional specification information. This must be uploaded with the vendors response.	10.00	EA	\$ 230,526.76	\$ 0.00	\$ 2,305,267.60
					TOTAL:	\$ 2,305,267.60

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: Nevada Division of Forestry	Budget Account #: 4195
Contact Name: Paul A. Coates	Telephone Number: 775-849-2500 ext 239
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: <u>2</u> Amount of the request: <u>\$97,733</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Pickup Truck with field equipment</p> <p>Mission of the requested vehicle(s): Natural resource project management to include fuel reduction rehabilitation and restoration; also has limited fire suppression capacity.</p>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: SB 525 If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>2</u> Replacement(s)	
Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain. The vehicles are exempt per NAC 486A.135 SS 4	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) <u>Current Vehicle Information:</u> Vehicle #1 Model Year: 2005 Odometer Reading: 176,579 Type of Vehicle: Pickup Vehicle #2 Model Year: 2005 Odometer Reading: 199,702 Type of Vehicle: Pickup	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. Yes If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;">  _____ Agency Appointing Authority </div> <div style="text-align: center;"> <u>State Forester</u> _____ Title </div> <div style="text-align: center;"> <u>3/5/2020</u> _____ Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> _____ Board of Examiners </div> <div style="width: 45%;"> _____ Date </div> </div>	

NEVADA DIVISION OF FORESTRY

QUOTE 2.20A W3B F350 CREW CAB AND CHASSIS 56 IN CAB TO AXLE 176 INCH
WHEELBASE SINGLE REAR WHEEL

WHITE EXTERIOR GRAY CLOTH INTERIOR

BASIC EQUIP:POWER LOCKS POWER WINDOWS TILT CRUISE SYNC SPARE

BASE PRICE \$35790

DIESEL \$10358

ELECT. LOCKING REAR AXLE 3.55 RATIO \$355

DAYTIME RUNNING LIGHTS \$41

BLOCK HEATER \$91

SKID PLATES \$91

ALL TERRAIN TIRES \$225

UPFITTER SWITCHES \$150

HD ALTERNATOR \$104

CAB STEPS \$405

TRANS PTO \$254

TRAILER BRAKE CONTROLLER \$246

EXTRA FOB \$350

REAR CAMERA PREP KIT \$377

TITLE \$29.25

TOTAL \$48866.25



Jones-West Ford **FLEET**

3600 Kietzke Lane Reno, NV 89502

Office: 775.829.3206 FAX: 775.829.3364

Commercial | Fleet Proposal

DATE: 01/15/2020

Proposal prepared for: PAUL COATES

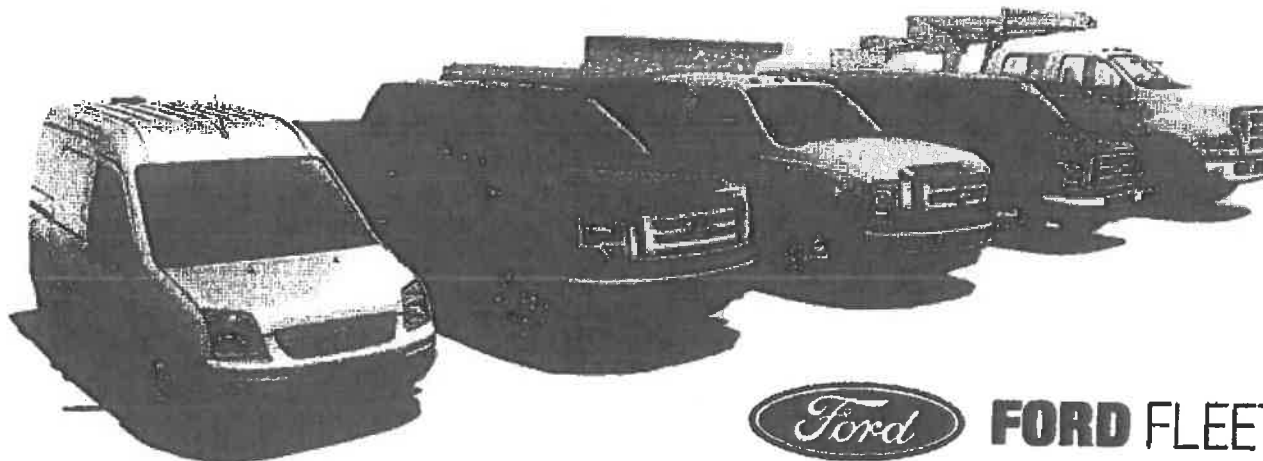
Prepared by: Fleet Manager Andy Ludel

Office: 775.829.3206

Fax: 775.829.3364

Quoted Vehicle(s): 2020 F350

Quote ID:



FORD FLEET

Senate Bill No. 525–Committee on Finance

CHAPTER.....

AN ACT making appropriations to the Division of Forestry for equipment and maintenance; and providing other matters properly relating thereto.

EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted-material~~ is material to be omitted.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$4,610,000 for the replacement of a helicopter.

Sec. 2. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$517,017 for the replacement of wood chippers.

Sec. 3. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$729,518 for the replacement of emergency response and service vehicles.

Sec. 4. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$510,000 for deferred maintenance projects.

Sec. 5. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$243,126 for the replacement of mobile incident kitchen trailers for the Forestry Conservation Camps.

Sec. 6. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$2,527,420 for the replacement of emergency crew carriers for the Forestry Conservation Camps.

Sec. 7. There is hereby appropriated from the State General Fund to the Division of Forestry of the State Department of Conservation and Natural Resources the sum of \$310,000 for deferred maintenance projects for the Forestry Conservation Camps.

Sec. 8. Any remaining balance of the appropriations made by sections 1 to 7, inclusive, of this act must not be committed for expenditure after June 30, 2021, by the entity to which the



appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 17, 2021, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 17, 2021.

Sec. 9. This act becomes effective upon passage and approval.



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: March 23, 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 Tammy Trio to perform fiscal management duties through Master Service Agreement #18404 with HAT Limited Partnership, dba Manpower.

Additional Information:

Ms. Trio retired from the Department of Public Safety as an Administrative Services Officer on October 9, 2019. Her skills and experience will be utilized to reduce backlog and overtime and to complete special projects for Department of Public Safety and other agencies as needed, through March 31, 2021.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: _____
ACTION ITEM: _____

ST



**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**

March 20, 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 Tammy Trio who Manpower wants to hire. Manpower is aware Tammy Trio would not be able to start with them until approval of the April Board of Examiners.

Tammy Trio left state service on October 9, 2019 and will be collecting benefits from PERS.

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

Steve Sisolak
Governor



Nevada Department of
Public Safety
DEDICATION PRIDE SERVICE

George Togliatti
Director

Sheri Brueggemann
Deputy Director

Director's Office

555 Wright Way
Carson City, Nevada 89711
Telephone (775) 684-4808 - Fax (775) 684-4809

Memorandum

Date: March 10, 2020

TO: Governor's Finance Office

FROM: Curtis Palmer, ASO IV *CP*
DPS, Director's Office

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 Tammy Trio, whom Manpower wishes to employ. Manpower is aware that Tammy Trio would not be able to begin employment, until approval of the April B.O.E.

Tammy Trio recently left State service and is collecting benefits from PERS.

If you have any questions, please contact me at 684-4536 or
cpalmer@dps.state.nv.us



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

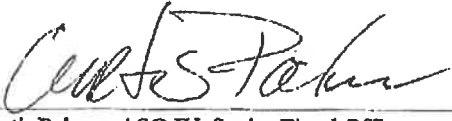
Employee Information				
Former Employee Name:	Tammy Trio			
Former Employee ID Number:	011116			
Former Job Title:	Administrative Services Officer 3			
Former Employee Agency:	Department of Public Safety			
Former Class and Grade:	Class:	07.216	Grade:	41
Former Employment Dates:	From:	05/26/1993	To:	10/09/2019
Requesting Agency:	Department of Public Safety, various other as needed			
Vendor:	HAT Limited, DBA Manpower			

Please mark which of the following applies and complete Sections 'A' through 'M' below:	
X	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. Provide essential fiscal management, review and process fiscal transactions, manage and draw in federal funds, reconcile accounts, ensure proper use and coding of funds, assist with annual federal budget building.
B	Document former job description. Administrative Services Officer III, Department of Public Safety, Records, Communications, and Compliance Division.
C	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? Yes. Former employee has detailed knowledge of state fiscal systems and requirements for federal grants.
D	Explain why existing State employees within your agency cannot perform this function. Ms. Trio will be utilized as needed to reduce backlog, reduce overtime, or for special projects that require additional assistance for a short period of time.

E	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.
	N/A
F	List contractors' hourly rate.
	\$25.00
G	List the range of comparable State employee rates.
	\$26.80-\$39.94, Administrative Services Officer 1 / Management Analyst 3
H	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?
	N/A; rate is below comparable range.
I	Document justification for hiring contractor.
	The contractor is needed for various assignments at multiple state agencies
J	Will the employee be collecting PERS at any time during the contract?
	Yes.
K	What is the duration of the contract with the former employee? (Include start and end date)
	April 14, 2020 through March 31, 2021 (subject to BOE approval)
L	Will the former employee be working full time or part time? If part time, how many hours?
	Full time, as needed
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:


Curtis Palmer, ASO IV, Senior Fiscal Officer, DPS
3/10/2020
Date


Purchasing Administrator Signature (if a Statewide Contract)
3/20/2020
Date


Budget Analyst Signature
3-25-20
Date

Clerk of the Board of Examiners Signature
Date



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

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

Date: March 16, 2020

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

From: Jim Rodriguez, Executive Budget Officer *JR*
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 PUBLIC SAFETY (DPS) – Capitol Police

Agenda Item Write-up:

Pursuant NRS 286.523, the Department requests an 18-month extension of the Board of Examiners "critical labor" designation and a Public Employees Retirement System exception for four DPS Officer I positions and one DPS Officer II position.

Additional Information:

On January 12, 2016, the Board of Examiners approved the Department of Public Safety's critical need request for a two-year period. On January 9th, 2018 the agency was approved for a 17-month extension of the request that was to expire on May 31, 2019. On April 9, 2019 the Board again provided for an extension of the critical fill designation to provide the department additional time to find a permanent long-term solution to the staff recruitment and retention issues facing the Capitol Police Division. That extension is set to expire on June 9, 2020.

The Department continues to report difficulties in recruitments and retention of Capitol Police Officers. The agency believes that continuing the critical needs designation for 18 months will allow the department to continue utilizing retired officers to fill ongoing vacant officer position while the department seeks out a more long-term solution to the issue it faces with recruiting and retaining Capitol Police officers.

The extension is requested for the following DPS Officer positions:

1. DPS Officer II – PCN 0018
2. DPS Officer I – PCN 0207
3. DPS Officer I – PCN 0208
4. DPS Officer I – PCN 0218

Statutory Authority:

NRS 286.510 - 286.523

REVIEWED: _____

ACTION ITEM: _____

Steve Sisolak
Governor



**Nevada Department of
Public Safety**
DEDICATION PRIDE SERVICE

George Togliatti
Director


Sheri Brueggemann
Deputy Director

Director' Office
555 Wright Way
Carson City, Nevada 89701
Telephone (775) 684-4556 – Fax (775) 684-4808

MEMORANDUM

Date: March 17, 2020

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

From: George Togliatti, Director
Department of Public Safety 

Subject: Continuation of Critical Labor Designation – DPS Officers I/II for Capitol Police

The Department of Public Safety (DPS) respectfully requests the Board of Examiners' review and approval of the critical needs designation of DPS Officer I and DPS Officer II positions for the Capitol Police Division.

The four positions listed below are currently occupied by retirees who have been reemployed under the critical labor designation. The Department is requesting to continue with this designation for additional 18 months in order to continue to provide public safety services performed by these officers.

Positions Currently Filled Under the Critical Labor Designation

- DPS Officer II – PCN 0018
- DPS Officer I – PCN 0207
- DPS Officer I – PCN 0208
- PDS Officer I – PCN 0218

On April 9, 2019, the State Board of Examiners reviewed and designated the DPS Officers I and II as critical needs positions for one year. This provided a much-needed flexibility to allow DPS to continue to reemploy retired officers to help carry out its mission. This authorization is scheduled to expire on June 9, 2020. Meanwhile, DPS continues to have critical needs for DPS Officers within the Capitol Police Division.

The attrition rate has forced the Capitol Police Division to hire several retired officers to help meet its day-to-day operational needs. The Division currently has three DPS Officer I's and one DPS Officer II who are employed under the critical labor designation (total of four personnel).

**Request for Critical Labor Designation
DPS Officers I/II
Capitol Police Division
Page 2 of 3**

The reemployed retired officer filling the DPS Officer II position serves as a Sergeant in Carson City. In addition, he has also been serving as the Acting Chief of the Division since the permanent Chief retired on January 2, 2020. DPS has conducted a recruitment and is in the process of filling the Chief's position. The Division also employs three additional retired officers who have been hired on a temporary basis (limited wages and hours) in order to maintain appropriate level of coverage.

Within the first month of 2020, the Division has already lost three personnel. As the table below shows, lack of advancement and reappointment (higher pay grade) are attributed to two of the four losses. In addition, DPS is aware that additional Capitol Police Officers are actively seeking to transfer to other DPS divisions, where they will have better wages and career advancement opportunities.

Since April 2019 when DPS last appeared before the BOE, the DPS Officer I and DPS Officer II recruitments have been posted continuously. The two recruitments combined have produced about 2,687 applications, of which 1,859 applicants qualified for the positions (met the minimum qualifications). Approximately 638 applicants failed to appear for the required exams (written and physical fitness), while about 468 candidates failed the written exam. Out of those who appeared and successfully completed the exams, many failed the required background investigations. Many others did not complete the required background investigation forms to allow DPS to begin their background investigations. Since April of last year, we were able to successfully hire 65 DPS Officers I, or 2% of applicants. Therefore, the number of applications received alone does not clearly represent the challenges DPS faces in recruiting and retaining qualified officers. Four Academies have been held, two of which are still in progress and to date 14 cadets have failed to graduate. To put this in perspective during this same period we lost 102 officers. We continue to lose more officers than we can hire every year. Please keep in mind whether we hire Capitol Police Officers or other DPS Officers they mostly start as DPS Officers I's. All DPS Officers I's receive automatic progression to DPS Officers II after the first year, except Capitol Police Officers. This makes it harder still to fill lower paid DPS Officers I positions that still must meet the same standards as all the rest of the DPS Officers II's.

Turnover Analysis

Number	Rank	Separation Date	Reason for Separation
1	DPS Officer I	1/27/20	Moving for personal reasons
2	DPS Officer I	1/27/20	Reappointed to DPS Officer II (Parole and Probation Division)
3	Division Chief	1/02/20	Retirement
4	DPS Officer II	12/02/19	Lack of advancement opportunity

The Capitol Police Division is staffed with only 21 sworn positions: 18 DPS Officer I's, two DPS Officer II's and the Division Chief position. Considering the size of the Division, losing four personnel within two months is operationally impactful. Without the critical hires, the Division would suffer a severe operational hardship and will be unable to fulfill its mission/obligations to keep the state buildings, employees and constituents safe.

Request for Critical Labor Designation
DPS Officers I/II
Capitol Police Division
Page 3 of 3

Our critical hires currently occupy four of the 21 authorized positions. This brings the total number of vacancies to eight out of 21, which is approximately 38% of the Division's permanent workforce.

The Division continues to struggle to recruit and retain well-qualified employees. This is partly attributed to pay disparity. Eighteen (18) out of the 21 permanent, full-time sworn positions are classified at DPS Officer I level, as opposed to the DPS Officer II's found in other DPS divisions. DPS officers interested in transferring to the Capitol Police Division must take voluntary demotions. This could often bring a negative financial impact to the officers, making it difficult for the Division to attract well-qualified officers. The manpower drain becomes excessive when officers leave to take higher-paying jobs or to advance their careers elsewhere.

To address the classification and pay disparity concerns, DPS submitted NPD-19's to reclassify the Capitol Police sworn positions. However, DPS has been informed that the Division of Human Resource Management (DHRM) cannot review or appropriately reclassify the positions without approval by the Governor's Finance Office (GFO). The Governor's Finance Office has denied the request. Therefore, the classification review has been halted until 2021 when DPS can request funding from the Nevada Legislature. Meanwhile, the Division continues to lose officers. It is important to note that even after filling the vacant positions, it takes over a year for a newly hired officer to complete all the necessary training to become a fully functioning officer. Therefore, continuing the critical needs designation for additional 18 months is necessary to allow the Department to continue to utilize the retired officers without severe operational hardship. If the Department loses one more position, without additional critical fills, it will be likely that the Department will have to consider some cessation of services to state buildings, as the shortage of DPS Officers in both Parole and Probation, and Highway Patrol are also at a critical levels.

Please contact me if you have any questions or need additional information. I appreciate your consideration of this request.

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
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: March 16, 2020
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Bridgette Mackey-Garrison, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

A handwritten signature in blue ink, likely belonging to Bridgette Mackey-Garrison.

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

DEPARTMENT OF CORRECTIONS

Agenda Item Write-up:

Pursuant to NRS 353.268, the Nevada Department of Corrections (NDOC) requests the Board's recommendation to the Interim Finance Committee for \$4,870,606 from Contingency Account, to cover the cost of the projected shortfalls in Inmate Driven and Utilities expenditure categories for the remainder of the fiscal year.

Additional Information:

The Nevada Department of Corrections (NDOC) has made significant progress year-to-date in reducing its FY 2020 General Fund shortfall, there remains projected funding shortfalls in other categories that are impervious to the departments' actions. As a result, the department is projecting a General Fund shortfall in specific categories which are unable to be solved through budgetary transfers or expenditure reductions.

The request of \$4,870,606 from the Interim Finance Committee Contingency Fund represents \$973,234 for partial funding of Personnel Services; \$3,272,636 for partial funding of Non-Medical Inmate Driven projected expenditures which the department provided an unsolicited Informational Memo to the Interim Finance Committee on November 14, 2019. The memo provided notification regarding the unanticipated Non-

Medical Inmate Driven costs associated with implementing a new inmate menu; \$168,658 for partial funding of Utilities which is due to increased rates in natural gas, water, sewer and electricity; and \$456,078 for the projected shortfall in Room and Board revenues which is an offset to the General Fund as a result of the cap on monthly deductions to inmate wages at the Casa Grande Transitional Housing facility.

The department would return to the June BOE for any remaining balance of unsolved funding shortfalls.

Statutory Authority:

NRS 353.268.

REVIEWED: _____

ACTION ITEM: _____

Final Revised IFC Contingency R

IFC Contingency Fund Request Work Programs Non-IFC WP - Action Item Memo for Both BOE and IFC									
BA	ACCOUNT	WP #C	Revenue			Expenditures			
			IFC Contingency AMOUNT	3829 - Room and Board	Revenue Total	01 - Personnel Services	50 - Inmate Drivens	59 - Utilities	Expenditure Total
3716	Warm Springs Correctional Center	C49998	\$ 189,625		\$ 189,625		\$ 181,779	\$ 7,846	\$ 189,625
3722	Stewart Conservation Camp	C49945	\$ 121,905		\$ 121,905		\$ 121,905		\$ 121,905
3723	Pioche Conservation Camp	C49953	\$ 67,709		\$ 67,709		\$ 67,709		\$ 67,709
3724	Northern NV Restitution Center - Eagles Nest	C49902	\$ 27,419		\$ 27,419		\$ 27,419		\$ 27,419
3725	Three Lakes Valley Conservation Camp	C49964	\$ 135,843		\$ 135,843		\$ 106,522	\$ 29,321	\$ 135,843
3738	Southern Desert Correctional Center	C49965	\$ 1,108,578		\$ 1,108,578	\$ 621,675	\$ 486,903		\$ 1,108,578
3748	Jean Conservation Camp	C49950	\$ 29,757		\$ 29,757		\$ 29,757		\$ 29,757
3751	Ely State Prison	C49954	\$ 855,031		\$ 855,031	\$ 351,559	\$ 446,266	\$ 57,206	\$ 855,031
3754	Tonopah Conservation Camp	C49966	\$ 10,899		\$ 10,899		\$ 10,899		\$ 10,899
3760	Casa Grande Transitional Housing	C49969	\$ 536,579	\$ (456,078)	\$ 80,501		\$ 80,501		\$ 80,501
3761	Florence McClure Women's Correctional Center	C49976	\$ 412,727		\$ 412,727		\$ 338,442	\$ 74,285	\$ 412,727
3762	High Desert State Prison	C49957	\$ 1,374,534		\$ 1,374,534		\$ 1,374,534		\$ 1,374,534
TOTAL			\$ 4,870,606	\$ (456,078)	\$ 4,414,528	\$ 973,234	\$ 3,272,636	\$ 168,658	\$ 4,414,528
Total # WP									12

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: April 2, 2020

To: Susan Brown, Director
Governor's Finance Office

From: Bridgette Mackey-Garrison, 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 CORRECTIONS

Agenda Item Write-up:


Pursuant to NRS 353.268, the Nevada Department of Corrections (NDOC) requests an allocation of \$2,149,866 in Fiscal Year (FY) 2020 from the Interim Finance Committee Contingency account to fund projected shortfalls in Medical Inmate Driven expenditures.

Additional Information:

The Nevada Department of Corrections (NDOC) is experiencing a shortfall in the Medical Inmate Driven category due to an increase in costs related to complete testing of the existing inmate population for Hepatitis C and for treatment of inmates infected with Hepatitis C, as well as, an increase in outside medical costs.

Statutory Authority:

NRS 353.268.

REVIEWED: 
ACTION ITEM: _____

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9906



Steve Sisolak
Governor

Charles Daniels
Director

**State of Nevada
Department of Corrections**

Date: March 8, 2020

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

From: Charles Daniels, Director
Department of Corrections

Subject: IFC Contingency Funds Request

The Department of Corrections is seeking a favorable recommendation from the Board of Examiners (BOE) to request State Fiscal Year (SFY) 2020 funding in the amount of \$2,149,866 from the Interim Finance Committee Contingency Fund to fund projected shortfalls in Medical Inmate Driven. The Department has submitted SFY 2020 Work Program C49899 pursuant to this request.

The department provided an unsolicited Informational Memo to the Interim Finance Committee on November 15, 2019. The memo provided notification regarding the recent changes to NDOC Medical Directive 216 and 219 reflecting the medical community standards of testing and treatment of inmates for the Hepatitis C Virus (HCV). The NDOC has been researching cost effective means to treat HCV positive inmates in order to comply with medical community standards. Through this research, the NDOC has formed relationships with Nevada Hospitals who have access to 340B pricing and telemedicine. Using the Medicaid model as the medical community standard of care, the standard is to test all inmates for HCV and then treat all inmates who are diagnosed with chronic HCV.

The department projects a shortfall of \$2,551,950 in the Prison Medical Care budget account, Inmate Driven category. This shortfall includes \$1,593,379 to cover costs to complete testing of the existing inmate population for Hepatitis C and provide for treatment of inmates infected with Hepatitis C. The remaining projected shortfall is to fund outside medical costs.

The NDOC does not have the fiscal means to fund these unexpected shortfalls without additional resources and is requesting IFC Contingency Funds.

Thank you

State of Nevada Work Program

WP Number: C49899

FY 2020

☐ Add Original Work Program

XXX	Modify Work Program
-----	---------------------

THE GOVERNOR BY

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
04/08/20	101	440	3706	NDOC - PRISON MEDICAL CARE

Funds Available

Budgetary GLs (2501 - 2599)	Description	WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
			4654	TRANSFER FROM INTERIM FINANCE	2,149,866	0	2,149,866
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		2,149,866		2,149,866
Total Budgetary & Revenue GLs					2,149,866		

Expenditures

[illegible]

Sub Total Category Expenditures

2,149,866

Remarks

This work program requests \$2,149,866 of Interim Finance Contingency funds to cover a projected shortfall in the Inmate Drivens category for costs necessary to test and treat inmates for Hepatitis C in addition to other outside medical services.

Total Budgetary General Ledgers and Category Expenditures (AP)

2,149,866

Authorized Signature

Date _____

Controller's Office Approval

Does not require Interim Finance approval since This request supports an allocation from the IFC Contingency Account pursuant to NRS 353.268.

SFY 2020 NDOC Hepatitis C Cost Projections														
	July-19	August-19	September-19	October-19	November-19	December-19	January-20	February-20	March-20	April-20	May-20	June-20	Anticipated SFY 20	
Qty treated/CUM total	14	12/14	5/14	6/20	17/31	23/36	22/43	11/51	15/64					
Provider billing w/	\$4,951.59	\$565.84	\$2,544.73	\$4,259.34	\$19,087.73	\$9,537.41	\$2,792.73	\$664.42	\$1,492.30	\$2,075.94	\$2,887.84	\$4,017.27	\$49,777.14	
Hep C Rx Monthly cost	\$87,307.11	\$91,007.34	\$20,225.46	\$35,394.91	\$98,041.46	\$143,851.45	\$143,865.88	\$55,643.35	\$77,405.44	\$107,678.71	\$149,791.85	\$208,375.44	\$1,218,588.60	
TOTAL HepC Rx plus Telemed Prov Costs	\$92,258.70	\$91,573.18	\$22,770.39	\$39,654.25	\$118,029.19	\$147,388.86	\$146,658.61	\$56,307.77	\$78,897.74	\$109,754.65	\$152,679.69	\$212,392.71	\$1,268,365.74	
Percent Increase/ Decrease from previous month		4.24%	77.78%	75.00%	176.99%	46.73%	0.01%	-61.32%	39.11%	39.11%	39.11%	39.11%		
NOTES														
(1) Some medication prescribed twice in a monthly cycle of reporting due to 28-day regimens. See attached SFY 20 Tracking Log													\$793,538.69	SFY20 Rx & Renew
(7) March totals not yet posted in DAWN but are reflected here for accuracy.													\$52,996.70	SFY20 Phlebotomists
(8) April, May and June 2020 are annualized using most recent (March SFY 20) Percentage Increase from prior month.													\$360,085.56	Labcorp 11/18/19-3/18/20
(4) Billing entity for Hep C and HIV telemedicine through Community Care Services LLC. Not separated by Hep C/HIV designation.													\$1,206,670.53	Subtotal
													\$270,064.17	Proj Labcorp SFYE need based on 11/18/19-3/18/20 spending
													\$354,087.57	Proj Rx & Renew SFYE need based on Nov actuals
													\$65,406.00	Proj SFYE Phlebotomists (incl. more to finish testing)
													\$903,821.31	Additional Hep C provider
													\$556,487.00	Other outside medical costs
													\$2,149,866.05	Total H/C CF through to June 25
													2,776,203.33	Proj HIV & Rx FY needs through SFYE
													\$3,020,321.71	GL Total Proj SFYE for HIV/Hep C medication

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
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: March 5, 2020
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Heather Field, 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 INDIGENT DEFENSE SERVICES

Agenda Item Write-up:

Pursuant to NRS 353.268, the Department requests the Board's recommendation to the Interim Finance Committee for \$525,036 from Contingency Account, for use over the biennium (Fiscal Year 2020 and Fiscal Year 2021), as an effort to reach a mutually agreeable resolution in the lawsuit with the American Civil Liberties Union.

Additional Information:

The Department of Indigent Defense Services was established during the 2019 Legislative Session to provide services to rural counties and implement statewide policies for indigent defense. The American Civil Liberties Union has an open lawsuit against the state for violating the constitutional rights of people in rural counties. To assist the State in settlement discussions for the lawsuit, the department request additional funding to support an expert study of appropriate attorney workload, a data analyst to analyze rural county defender data, a training program to assist in rural indigent defense departments in meeting their constitutional obligation of providing effective assistance of counsel, and a time-keeping and caseload tracking software system. Relates to work program C50148.

Statutory Authority:

BOE approval required pursuant to NRS 353.268.

REVIEWED: _____

ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF INDIGENT DEFENSE SERVICES**

896 W. Nye, Suite 202 | Carson City, NV 89703
(775) 431-0527 | www.dids.nv.gov

Memorandum

DATE: February 13, 2020

TO: Susan Brown, Director, Governor's Finance Office, State of Nevada

FROM: Marcie Ryba, Executive Director, Department of Indigent Defense Services

SUBJECT: Request for IFC Contingency Funds

This memorandum serves as a request for approval of the Department of Indigent Defense to seek additional funding from the Interim Finance Committee Contingency Account to assist the State of Nevada in settlement discussions in *Davis v. State*. The request for additional funding of \$525,036 will cover additional projects not included in our current budget, but necessary in meeting our statutory obligations.

A breakdown of the request is as follows:

1. Projected \$295,000 to perform a Delphi expert study of appropriate attorney workload, including caseloads as authorized by the Board of Indigent Defense Services. See NRS 180.320.
2. Projected \$100,000 for a one-year contract with a data analyst to analyze rural county defender data, such as timekeeping reports.
3. Projected \$19,836 to provide a training program that assists rural indigent defense providers in meeting their constitutional obligation to provide effective assistance of counsel. Such training will be both in person and via video and will cover topics such as the obligations of the Department of Indigent Defense Services, the minimum standards imposed for practicing in the area of indigent defense, and related best practices.
4. Projected \$110,200 to contract with LegalServer, or a like software company, as a time-keeping and caseload-tracking system for use throughout the rural counties.

We respectfully request submission of this to the April Board of Examiners and Interim Finance Committee meetings. A work program is in process for this request.

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
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: March 5, 2020
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Jim Rodriguez, 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.

JUDICIAL DISCIPLINE COMMISSION

Agenda Item Write-up:

Pursuant to NRS 353.268, the Commission requests the Board's recommendation to the Interim Finance Committee for \$49,593 from Contingency Account, to cover the cost of judicial discipline investigations.

Additional Information:

The Nevada Commission on Judicial Discipline is tasked with adopting rules of procedure for the conduct of its hearings and other procedural rules necessary to carry out its duties as imposed by Section 21(7) of Article 6 of the Constitution of Nevada. The Commission provides the process commonly used to investigate and discipline all levels of the judiciary in Nevada, for violations of the Revised Nevada Code of Judicial Conduct.


The Commission indicates that Over the last two years, the Commission has been inundated with numerous legal actions filed with the Commission in connection with ongoing judicial discipline cases, as well as several writs and appeals filed with the Nevada Supreme Court. Over the last year, the Commission has also experienced a significant increase in the number of complaints requiring an investigation. So far, in Fiscal Year 20 alone, the Commission has, or is in the process of, investigating twenty (20) complaints, nearly double the amount in all Fiscal Year 19 combined.

To date, the Commission has expended \$115,417 (or 78 percent) of its budget amount of \$148,164 for these investigations. From July 2019 through January 2020 (7 months) the agency indicates it was working on as many as 7 active cases expending a total of \$80,366. The agency projects that an additional 14 cases will require investigative services totaling \$200,747 for the remainder of the fiscal year (5 months) in addition to the ongoing 7 investigations it is currently conducting. The agency's request for funding has been adjusted to reflect savings identified in its Personnel Services and Training categories.

Work program C49851 has been developed and contains detailed backup supporting its request.

Statutory Authority:

BOE approval required pursuant to NRS 353.268.

REVIEWED: 
ACTION ITEM: _____



GARY VAUSE
Chairman

STEFANIE HUMPHREY
Vice-Chair

State of Nevada
COMMISSION ON JUDICIAL DISCIPLINE
P.O. Box 48
Carson City, Nevada 89702
Telephone (775) 687-4017 • Fax (775) 687-3607
Website: <http://judicial.nv.gov>

PAUL C. DEYHLE
*General Counsel and
Executive Director*

MEMORANDUM

DATE: February 3, 2020

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

THROUGH: Jim Rodriguez, Executive Branch Budget Officer

FROM: Paul C. Deyhle, General Counsel & Executive Director

SUBJECT: Request for IFC Contingency Funds

The Commission on Judicial Discipline ("Commission") is a constitutional office and is operated from a General Fund budget account. While its constitutional mandate is the discipline of judges, its primary role is to protect the public. This significant duty can be very unpredictable with respect to the types of complaints that are received by the Commission and the type of conduct that is investigated and adjudicated.

Over the last two years, the Commission has been inundated with numerous legal actions filed with the Commission in connection with ongoing judicial discipline cases, as well as several writs and appeals filed with the Nevada Supreme Court. These types of legal proceedings require a significant amount of resources to respond to and address. During the current fiscal year, the Commission has been involved in three (3) separate cases before the Nevada Supreme Court, two (2) of which are currently ongoing. In December, the Commission held a 2-day suspension hearing regarding two judges due to the concern that the judges posed a substantial threat of serious harm to the administration of justice and the public. The investigations and hearing regarding these two judges required substantial resources. These cases remain open and the investigations are ongoing.

Over the last year, the Commission has also experienced a significant increase in the number of complaints requiring an investigation. So far, in Fiscal Year 20 alone, the Commission has, or is in the process of, investigating twenty (20) complaints, nearly double the amount in all Fiscal Year 19 combined. Several of these investigations have involved extremely complex allegations and circumstances and have consumed much of the Commission's case-related financial resources. With fourteen (14) cases currently pending at either the investigative, adjudicative or appellate

phase, the Commission is projecting a significant shortfall in its operating category. Some of these pending cases are quickly approaching the statute of limitations deadline and action must be taken prior to the end of Fiscal Year 20. Ensuring that the Commission is appropriately funded to carry out its mandate is crucial.

The Commission is also projecting a minor shortfall in its Information Services category due to unforeseen circumstances related to relocating its server to EITS' facility and making adjustments to equipment and the network to ensure all IT components are up-to-date, supported and functioning at optimum levels.

Based on the foregoing, the Commission respectfully requests to be placed on the April BOE and April IFC meeting agendas to address its projected budgetary shortfall in the amount of \$49,593. Attached are updated projections and other back-up documentation.

The Commission takes its mandate to protect the public very seriously and does not believe it would be appropriate or in the best interest of the public to halt or delay judicial discipline proceedings due to a nominal budget shortfall. As in years past, the Commission has returned all unspent funds to the General Fund. If any of these contingency funds are unspent, the same will hold true.

State of Nevada Work Program

WP Number: C49851

FY 2020

BUDGET DIVISION USE ONLY

DATE _____APPROVED ON BEHALF OF

THE GOVERNOR BY

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
02/28/20	101	220	1497	JUDICIAL DISCIPLINE

Funds Available

Budgetary GLs (2501 - 2599)	Description	WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
			4654	TRANSFER FROM INTERIM FINANCE	49,593	0	49,593
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		49,593		49,593
Total Budgetary & Revenue GLs					49,593		

Expenditures

[illegible]

Sub Total Category Expenditures

49,593

Remarks

The purpose of the work program is to request additional authority from the IFC contingency fund, to address the projected shortfall on the Operating category due to the increased number of judicial discipline cases and the Information Services category due to the need to replace a non functional switch.

Total Budgetary General Ledgers and Category Expenditures (AP)

49,593

jkidd

Authorized Signature

02/28/20

Date _____

Controller's Office Approval

Does not require Interim Finance approval since Requests Interim Finance Contingency Account funds.

State of Nevada
Work Program Packet Checklist

- ✓ Work program form
- ✓ Work program packet checklist
- ✓ Cumulative modification worksheet
- ✓ Cover Page detailing the reasons for the revision, benefits to the division, department and state and consequences if not approved
- ✓ Financial/Budget Status Reports (current)
- ✓ Budget projections with corresponding detail
- ✓ Fund map reflecting amounts before and after the revision
- ☐ NPD 19 (If requesting new position) **include copy of current organizational chart w/proposed change**
- ☐ Quotes for the purchase of unbudgeted items (i.e., equipment, computers, etc.)
- ☐ Spreadsheets/detailed calculations supporting request

WORK PROGRAM REVISIONS INVOLVING GRANTS MUST ALSO INCLUDE

- ☐ Grant history/reconciliation form for grants
- ☐ Copies of all grant awards for the current year listed on the grant reconciliation form
- ☐ Copy of grant budget - if applicable
- ☐ Summary of the grant program and purpose if not included in the grant award document

IFC determination evaluation (reason work program does or does not require IFC approval indicated with an X)

Requires IFC approval because

- | | |
|---|--|
| <input type="checkbox"/> \$75,000 or more cumulative for an expenditure category | <input type="checkbox"/> Exceeds \$30,000 cumulative and is 10% or more cumulative for an expenditure category |
| <input type="checkbox"/> Involves the allocation of block grant funds and the agency is choosing to use the IFC meeting for the required public hearing per NRS 353.337 | <input type="checkbox"/> Non-governmental grant or gift in excess of \$20,000 |
| <input type="checkbox"/> Includes new positions | <input type="checkbox"/> Other: |

Does not require IFC approval because

- | | |
|---|--|
| <input type="checkbox"/> \$30,000 or less cumulative for each expenditure category | <input type="checkbox"/> Places funds in Reserves, Reserve for Reversion, or Retained Earnings categories only |
| <input type="checkbox"/> Less than \$75,000 cumulative and 10% cumulative for each expenditure category | <input type="checkbox"/> Non-executive budget |
| ✓ Other: Requests Interim Finance Contingency Account funds. | <input type="checkbox"/> Implements general/highway fund salary adjustments approved by the BOE |

**STATE OF NEVADA
JUDICIAL DISCIPLINE COMMISSION**

**Budget Account 1497 - JUDICIAL DISCIPLINE
Work Program C49851
Fiscal Year 2020**

Submitted February 28, 2020

Budget Account's Primary Purpose, Function and Statutory Authority

The Nevada Commission on Judicial Discipline (Commission) was created by constitutional amendment on November 2, 1976 and charged with the responsibility of investigating allegations of misconduct, violations of the code of judicial conduct, or disability of judges. The seven-member Commission receives and investigates complaints against full-time and part-time judges, judicial officers and aspirants to judicial office. For a time, the Commission's proceedings were governed by administrative and procedural rules of the Nevada Supreme Court. However, on February 21, 2003, the Nevada Supreme Court repealed Part VII of its rules and the Commission has since adopted its own procedural rules to govern its proceedings. Constitutional Authority: Nevada Constitution, Art. 6, Section 21.

The Standing Committee on Judicial Ethics (Standing Committee) was created in 1998 by Supreme Court Rule to resolve ethical disputes arising in the course of campaigns for judicial office. It also provides judges and aspirants to judicial office advisory opinions regarding ethical matters that may arise in the ordinary course of judicial service or in the elective or appointment process. In 2011, the Nevada Supreme Court repealed a section of the rule and eliminated the need for the Standing Committee to resolve ethical disputes arising in the course of campaigns for judicial office. The Standing Committee continues to consider opinion requests regarding ethical matters that may arise in the ordinary course of judicial service or in the elective or appointment process. The Standing Committee also assists the Nevada Supreme Court by studying and recommending additions to, amendments to, or repeal of provisions of the Revised Nevada Code of Judicial Conduct or other laws governing the conduct of judges and judicial candidates. Statutory Authority: NRS 1.425 to 1.4695, inclusive. Rule Authority: Nevada Supreme Court's Inherent Power to Make Rules.

Purpose of Work Program

The purpose of the work program is to request additional authority from the IFC contingency fund, to address the projected shortfall on the Operating category due to the increased number of judicial discipline cases and the Information Services category due to the need to replace a non functional switch.

Justification

Over the last year, the Commission has experienced a significant increase in the number of complaints requiring an investigation. So far in fiscal year 2020, the Commission has, or is in the process of, investigating 20 complaints, nearly double the amount in all fiscal year 2019 combined. Several of these investigations have involved extremely complex allegations and circumstances and have consumed much of the Commission's case related financial resources. With 14 cases currently pending at either the investigative, adjudicative, or appellate phase, the Commission is projecting a significant shortfall in its Operating category. Some of these pending cases are quickly approaching the statute of limitations deadline and action must be taken prior to the end of fiscal year 2020. These cases require a significant amount of financial resources to investigate and adjudicate in a short period of time. Also, the Operating category, projects a shortfall on the EITS phone line and voicemail line item, changed correctly during an EITS audit.

Additionally, the Commission is projecting a shortfall in the Information Services category due to the fact that some of actual EITS expenditures are higher than budgeted, and the need for the agency to replace an old switch that was causing problems with the network, per EITS recommendation.

Expected Benefits to be Realized

The expected benefit to be realized is to ensure that the agency has the resources to fulfill its responsibility of investigating allegations of misconduct, violations of the code of judicial conduct, or disability of judges.

Explanation of Projections and Documentation

The attached documentation includes:

Budget Status Report - showing current authority, revenue, and obligations

Financial Status Report - showing current and projected budget projections and ending balances

Fund Map - showing current authority and proposed changes

Converge Quote - Shows price of Switch for additional category 26 projection

Case related costs - showing what is projected to be spent on pending cases for the year.

Letter request for Contingency Funds.

New Positions: No

Summary of Alternatives and Why Current Proposal is Preferred

The alternative is to deny this work program, however the Commission is mandated to protect the public by disciplining judges. This would put the state and public at a potentially substantial risk especially as the statute of limitation for several of these cases are approaching. Approval of this work program will allow The Judicial Discipline Commission to meet its contractual obligations and pay for services provided in relation to the pending cases in a timely manner.

**STATE OF NEVADA WORK PROGRAM
JUDICIAL DISCIPLINE COMMISSION
JUDICIAL DISCIPLINE
B/A 1497 SFY20**

	REVENUES	Original or Legislatively Approved Work Program	PENDING	-----CUMULATIVE-----		Total Amount
			FIRST			
			Work Program Change	Dollar Change	Percent Change	
			WP # C49851			
G.L.#	Description					
2501	APPROPRIATION CONTROL	960,109		0	0.0%	960,109
4654	TRANSFER FROM INTERIM FINANCE	0	49,593	49,593	100.0%	49,593
	Total Revenues	960,109	49,593	49,593	5.2%	1,009,702
	EXPENDITURES					
Cat	Description					
01	PERSONNEL	672,448	49,593	0	0.0%	672,448
02	OUT-OF-STATE TRAVEL	1,047		0	0.0%	1,047
03	IN-STATE TRAVEL	35,534		0	0.0%	35,534
04	OPERATING EXPENSES	187,092		49,593	26.5%	236,685
26	INFORMATION SERVICES	19,728		0	0.0%	19,728
30	TRAINING	15,308		0	0.0%	15,308
82	DEPARTMENT OF ADMINISTRATION CST ALLOC	26,953		0	0.0%	26,953
87	PURCHASING ASSESSMENT	272		0	0.0%	272
89	AG COST ALLOCATION PLAN	1,727		0	0.0%	1,727
	Total Expenditures	960,109	49,593	49,593	5.2%	1,009,702

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
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: March 18, 2020

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

From: Bridgette Mackey-Garrison, Executive Branch Budget Officer 

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 MOTOR VEHICLES – ADMINISTRATIVE SERVICES

Agenda Item Write-up:

Pursuant to the contract #21527 section 17.1.5 for services of independent contractor between the State of Nevada and contracted vendor Idemia Identity & Security USA LLC, any increase in the price per card requires approval of the Board of Examiners (BOE). The department is requesting a price per card increase from \$2.16 per card to \$3.0704 or \$3.1039.

Additional Information:

The original contract provides full-service credential print solution with facial recognition components at a cost per card of \$2.16. This amendment adds the following optional security features in the card design:

- Dynamic Look-Through Element
- Line Encryption
- Variable Laser Perforation
- Laser Ablation Tactile Feature to the Credential Design

Postage costs were also included in this amendment. Depending on the originating facility currently postage costs are at the rate of \$0.4204 if originating from the Springfield facility and \$0.4539 if originating from the Sacramento facility.

As a result of the above, the current price per card, plus postage costs, is \$3.0704 or \$3.1039, depending on originating facility.

Statutory Authority:

NA

REVIEWED: _____

ACTION ITEM: _____

CETS #:	21527
Solicitation #:	81DMV-S278

AMENDMENT # 1

TO CONTRACT FOR SERVICES OF INDEPENDENT CONTRACTOR

Between the State of Nevada
Acting By and Through Its

Agency Name:	Department of Motor Vehicles
Address:	555 Wright Way
City, State, Zip Code:	Carson City, Nevada, 89711
Contact:	Zachary Cord
Phone:	775-684-4778
Fax:	775-684-4563
Email:	ZCord@dmv.nv.gov

Contractor Name:	Idemia Identity & Security USA, LLC
Address:	296 Concord Rd Ste 300
City, State, Zip Code:	Billerica, Ma, 01827
Contact:	Pedro Barreda, Client Executive Director
Phone:	512-636-4409
Fax:	n/a
Email:	Pedro.Barreda@us.idemia.com

- AMENDMENTS.** For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract resulting from Request for Proposal #81DMV-S278 and dated 03/12/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following changes are made pursuant to Attachment EE:

A. Provide a brief explanation for contract amendment.

This contract amendment adds Attachment EE - Revised State Solicitation or RFP 81DMV-S278 and Amendments #1, and Contractors Response to make the following revisions:

4. Scope of Work - This amendment adds provisions to the Scope of Work section to carry over fees and costs set forth in the "Previous Contract" with Morphotrust USA Inc DBA (aka Idemia Identity & Security USA) and included a copy of this original contract to the new contract under Attachment FF - Morphotrust USA CETS contract #CONV4950. Also, the implementation date has been revised to read "The Department and the Awarded Contractor has mutually agreeing to have the Draft Credential Concepts Document to be delivered and approved by 1/31/2020".

4.5 Personalized Labels - This amendment deletes Personalized Labels sections along with removes Attachment BB completely.

4.12.2.4 Data Migration - Revises the implementation dates for the records migration from the current system to the new Issuance 360 Back Office Facial Recognition (FR) Solution from December 31, 2019 to July 31, 2020. Provisions within the proposed Preliminary Project Plan have been revised to describe timelines used to approve changes within the program plan.

8.1.3 Initial Project Plan-Adds language that all changes & decisions must be updated throughout the course of the project lifecycle and all changes incorporated into the plan within ten (10) business days from five (5) calendar days.

CETS #:	21527
Solicitation #:	81DMV-S278

8.1.1 Equipment, Accessories, and Software Installation- An implementation date of the Final Installation Schedule has been revised from sixty (60) calendar days prior to December 31, 2019 to thirty-one (31) calendar days, or another time as agreed upon by both parties, prior to July 31, 2020.

9. Project Plan- Adds additional language describing the Contractor's Project Manager and the Department's Project Manager's responsibilities and activities throughout the project.

17.1 Per Card Costs revised to read **17.1 Security Features and Per Card Cost** - This sections added certain optional security features to the Card Design along with added the "Laser Ablation Tactile Feature" Credential Design. These additional features increased the cost per card from \$2.16 to \$2.65. The parties acknowledge that currently postage costs are at the rate of \$0.4204 if originating from the Springfield facility and \$0.4539 if originating from the Sacramento facility. As a result of the above, the current price per card, plus postage costs, is \$3.0704 or 3.1039, depending on originating facility.

28. Performance Standards and Liquidated - Revises Table 1 for Performance Standard - Task 1- The implement date from December 31, 2019 to July 31, 2020.

B. Current Contract Language:

5. **INCORPORATED DCOUMENTS.** The parties agree that this contract, inclusive of the following attachments, specifically describe the scope of work. This contract incorporates the following attachments in descending order of constructive precedence:

Attachment AA: Negotiated/Clarifying Items
Attachment BB: State Solicitation or RFP 81DMV-S278 and Amendments #1
Attachment CC: Insurance Schedule
Attachment DD: Contractors Response

6. **CONSIDERATION.** The parties agree that Contractor will provide the services specified in Section 5, Incorporated Documents at a cost as noted below:

The parties agree that Contractor will provide the services in accordance with Attachment DD - Contractor's Response at a total cost not to exceed \$50,224,303.50.

The State does not agree to reimburse Contractor for expenses unless otherwise specified in the incorporated attachments. Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the result of legislative appropriation may require.

C. Amended Contract Language:

5. **INCORPORATED DCOUMENTS.** The parties agree that this contract, inclusive of the following attachments, specifically describe the scope of work. This contract incorporates the following attachments in descending order of constructive precedence:

Attachment EE: Revised State Solicitation or RFP 81DMV-S278 and Amendments #1, and Contractors Response
Attachment AA: Negotiated/Clarifying Items
Attachment FF: CONV4950 – MORPHOTRUST CONTRACT (incorporated only to extent provided in Attachment EE)
Attachment BB: State Solicitation or RFP 81DMV-S278 and Amendments #1
Attachment CC: Insurance Schedule
Attachment DD: Contractors Response

6. **CONSIDERATION.** The parties agree that Contractor will provide the services specified in Section 5, Incorporated Documents at a cost as noted below:

CETS #:	21527
Solicitation #:	81DMV-S278

- I. The total Contract or installments payable are not to exceed the total contract maximum price of fifty million two hundred twenty-four thousand three hundred three dollars and fifty cents (\$50,224,303.50).
 - a. The original price per card under Attachment DD is \$2.16.
 - b. As a result of the addition of the optional features as provided in Section 1.A of Attachment EE, the Price Per Card is increased by \$0.41 (consistent with the option pricing in Attachment DD) and, as a result of the addition of the Laser Ablation Tactile Feature as provided in 2.B of Attachment EE, the Price Per Card is hereby increased by an additional \$0.08, for a total increase of \$0.49, from \$2.16 to \$2.65.
 - c. Notwithstanding paragraph II of this Section 6, postage costs shall be invoiced as provided in Section 17.1.6. of Attachment BB. The parties acknowledge that currently postage costs are at the rate of \$0.4204 if originating from the Springfield facility and \$0.4539 if originating from the Sacramento facility.
 - d. As a result of the (a)-(c) above, the current price per card, plus postage costs, is \$3.0704 or 3.1039, depending on originating facility.
 - II. The State does not agree to reimburse Contractor for expenses unless otherwise specified in the incorporated attachments. Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the result of legislative appropriation may require.
2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.
 3. **REQUIRED APPROVAL.** This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Item #	Reference Section	For Informational Purposes Only	Cost
1	4.2	General Credential Requirements (e.g. Design Changes, Compromised Security Feature Replacement, etc.)	\$1.62
2	4.2	Card Stock - Zephyr	Included in Base Price
3	4.2	Three Level 1 Security Feature Requirements	Included in Base Price
4	4.2	Three Level 2 Security Feature Requirements	Included in Base Price
5	4.2	One Level 3 Security Feature Requirement	Included in Base Price
6	4.3	Electronic Credential	
7	4.5	Personalized Labels (Removed from Scope)	-\$0.02
8	4.6	Credential Carrier Form	\$0.01
9	4.7	Image Capture Client	\$0.25
10	4.8	Mobile Capture Client	\$0.01
11	4.9	Image Retrieval Client	\$0.05
12	4.10	Credential Portal	\$0.20
13	4.11	Custom Puls	Included in Base Price
14	4.12	Facial Recognition	Included in Base Price
15	4.13	Mailing	Included in Base Price
16	4.20	Reports	Included in Base Price
17		Other Implementation Costs (Implementation Costs Not Captured in 1-16)	Included in Base Price
18		Post Implementation Costs (e.g. Service Request, Maintenance, Meeting Allocations, General Administrative)	Included in Base Price
		"PER CARD" SUB-TOTAL	\$2.14
Item #	Reference Section	For Informational Purposes Only	Cost
1	Confidential		
2	Technical	Optional Zephyr Security Feature 1 - Laser Ablation Tactile Feature	\$0.10
3		Optional Zephyr Security Feature 2 - Dynamic Look Through Element	\$0.22
4		Optional Zephyr Security Feature 3 - Line Encryption	\$0.07
		Optional Zephyr Security Feature 4 - Variable Laser Perforation (Upgrade from Static Image Laser Perforation)	\$0.12
		"PER CARD" SUB-TOTAL	\$2.65
5		2020 Total w/postage and pre-sort for Sacramento factory	\$.4539
		Sacramento "PER CARD" TOTAL	\$3.1039

DMV IDEMIA Contract #21527 Amendment #1 _ Price Per Card Breakdown.docx
 Tuesday, March 31, 2020

Item #	Reference Section	For Informational Purposes Only	Cost
1	4.2	General Credential Requirements (e.g. Design Changes, Compromised Security Feature Replacement, etc.)	\$1.62
2	4.2	Card Stock - Zephyr	Included in Base Price
3	4.2	Three Level 1 Security Feature Requirements	Included in Base Price
4	4.2	Three Level 2 Security Feature Requirements	Included in Base Price
5	4.2	One Level 3 Security Feature Requirement	Included in Base Price
6	4.3	Electronic Credential	Included in Base Price
7	4.5	Personalized Labels (Removed from Scope)	-\$0.02
8	4.6	Credential Carrier Form	\$0.01
9	4.7	Image Capture Client	\$0.25
10	4.8	Mobile Capture Client	\$0.01
11	4.9	Image Retrieval Client	\$0.05
12	4.10	Credential Portal	\$0.20
13	4.11	Custom Pulls	Included in Base Price
14	4.12	Facial Recognition	Included in Base Price
15	4.13	Mailing	Included in Base Price
16	4.20	Reports	Included in Base Price
17		Other Implementation Costs (Implementation Costs Not Captured in 1-16)	Included in Base Price
18		Post Implementation Costs (e.g. Service Request, Maintenance, Meeting Allocations, General Administrative)	Included in Base Price
		"PER CARD" SUB-TOTAL	\$2.14
Item #	Reference Section	For Informational Purposes Only	Cost
1	Confidential	Optional Zephyr Security Feature 1 - Laser Ablation Tactile Feature	\$0.10
2		Optional Zephyr Security Feature 2 - Dynamic Look Through Element	\$0.22
3		Optional Zephyr Security Feature 3 - Line Encryption	\$0.07
4		Optional Zephyr Security Feature 4 - Variable Laser Perforation (Upgrade from Static Image Laser Perforation)	\$0.12
		"PER CARD" SUB-TOTAL	\$2.65
5		2020 Total w/postage and pre-sort for Sacramento factory	\$4539
		Sacramento "PER CARD" TOTAL	\$3,1039
6		2020 Total w/postage and pre-sort for Billerica (Disaster Recovery) factory	\$4498
		Billerica "PER CARD" TOTAL	\$3,0998

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: March 12, 2020

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

From: Michele Lynn, 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.

GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION

Agenda Item Write-up:

Pursuant to NRS 353.040 the Governor's Finance Office – Budget Division requests modifications to the policies and procedures of the State Board of Examiners adopted and collected in the following section of the State Administrative Manual (SAM).

1. SAM Section 100 – Agency Attendance and Notification

Additional Information:

Request for changes to the SAM and recommended language attached.

Statutory Authority:

NRS 353.040

REVIEWED: _____

ACTION ITEM: _____

0104 Agency Attendance and Notification

BOE agenda action items (items denoted as *For Possible Action*) require attendance by appropriate agency staff to present their items. Agencies must also be prepared to present information regarding leases, contracts and Master Service Agreements, which may be pulled on a case by case basis by any Board Member without prior notice. Any Board Member, who wishes to pull an agenda item for discussion, particularly items generally taken on a consent basis such as leases, contracts and Master Service Agreements, shall notify the Clerk of the Board prior to the BOE meeting of the items he/she wishes to be pulled for discussion.

The Clerk of the BOE or his or her designee shall use their best efforts to notify the appropriate agency of any agenda item(s) that have been identified by a member of the Board as an item for discussion. However, any agency with an item noted as *For Possible Action* regardless of whether they receive notice that the item has been pulled for discussion, should have the appropriate staff member(s) present at the BOE meeting to respond to Board Members' questions.

0104 Agency Attendance and Notification

BOE agenda action items (items ~~preceded by an asterisk on the agenda~~ noted as For Possible Action) require attendance by appropriate agency staff to present their items ~~(NRS 353.035)~~.

Agencies must also be prepared to present information regarding leases, contracts and Master Service Agreements, which may be pulled on a case by case basis by ~~any~~ Board Member ~~without prior notice~~. Any Board Member, who wishes to pull an agenda item for discussion, particularly items generally taken on a consent basis such as leases, contracts and Master Service Agreements, shall notify the Clerk of the Board prior to the BOE meeting of the items he/she wishes to be pulled for discussion.

The Clerk of the BOE or his or her designee shall use their best efforts to notify the appropriate agency of any agenda item(s) that have been identified by a member of the Board as an item for discussion. ~~However, Any~~ agency with an item noted as For Possible Action regardless of whether they receive notice that the item has been pulled for discussion, should have the appropriate staff member(s) present at the BOE meeting to respond to Board Members' questions.

~~The agency is not required to attend the BOE meeting if an agency's only agenda items are leases, contracts, Master Service Agreements, or information items and they are not contacted by the Clerk of the Board or his/her designee regarding additional item(s) identified for discussion.~~

LEASES SUMMARY

BOE #	LESSEE		LESSOR	AMOUNT
1.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – AGING AND DISABILITY SERVICES DIVISION		MORRIS-MORRIS, LLC	\$42,624
		This is a new lease to accommodate new staff for the agency.		
		Term of Lease:	07/01/2020 – 06/30/2023	Located in Mesquite
2.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH		FLAMINGO OAKWOOD, LLC	\$638,506
		This is an extension of an existing lease.		
		Term of Lease:	04/01/2020 – 03/31/2027	Located in Las Vegas
3.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF WELFARE AND SUPPORTIVE SERVICES		SYNERGY NV, LLC	\$100,584
		This is an extension of an existing lease.		
		Term of Lease:	05/01/2020 – 04/30/2025	Located in Hawthorne
4.	DEPARTMENT OF INDIGENT DEFENSE SERVICES		AVALON NEVADA INVESTMENTS, LLC	\$97,028
		This is an extension of an existing lease.		
		Term of Lease:	05/01/2020 – 04/30/2025	Located in Carson City
5.	DEPARTMENT OF MOTOR VEHICLES		MESQUITE CENTER NEVADA, LLC	\$176,427
		This is an extension of an existing lease.		
		Term of Lease:	05/01/2020 – 04/30/2025	Located in Mesquite
6.	DEPARTMENT OF SENTENCING POLICY		HUB GROUP, LLC	\$42,264
		This lease was negotiated to house the new Sentencing Policy office.		
		Term of Lease:	05/01/2020 – 04/30/2025	Located in Carson City
7.	GOVERNOR'S OFFICE OF ENERGY		BOAC, LTD.	\$389,729
		This relocation lease was negotiated to better serve the agency and to reduce the square footage.		
		Term of Lease:	05/01/2020 – 06/30/2027	Located in Carson City

LEASES SUMMARY

BOE #	LESSEE		LESSOR		AMOUNT
8.	NEVADA STATE BOARD OF PHARMACY		RYDER-DUDA VENTURES, LLC		0
		This amendment changes the start and end dates only.			
		Term of Lease:	01/01/2019 – 12/31/2024	Located in Reno	
9.	PUBLIC DEFENDER'S OFFICE		MARIE BIGUE		\$ 393,303
		This is an extension of an existing lease.			
		Term of Lease:	06/01/2020 – 05/31/2027	Located in Carson City	

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>98 3/6/20</i>
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:

Department of Health and Human Services
Aging and Disability Services Division, Rural Regional Center
3416 Goni Road, Bldg. D-132, Fiscal
Carson City, Nevada 89706
Lisa Tuttle
T: 775.687.0532 F: 775.687.0573 E: lrtuttle@adsd.nv.gov

Remarks:

Leasing Services negotiated this **new lease** to accommodate the expansion of the Rural Regional staff in Mesquite, Nevada

Exceptions/Special notes:

2. Name of Lessor:

Morris-Morris, LLC

3. Address of Lessor:

855 Valley View Drive
Mesquite, Nevada 89027

4. Property contact:

Dr. Larry Morris
T: 435.229.8426 F: 435.628.0633 E: larrymorris_855@hotmail.com

5. Address of Lease property:

61 North Willow Street, Suite 6
Mesquite, Nevada 89027

a. Square Footage:

☐ Rentable
☒ Usable

800

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
\$ 1,176.00	12	\$ 14,112.00	July 1, 2020 - June 30, 2021	\$ -	\$ -	\$1.47
0% \$ 1,176.00	12	\$ 14,112.00	July 1, 2021 - June 30, 2022	\$ -	\$ -	\$1.47
2% \$ 1,200.00	12	\$ 14,400.00	July 1, 2022 - June 30, 2023	\$ -	\$ -	\$1.50

Increase %

0%
2%

c. Total Lease Consideration:

36 \$ 42,624.00

d. Total Improvement Cost:

\$ -

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:

Three (3) 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:

\$1.61

m. Specific termination clause in lease:

Breach/Default lack of funding

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

3167

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: \$2,406.00

Data/Phones: \$862.00

RECEIVED

MAR - 5 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

 for Dana Schmitt 2/24/2020
Authorized Agency Signature Date


For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV19981033487	Exp:	6/30/2020	2
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:	T81042555			
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

 3/3/20
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: <i>ARE</i>	<i>3/10/20</i>
Reviewed by: <i>SMU</i>	<i>3/19/2020</i>
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Public and Behavioral Health Radiation Control Program 4150 Technology Way, Suite 300 Carson City, Nevada 89706 Tessa Grundy T: 775.684.5915 F: 775.684.4211 E: contractunit@health.nv.gov						
Remarks:	Leasing Services negotiated this Full Service lease extension to include a rent reduction, creating a savings of \$5,870.28 in the first year.						
Exceptions/Special notes:	Lessor to install new carpet and paint, at Lessor's sole expense.						
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:	2080 East Flamingo Road, Suite 319 Las Vegas, Nevada 89119						
a. Square Footage:	<input checked="" type="checkbox"/> Rentable <input type="checkbox"/> Usable 3,763						
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 %	\$ 7,149.70	12	\$ 85,796.40	April 1, 2020 - March 31, 2021	\$0.00	\$0.00	\$1.90
2%	\$ 7,300.22	12	\$ 87,602.64	April 1, 2021 - March 31, 2022	\$0.00	\$0.00	\$1.94
2%	\$ 7,450.74	12	\$ 89,408.88	April 1, 2022 - March 31, 2023	\$0.00	\$0.00	\$1.98
2%	\$ 7,601.26	12	\$ 91,215.12	April 1, 2023 - March 31, 2024	\$0.00	\$0.00	\$2.02
2%	\$ 7,751.78	12	\$ 93,021.36	April 1, 2024 - March 31, 2025	\$0.00	\$0.00	\$2.06
2%	\$ 7,902.30	12	\$ 94,827.60	April 1, 2025 - March 31, 2026	\$0.00	\$0.00	\$2.10
2%	\$ 8,052.82	12	\$ 96,633.84	April 1, 2026 - March 31, 2027	\$0.00	\$0.00	\$2.14
c. Total Lease Consideration:	84		\$ 638,505.84				
d. Total Improvement Cost:					\$	-	
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:	Seven (7) 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 checked="" type="checkbox"/> 5 day <input 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:	\$2.09						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3101						
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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MAR - 6 2020

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

Christin Haduik 2/26/20
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	10
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

Patrick
Authorized Signature
Public Works Division

3/5/20
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: March 13, 2020

To: Aaron Franz, Budget Analyst

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

Subject: For placement on April's BOE meeting

Projected BOE Date: April 14, 2020

BOE Deadline Date: March 10, 2020

Lessor: FLAMINGO OAKWOOD, LLC

Tenant: Department of Health and Human Services, Division of Public and Behavioral Health,
Radiation Control Program

Property Location: 2080 East Flamingo Road, Suite 319, Las Vegas

This memo is a clarification for a retroactive start date of April 1, 2020 for the lease Dated January 22, 2020. This lease was negotiated to include a rent reduction with a savings of \$5,870.28 in the first year of the lease. The owner agreed to allow for an April 1, 2020 start date for new rents.

Current cost per square foot is \$2.03, the new cost will be \$1.90.

The only state space in Las Vegas is in the northern geographical location of the city, which does not encompass this address.

Thank you,

Leanne Lima

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> 2/13/2020
Reviewed by:	<i>[Signature]</i> 2/13/2020
Reviewed by:	<i>[Signature]</i> 2/13/2020

STATEWIDE LEASE INFORMATION

1. Agency:

Department of Health and Human Services
Division of Welfare and Supportive Services
1470 College Parkway
Carson City, Nevada 89706
Tomi Casey
(775) 684-0770 fax: (775) 684-0627 tocasey@dwss.nv.gov

Remarks:

After attempting to secure an alternate location within Hawthorne which would better serve DWSS needs, Leasing Services negotiated this lease renewal at the existing rate with a lower rate of increase over the five (5) year term than the current lease agreement.

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MAR 10 2020

Exceptions/Special notes:

2. Name of Lessor:

Synergy NV, LLC

3. Address of Lessor:

PO Box 2410
Minden, Nevada 89423

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

4. Property contact:

Cole S. Smith
Sierra Nevada Realty Group Inc.
PO Box 2410
Minden, Nevada 89423
(775) 690-2916 fax: (775) 782-5180 cole@e-snrg.com

5. Address of Lease property:

1000 C Street
Hawthorne, Nevada 89415

a. Square Footage:

☐ Rentable
☒ Usable 1,723

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	Approxi-mate cost per square foot
\$ 1,636.85	12	\$ 19,642.20	May 1, 2020 - April 30, 2021	0.00	0.00	\$0.95
2% \$ 1,669.59	12	\$ 20,035.08	May 1, 2021 - April 30, 2022	0.00	0.00	\$0.97
0% \$ 1,669.59	12	\$ 20,035.08	May 1, 2022 - April 30, 2023	0.00	0.00	\$0.97
2% \$ 1,702.98	12	\$ 20,435.76	May 1, 2023 - April 30, 2024	0.00	0.00	\$0.99
0% \$ 1,702.98	12	\$ 20,435.76	May 1, 2024 - April 30, 2025	0.00	0.00	\$0.99

Increase %

c. Total Lease Consideration:

60 \$ 100,583.88

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:

\$1.66

m. Specific termination clause in lease:

Breach/Default lack of funding

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

3233

6. Purpose of the lease:

To house the Department of Welfare and Supportive Services

7. 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

Furnishings: \$0

Data/Phones: \$0

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 included in base budget. Renewal

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

SAT

SAT H. P.

2/13/2020

Authorized Agency Signature

Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20131525757</u>	Exp:	<u>9/30/2020</u>	3
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>T27033757</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

9. 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

Shad D. Patrick

3/10/20

Authorized Signature
Public Works Division

Date

PS
X

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:	<i>JB 3/6/20</i>
Reviewed by:	<i>JB 3/6/20</i>
Reviewed by:	<i>JB 3/6/20</i>

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Indigent Defense Services 896 West Nye Lane, Suite 202 Carson City, Nevada 89703 Marcie Ryba T: 775.687.0138 F: 775.431.0527 E: mryba@dids.nv.gov						
Remarks:	Leasing Services negotiated this new location to house the Indigent Defense office.						
Exceptions/Special notes:	This long term lease replaces the current month to month lease.						
2. Name of Lessor:	Avalon Nevada Investments, LLC						
3. Address of Lessor:	c/o John Uhart Commercial Real Estate Property 301 West Washington Street, Suite 1 Carson City, Nevada 89703						
4. Property contact:	John Uhart T: 775.884.1896 F: 775.884.4896 E: jfuhart@ccim.net						
5. Address of Lease property:	896 West Nye Lane, Suite 202 Carson City, Nevada 89703						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 1,205						
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	Approx. Cost per square foot
Increase %	\$ 1,566.50	12	\$ 18,798.00	May 1, 2020 - April 30, 2021	\$0.00	\$0.00	\$1.30
0%	\$ 1,566.50	12	\$ 18,798.00	May 1, 2021 - April 30, 2022	\$0.00	\$0.00	\$1.30
4%	\$ 1,629.16	12	\$ 19,549.92	May 1, 2022 - April 30, 2023	\$0.00	\$0.00	\$1.35
0%	\$ 1,629.16	12	\$ 19,549.92	May 1, 2023 - April 30, 2024	\$0.00	\$0.00	\$1.35
4%	\$ 1,694.33	12	\$ 20,331.96	May 1, 2024 - April 30, 2025	\$0.00	\$0.00	\$1.41
c. Total Lease Consideration:	60		\$ 97,027.80				
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:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
l. Comparable Area Market Rate Average:	\$1.45						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1008						
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

MAR - 5 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

Margi Ryan 3/2/20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20001123053</u>	Exp:	<u>12/31/2020</u>	7
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>T32002712</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

David Patrick
Authorized Signature
Public Works Division

3/3/20
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:	
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Motor Vehicles 555 Wright Way Carson City, Nevada 89711 Gareth Jones (775) 684-4804 Fax: (775) 684-4724 gjones01@dmv.nv.gov						
Remarks:	Leasing Services negotiated this lease renewal which created a savings of \$20,822.28 or 38.05% over the first year.						
Exceptions/Special notes:							
2. Name of Lessor:	Mesquite Center Nevada, LLC						
3. Address of Lessor:	c/o Optim Property Solutions						
4. Property contact:	Optim Property Solutions 400 North Stephanie Street, Suite 205 Las Vegas, Nevada 89014 Nancy Regal (702) 938-6588 x6589 Fax: (702) 938-4388 n.regal@optimpsolutions.com						
5. Address of Lease property:	550 West Pioneer Boulevard, Unit 120 Mesquite, Nevada 89027						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 1,482 plus 150' x 50' motorcycle testing area						
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 %	\$ 2,825.15	12	\$ 33,901.80	May 1, 2020 - April 30, 2021	\$0.00	\$0.00	\$1.91
2%	\$ 2,881.65	12	\$ 34,579.80	May 1, 2021 - April 30, 2022	\$0.00	\$0.00	\$1.94
2%	\$ 2,939.29	12	\$ 35,271.48	May 1, 2022 - April 30, 2023	\$0.00	\$0.00	\$1.98
2%	\$ 2,998.07	12	\$ 35,976.84	May 1, 2023 - April 30, 2024	\$0.00	\$0.00	\$2.02
2%	\$ 3,058.03	12	\$ 36,696.36	May 1, 2024 - April 30, 2025	\$0.00	\$0.00	\$2.06
c. Total Lease Consideration:	60		\$ 176,426.28				
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 <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input 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:	\$2.50						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	4735						
6. Purpose of the lease:	To house the Department of Motor Vehicles						
7. 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		

2/8

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 _____ Date _____

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20121654997</u>	Exp:	<u>10/31/2020</u>	6
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>T29034583</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

9. 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

3/13/20
Date

PS
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:	<i>ML 3-9-2020</i>
Reviewed by:	
Reviewed by:	<i>5-10-20 JH</i>

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Sentencing Policy 625 Fairview Drive, Suite 121 Carson City, Nevada 89701 Victoria Gonzalez T: 775.684.0231 E: vfgonzalez@ndsp.nv.gov						
Remarks:	Leasing Services negotiated this new location to house the Sentencing Policy office.						
Exceptions/Special notes:	This long term lease replaces the current month to month lease.						
2. Name of Lessor:	Hub Group, LLC						
3. Address of Lessor:	c/o John Uhart Commercial Real Estate Property 301 West Washington Street, Suite 1 Carson City, Nevada 89703						
4. Property contact:	John Uhart T: 775.884.1896 F: 775.884.4896 E: jfuhart@ccim.net						
5. Address of Lease property:	625 Fairview Drive, Suite 121 Carson City, Nevada 89701						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 525						
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
Increase %	\$ 682.50	12	\$ 8,190.00	May 1, 2020 - April 30, 2021	\$0.00	\$0.00	\$1.30
0%	\$ 682.50	12	\$ 8,190.00	May 1, 2021 - April 30, 2022	\$0.00	\$0.00	\$1.30
4%	\$ 709.80	12	\$ 8,517.60	May 1, 2022 - April 30, 2023	\$0.00	\$0.00	\$1.35
0%	\$ 709.80	12	\$ 8,517.60	May 1, 2023 - April 30, 2024	\$0.00	\$0.00	\$1.35
4%	\$ 737.39	12	\$ 8,848.68	May 1, 2024 - April 30, 2025	\$0.00	\$0.00	\$1.40
c. Total Lease Consideration:	60		\$ 42,263.88				
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 <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input 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:	\$1.45						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1010						
6. This lease constitutes:	<input type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities <input type="checkbox"/> A relocation <input checked="" 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

MAR - 5 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

Victor G. Gogol 2/27/20
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20141709685</u>	Exp:	<u>11/30/2020</u>	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 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>TBD</u>			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO

9. 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

David D. Petric
Authorized Signature
Public Works Division

3/3/20
Date

W 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:	NA 3-13-20 TH 3/19/20
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:

Governor's Office of Energy
600 East William Street, Suite 200
Carson City, Nevada 89701
Pat Malloy
T: 775.687.1850 F: 775.687.1869 E: pamalloy@energy.nv.gov

Remarks:

Leasing services negotiated this relocation to better serve the agency, and reduces the square footage which created a savings of \$27,871.84 in the first year, including the abated rents.

Exceptions/Special notes:

2 months of abated rent (\$8,754.00)

2. Name of Lessor:

BOAC, Ltd.

3. Address of Lessor:

c/o NAI Alliance
1000 North Division Street, Suite 202
Carson City, Nevada 89703

4. Property contact:

Cheryl Evans
T: 775.546.2890 E: cevans@naialliance.com

5. Address of Lease property:

600 E William Street, Suites 200 and 210
Carson City, Nevada 89701

a. Square Footage:

☒ Rentable

☐ Usable 2,918

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	\$ -	May 1, 2020 - June 30, 2020	\$0.00	\$0.00	\$0.00
\$ 4,377.00	12	\$ 52,524.00	July 1, 2020 - June 30, 2021	\$0.07	\$1.43	\$1.50
2% \$ 4,464.54	12	\$ 53,574.48	July 1, 2021 - June 30, 2022	\$0.07	\$1.46	\$1.53
2% \$ 4,552.08	12	\$ 54,624.96	July 1, 2022 - June 30, 2023	\$0.07	\$1.49	\$1.56
2% \$ 4,639.62	12	\$ 55,675.44	July 1, 2023 - June 30, 2024	\$0.07	\$1.52	\$1.59
2% \$ 4,727.16	12	\$ 56,725.92	July 1, 2024 - June 30, 2025	\$0.07	\$1.55	\$1.62
2% \$ 4,814.70	12	\$ 57,776.40	July 1, 2025 - June 30, 2026	\$0.07	\$1.58	\$1.65
2% \$ 4,902.24	12	\$ 58,826.88	July 1, 2026 - June 30, 2027	\$0.07	\$1.61	\$1.68

c. Total Lease Consideration:

\$86 \$ 389,728.08

d. Total Improvement Cost:

\$16,600.00

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:

Seven (7) Years Two (2) 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:

\$1.63

m. Specific termination clause in lease:

Breach/Default lack of funding

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

4868

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: \$2,400.00

Furnishings: \$0.00

Data/Phones: \$1,125.00

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

 3/10/20
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20131405858	Exp:	7/31/2020	12
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LTD <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:	T320003817			
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

 3/10/20
Authorized Signature
Public Works Division

Date

//
For Board of Examiners ☒ YES ☐ NO

For Budget Division Use Only	
Reviewed by: 	
Reviewed by:	

**REAL PROPERTY (FOR BOARDS AND COMMISSIONS)
OR STORAGE LEASE INFORMATION**

RECEIVED

1. Agency (Lessee):	Nevada State Board of Pharmacy				
	FEB 26 2020				
	GOVERNOR'S FINANCE OFFICE BUDGET DIVISION				
Purpose:	Amendment to lease start and end date to reflect actual move in date due to a delay in tenant improvement completion. Amendment to rent schedule to reflect actual move in date and rent adjustment dates. Addition of Right of First Refusal to lease agreement. Total dollar value and length of lease remain the same as original agreement.				
Exceptions/Special Lease Terms:	1/1/2025 - 12/31/2025 - Yearly rent of \$166,614.48 - Cost/sq ft \$2.28. 1/1/2026 - 12/31/2026 - Yearly rent of \$171,612.84 - Cost/sq ft \$2.35. 1/1/2027 - 12/31/2027 - Yearly rent of \$176,761.20 - Cost/sq ft \$2.42. 1/1/2028 - 12/31/2028 - Yearly rent of \$1182,064.12 - Cost/sq ft \$2.49.				
2. Name of Landlord (Lessor):	Ryder-Duda Ventures, LLC.				
3. Address of Landlord:	985 Damonte Ranch Pkwy, Suite 140 Reno, Nevada 89521				
4. Property Contact:	Steve Thomsen 775-823-3788 steve@ryderhomes.com				
5. Address of Lease Property:	985 Damonte Ranch Pkwy, Suite 140 Reno, Nevada 89521				
a. Square Footage or Unit Description	6088 sq ft				
b. Cost:	Cost Per Month	# of Months in Time Frame	Cost Per Year	Time Frame	Cost/Square Foot
Increase %	\$11,628.08	12	\$139,536.96	1/1/2019-12/31/2019	\$1.91
	\$11,976.92	12	\$143,723.04	1/1/2020-12/31/2020	\$1.97
	\$12,336.23	12	\$148,034.76	1/1/2021-12/31/2021	\$2.03
	\$12,706.32	12	\$152,475.84	1/1/2022-12/31/2022	\$2.09
	\$13,087.51	12	\$157,050.12	1/1/2023-12/31/2023	\$2.15
c. Total Lease Consideration:	\$13,480.13	12	\$157,050.12	1/1/2024-12/31/2024	\$2.21
d. Option to Renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No \$894,870.84 Renewal Terms: One 5 year term with written notice and BOE				
e. Holdover Notice:	# of Days Required Holdover Terms: After expiration, the lease shall become a				
f. Term:	month to month lease in the amount equal to 110% of the rent payable for the last month during term.				
g. Pass-thrus/CAM/Taxes:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input 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 type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$1.75/sq ft. The landlord is amortizing \$0.16/sq ft into our rate for tenant improvements				
l. Specific termination clause in lease:	Breach/Default/Lack of Funding				
m. Lease will be paid for by Agency Budget Account Number or BOC Number:	BDC B022 - Nevada State Board of Pharmacy				
6. BOE Threshold:	N/A				
7. This lease constitutes:	<input type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input checked="" type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only				
a. Estimated Moving Expenses:	\$ 40,000	Furnishings:	\$	Data/Phones:	\$

PROPERTY OR STORAGE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE AND STORAGE 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

 2-24-2020
Authorized Agency Signature Date

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20091454220</u>	Exp: <u>10/31/2020</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:	<input checked="" type="checkbox"/> YES <input 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:		
h. <u>Is this an Arms Length Transaction</u>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

9. 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

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

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>gy 3/17/20</i>
Reviewed by:	<i>3/22/20</i>
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Public Defender's Office 511 East Robinson Street Carson City, Nevada 89701 Tosca Renner T: 775.684.1080 F: 775.687.4993 E:tmrenner@nspd.nv.gov						
Remarks:	Lessor to demo downstairs wall & door, new wall at entry, steel frame door w/ electrical strike, install 4x4 window w/voice port & stool w/cash tray, ADA restroom work, infill opening upstairs & add door, paint, carpet.						
Exceptions/Special notes:	Lessor to pay \$20,821.38 towards improvements, Tenant to pay \$8,000.00 towards improvements (not included in rent payments).						
2. Name of Lessor:	Marie Bigue						
3. Address of Lessor:	312 Helen Drive Milbrea, California 94030						
4. Property contact:	John Uhart Commercial Real Estate Property 301 West Washington Street, Suite 1 Carson City, Nevada 89701 John Uhart T: 775.884.1896 F: 775.884.4896 E:jfuhart@ccim.net						
5. Address of Lease property:	511 East Robinson Street, Suite 1 Carson City, Nevada 89701						
a. Square Footage:	<input checked="" type="checkbox"/> Rentable <input type="checkbox"/> Usable: 3,218						
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	Cost per square foot
Increase %	\$ 4,408.66	12	\$ 52,903.92	June 1, 2020 - May 31, 2021	\$0.00	\$0.00	\$1.37
2%	\$ 4,496.83	12	\$ 53,961.96	June 1, 2021 - May 31, 2022	\$0.00	\$0.00	\$1.40
2%	\$ 4,586.77	12	\$ 55,041.24	June 1, 2022 - May 31, 2023	\$0.00	\$0.00	\$1.43
2%	\$ 4,678.51	12	\$ 56,142.12	June 1, 2023 - May 31, 2024	\$0.00	\$0.00	\$1.45
2%	\$ 4,772.08	12	\$ 57,264.96	June 1, 2024 - May 31, 2025	\$0.00	\$0.00	\$1.48
2%	\$ 4,867.52	12	\$ 58,410.24	June 1, 2025 - May 31, 2026	\$0.00	\$0.00	\$1.51
2%	\$ 4,964.87	12	\$ 59,578.44	June 1, 2026 - May 31, 2027	\$0.00	\$0.00	\$1.54
c. Total Lease Consideration:	84	\$	393,302.88				
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:	Seven (7) 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 checked="" type="checkbox"/> 5 day	<input 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:	\$1.63						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1499						
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

MAR 13 2020

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

 3/6/20
Authorized Agency Signature Date

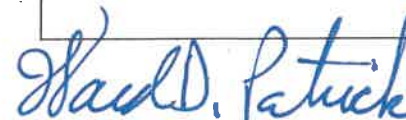
For Public Works Information:

7. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20111288529	Exp:	4/30/2020	14
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:	T32009621			
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

 3/13/20
Authorized Signature Date
Public Works Division

For Board of Examiners ☒ YES ☐ NO

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	018	GOVERNOR'S OFFICE - OFFICE OF WORKFORCE INNOVATION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION	FEDERAL	\$150,000	
	Contract Description:	This is a new interlocal agreement to provide programs to support apprenticeship activities, increase apprentices from under-represented populations and expand apprenticeship opportunities.				
		Term of Contract:	03/10/2020 - 10/31/2020	Contract # 22926		
2.	030	ATTORNEY GENERAL'S OFFICE - CONSUMER ADVOCATE	CHRISTOPHER R. VILLARREAL	FEE: REGULATORY ASSESSMENTS	\$175,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing professional services as an expert witness as well as technical expertise and support in analyzing electric and gas utilities.				
		Term of Contract:	04/14/2020 - 04/15/2024	Contract # 22903		
3.	040	SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM	CENTER FOR INTERNET SECURITY	FEDERAL	\$89,280	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides network monitoring, analysis and quarterly reporting on cybersecurity threats to county voter registration databases utilizing previously purchased Albert sensors for 12 rural Nevada counties. This amendment extends the termination date from June 30, 2020 to August 31, 2021 and increases the maximum amount from \$100,080 to \$189,360 due to the continue these services.				
		Term of Contract:	05/14/2019 - 08/31/2021	Contract # 21679		
4.	070	DEPARTMENT OF ADMINISTRATION - HUMAN RESOURCE MANAGEMENT	SIMMONS GROUP NEVADA, LLC	OTHER: INTERNAL SERVICE FUNDS	\$440,000	Professional Service
	Contract Description:	This is a new contract to provide negotiation services related to collective bargaining to ensure proper ground rules and plans are in place, in response to SB135 from the 2019 Legislative Session.				
		Term of Contract:	04/14/2020 - 06/30/2021	Contract # 22945		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS - NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	GENERAL	\$82,180	Professional Service
	Contract Description:	This is the fifth amendment to the original contract which provides professional architectural/engineering services for the Nevada State College Education Academic Building Advance Planning CIP project: CIP Project No 17-P08; SPWD Contract No. 111548. This amendment increases the maximum amount from \$1,687,341.05 to \$1,769,501.05 due to design review changes relating to Early Childhood and Speech Pathology Services space and orientation needs, the addition of a roundabout required by the City of Henderson and revision of the waterproofing membrane.				
		Term of Contract:	12/12/2017 - 06/30/2021	Contract # 19476		
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	DLR GROUP ARCHITECTURE & ENGINEERING, INC.	OTHER: INMATE WELFARE ACCOUNT	\$57,810	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the High Desert State Prison - Heavy Equipment Simulator Classrooms CIP project, to include schematic design, construction documents, bid assistance and construction administration services to construct classrooms that will house heavy equipment simulators used to train inmates in the operations and maintenance of heavy equipment: CIP Project No.19-C13; SPWD Contract No. 113248.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22914		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	PETTY & ASSOCIATES, INC.	BONDS	\$135,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for Northern Nevada Correctional Center - Housing Unit 6 Heating, Ventilation, and Air Conditioning Systems Renovation CIP project, to replace the dual-duct terminal units and a fan coil serving Housing Unit #6, Administration building, and the Operations building: CIP Project No. 19-M28; SPWD Contract No. 113361.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22975		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	CORE CONSTRUCTION SERVICES OF NEVADA, INC.	GENERAL	\$295,075	Professional Service
	Contract Description:	This is a new contract to provide 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.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22927		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS – NON-EXEC	TATE SNYDER KIMSEY ARCHITECTS, LTD DBA TSK	GENERAL	\$259,556	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Heroes Memorial Building - Advanced Planning Renovation and Seismic Retrofit CIP project, to include schematic design for seismic strengthening and a major remodel of the Heroes Memorial Building and Annex: CIP Project No. 19-P02; SPWD Contract No. 113390.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22999		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERAN'S CIP PROJECTS – NON-EXEC	DINTER ENGINEERING COMPANY	BONDS 53% FEDERAL 47%	\$63,590	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for Washoe County Armory - Install Emergency Generator CIP project, to include installation of an emergency generator, automatic transfer switch and remote monitoring control unit: CIP Project No. 19-M26; SPWD Contract No. 113389.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22961		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS – NON-EXEC	LUMOS & ASSOCIATES	GENERAL 91% FEDERAL 9%	\$264,800	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Hobart Creek Reservoir Dam - Advanced Planning CIP project, to develop the evaluation and corrective measure proposals for the Hobart Creek Reservoir Dam: CIP Project No. 19-S04B; SPWD Contract No. 113403.				
	Term of Contract:	Upon Approval - 06/30/2023	Contract # 22964			
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF MOTOR VEHICLES CIP PROJECTS – NON-EXEC	ARCHITECTS + LLC	HIGHWAY 56% BONDS 44%	\$177,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Department of Public Safety - Training Division Building Renovation CIP project, to include design construction and bid documents as well as construction administration services to refurbish/upgrades to the interior and exterior structure of the training building, the irrigation system, concrete walkways and the parking lot: CIP Project No.19-M18; SPWD Contract No.113367.				
	Term of Contract:	Upon Approval - 06/30/2023	Contract # 22931			
13.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	NAVAL FACILITIES ENGINEERING COMMAND	OTHER: REVENUE	\$13,184	
	Contract Description:	This is the third amendment to the original revenue contract which provides rack space at Austin Mountain in Lander County. This amendment extends the termination date from June 30, 2020 to June 30, 2021 and increases the maximum amount from 48,864.24 to \$62,048.32 due to continued need for these services.				
	Term of Contract:	07/01/2017 - 06/30/2021	Contract # 19158			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
14.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	NEW CINGULAR WIRELESS PCS, LLC	OTHER: REVENUE	\$51,196	
	Contract Description:	This is a new revenue contract to provide ongoing rack space at Penn Hill in Elko County.				
15.	300	DEPARTMENT OF EDUCATION - EDUCATOR EFFECTIVENESS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO UNIVERSITY OF NEVADA, LAS VEGAS	GENERAL	\$174,975	
	Contract Description:	This is a new interlocal agreement to provide an impact and validity study for Nevada's Educator Performance Framework.				
16.	300	DEPARTMENT OF EDUCATION - EDUCATOR EFFECTIVENESS	DATA INSIGHT PARTNERS, LLC	FEDERAL	\$135,000	Sole Source
	Contract Description:	This is a new contract to provide a comprehensive analysis of factors that affect Nevada class sizes, national teacher workforce characteristics, and trends to help provide context around local data.				
17.	300	DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNIVERSITY OF NEVADA, LAS VEGAS	FEDERAL	\$148,790	
	Contract Description:	This is a new interlocal agreement to provide ongoing evaluations of the Quality Rating & Improvement System and facilitate annual early childhood research symposiums.				
18.	300	DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT	CURRICULUM ASSOCIATES, LLC	GENERAL 40% FEDERAL 60%	\$355,200	Sole Source
	Contract Description:	This is a new contract to provide training and access to the Brigance Early Childhood Screening Program and Online Management System to allow users to score screenings, run reports for families, and allow the Department to pull data to study program effectiveness.				
	Term of Contract:	Upon Approval - 06/30/2021		Contract # 22938		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	300	DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT	SRI INTERNATIONAL	OTHER: DONATION MATCH FUNDS 23.1% FEDERAL 76.9%	\$70,000	
	Contract Description:	This is the second amendment to the original contract which provides a review of the early learning guidelines, pre-kindergarten standards, NV Silver State Stars Quality Ratings & Improvement System program standards and professional competencies to revise and align the standards across age groups and programmatic elements. This amendment revises the scope of work to add a draft of early childhood leadership competencies, strategies to increase professional development offerings that support higher order thinking and skill acquisition and a draft of the Nevada emerging level workforce competencies.				
	Term of Contract:	08/13/2019 - 06/30/2020	Contract # 22159			
20.	300	DEPARTMENT OF EDUCATION - STUDENT AND SCHOOL SUPPORT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, LAS VEGAS	FEDERAL	\$73,388	
	Contract Description:	This is a new interlocal agreement to provide technical assistance, professional development resources, network meetings and training in partnership with the state as part of the 21st Century Community Learning Centers program.				
	Term of Contract:	01/06/2020 - 09/30/2022	Contract # 22928			
21.	300	DEPARTMENT OF EDUCATION - INDIVIDUALS WITH DISABILITIES ACT (IDEA)	SPECIAL EDUCATION LAW ASSOCIATES, LLC	FEDERAL	\$120,000	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides assistance in the implementation of the Special Education alternative dispute resolution systems in accordance with federal and state laws and regulations. This amendment increases the maximum amount from \$500,000 to \$620,000 due to the increase in special education complaints and special education due process hearing requests.				
	Term of Contract:	01/01/2017 - 12/31/2020	Contract # 18152			
22.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	CALIFA GROUP	FEE: MEMBERSHIP	\$100,000	Sole Source
	Contract Description:	This is a new contract to provide ongoing deployment of virtual reality equipment, software, content, technical support and continuing education to Nevada libraries.				
	Term of Contract:	01/02/2020 - 01/01/2022	Contract # 22904			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	400	DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIRECTOR'S OFFICE - GRANTS MANAGEMENT UNIT	CENTER FOR APPLIED MANAGEMENT	OTHER: FUNDS FOR HEALTHY NEVADA 93.3% FEDERAL 6.7%	\$1,500,000	
	Contract Description:	This is a new contract to provide a comprehensive case management system for use in Community Action Agencies, Family Resource Centers and other agencies, as necessary.				
		Term of Contract:	Upon Approval - 03/31/2025	Contract # 22940		
24.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER	THOMAS TANNEHILL DBA ET& M REFRIGERATION	GENERAL 41% OTHER: CLIENT PAYMENTS 1.3% FEDERAL 57.7%	\$25,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing inspection and repair services for facility air conditioning systems. This amendment extends the termination date from June 30, 2020 to June 30, 2022 and increases the maximum amount from \$35,358 to \$60,358 due to the continued need for these services.				
		Term of Contract:	07/01/2018 - 06/30/2022	Contract # 20042		
25.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	MERCER US, INC. DBA MERCER HEALTH AND BENEFITS, LLC	GENERAL 50% FEDERAL 50%	\$394,825	
	Contract Description:	This is a new contract to provide assistance with the re-procurement of the Medicaid Managed Care Organization program.				
		Term of Contract:	04/14/2020 - 09/30/2021	Contract # 22923		
26.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNIVERSITY OF NEVADA, RENO	FEDERAL	\$68,377	Exempt
	Contract Description:	This is a new interlocal agreement that continues ongoing laboratory testing on all acid-fast bacilli smear and culture requests from healthcare providers and referring laboratories.				
		Term of Contract:	01/01/2020 - 12/31/2020	Contract # 22568		

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 – OFFICE OF HEALTH ADMINISTRATION	NETSMART TECHNOLOGIES, INC.	FEDERAL	\$100,699	Sole Source
	Contract Description:	This is a new contract to implement an approved technology investment which provides Avatar Webservices and Avatar ScriptLink to the Division's Electronic Health Record, myAvatar, Avatar Web Services and Scriptlink which will substantially improve the completeness and integrity of client data.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 22830		
28.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	DELOITTE CONSULTING, LLP	FEDERAL	\$776,000	Sole Source
	Contract Description:	This is a new contract to provide project management, design, development, implementation, and production support services to add Supplemental Nutrition Assistance Program (SNAP) Employment and Training information and features to the Self-Service Portal and the Web-Based Worker Portal to increase awareness of the SNAP Employment and Training Program.				
		Term of Contract:	Upon Approval - 11/30/2020	Contract # 22920		
29.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES – CHILD SUPPORT ENFORCEMENT PROGRAM	OFFICE OF THE STATE CONTROLLER	OTHER: STATE SHARE COLLECTIONS 34% FEDERAL 66%	\$41,075	
	Contract Description:	This is the first amendment to the original interlocal agreement which provides check processing and printing services for the State Collection and Disbursement Unit. Checks are issued under special circumstances and all refunds to non-custodial parents and other state disbursement units are sent via check. This amendment increases the maximum amount from \$13,000 to \$54,075 and incorporates Attachment B - IRS Safeguarding Language due to the required security changes in order to comply with the safeguarding regulations of IRS information.				
		Term of Contract:	07/01/2017 - 06/30/2021	Contract # 18518		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
30.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES – CHILD AND FAMILY SERVICES - JUVENILE JUSTICE SERVICES	MULTI HEALTH SYSTEMS, INC.	GENERAL 43% OTHER: COUNTY REIMBURSEMENT 57%	\$70,000	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides unlimited use and training for the Youth Level of Service/Case Management Inventory risk and needs assessment tool. This amendment extends the termination date from April 30, 2020 to April 30, 2022 and increases the maximum amount from \$488,500 to \$558,500 due to annual licensing fees for the Division and nine judicial districts.				
	Term of Contract:	05/08/2018 - 04/30/2022	Contract # 19696			
31.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES – CHILD AND FAMILY SERVICES - SUMMIT VIEW YOUTH CENTER	VEGAS HARDSCAPE, LLC	GENERAL	\$97,500	
	Contract Description:	This is a new contract for the removal and replacement of the failed epoxy floor coating in the Sierra and Everest buildings.				
	Term of Contract:	04/15/2020 - 06/30/2021	Contract # 22873			
32.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES – CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	PRESTON MANAGEMENT & ORGANIZATIONAL CONSULTING	FEDERAL	\$80,000	Sole Source
	Contract Description:	This is a new contract to provide phase 2 of the evaluation of the Foster Kinship program. Phase 2 evaluates the program's effectiveness (for example, caretaker well-being; child safety, permanency and wellbeing) for all kinship families receiving services across the state of Nevada.				
	Term of Contract:	04/15/2020 - 12/31/2020	Contract # 22891			
33.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, RENO	FEDERAL	\$360,000	
	Contract Description:	This is a new contract for the Nevada Center for Excellence in Disabilities to develop an intensive interdisciplinary behavior support pilot program to serve youth with intellectual and developmental disabilities and/or co-occurring mental health diagnoses.				
	Term of Contract:	10/01/2019 - 09/30/2023	Contract # 22813			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
34.	431	OFFICE OF THE MILITARY	BEST IN THE WEST SAFETY, INC.	FEDERAL	\$140,450	
	Contract Description:	This is a new contract to provide web-based environmental compliance training modules to be utilized by Nevada state and federal employees of the Nevada Army National Guard.				
		Term of Contract:	Upon Approval - 04/14/2024	Contract # 22993		
35.	431	OFFICE OF THE MILITARY	MDK, LLC DBA WESTERN ENVIRONMENTAL TESTING LAB	FEDERAL	\$80,000	
	Contract Description:	This is a new contract to provide environmental laboratory testing and analytical services for the Nevada Army National Guard Environmental Office.				
		Term of Contract:	Upon Approval - 04/14/2024	Contract # 22989		
36.	431	ADJUTANT GENERAL & NATIONAL GUARD	NEVADA ARMY NATIONAL GUARD	GENERAL 12% FEDERAL 88%	\$2,147,190	
	Contract Description:	This is a first amendment to the original cooperative agreement which establishes the terms and conditions of National Guard Bureau funding in support of the operations and training of the Nevada Army and Air National Guards. This amendment increases the maximum amount from \$124,000,000 to \$126,147,190 due to the transitioning of the federally administered State Family Program to a state administered program.				
		Term of Contract:	10/01/2019 - 09/30/2024	Contract # 22256		
37.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	PULIZ MOVING & STORAGE CO. DBA PULIZ RECORDS MANAGEMENT SERVICES	GENERAL	\$19,100	
	Contract Description:	This is the first amendment to the original contract which continues ongoing services for a manageable file storage system with a clean and accessible controlled environment for the storage of paroled and discharged inmate files. This amendment increases the maximum amount from \$40,885 to \$59,985 due to reduced storage capacity in building 17 & 89 and capacity issues associated with the fire safety code and storage areas lost due to buildings returned to Nevada Indian Commission.				
		Term of Contract:	05/01/2017 - 04/30/2021	Contract # 18445		
38.	440	DEPARTMENT OF CORRECTIONS - PRISON INDUSTRY	ALLWYRE WYO, INC.	OTHER: REVENUE	\$6,142,052	
	Contract Description:	This is a new revenue contract to provide leased space and inmate labor at Southern Desert Correctional Center to manufacture poly pipe, cable and wire harness assemblies, printed circuit board assembly and electromechanical assemblies.				
		Term of Contract:	Upon Approval - 03/31/2024	Contract # 22708		

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	LET'S DO LUNCH, INC., DBA INTEGRATED FOOD SERVICE	FEDERAL	\$1,595,432	
	Contract Description:	This is the third amendment to the original contract which allows school districts to purchase food for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment increases the maximum amount from \$3,511,773 to \$5,107,205 due an increased need for these services.				
		Term of Contract:	10/01/2016 - 09/30/2020	Contract # 18019		
40.	550	DEPARTMENT OF AGRICULTURE - COMMODITY FOODS DISTRIBUTION PROGRAM	TYSON PREPARED FOODS, INC.	FEDERAL	\$431,068	
	Contract Description:	This is the fifth amendment to the original contract which allows school districts to purchase food for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment increases the maximum amount from \$950,000 to \$1,381,068 due to an increased need for these services.				
		Term of Contract:	10/01/2016 - 09/30/2020	Contract # 17996		
41.	655	DEPARTMENT OF PUBLIC SAFETY - CENTRAL REPOSITORY FOR NEVADA RECORDS OF CRIMINAL HISTORY	NORBERG, SCOTT W. DBA NORSOFT CONSULTING	FEE: VARIOUS REPOSITORY	\$1,024,276	
	Contract Description:	This is the third amendment to the original contract that continues on-going software support and maintenance services for various software systems operated by the Nevada Criminal History Repository. This amendment extends the termination date from June 30, 2020 to June 30, 2022, adds Attachment BB-2 - Maintenance Fees increases the maximum amount from \$1,866,260 to \$2,890,536 due to the continued need for these services.				
		Term of Contract:	09/13/2016 - 06/30/2022	Contract # 17828		
42.	702	DEPARTMENT OF WILDLIFE - HERITAGE - NON-EXEC	UTAH STATE UNIVERSITY	FEE: HERITAGE 83% FEDERAL 17%	\$58,750	
	Contract Description:	This is a new interlocal agreement to provide data analysis and reporting services to identify the impacts of feral horses and burros on big game in Nevada.				
		Term of Contract:	Upon Approval - 09/30/2020	Contract # 22362		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
43.	702	DEPARTMENT OF WILDLIFE - CONSERVATION EDUCATION	THE ABBI AGENCY	FEE: SPORTSMEN	\$150,000	
	Contract Description:	This is a new contract to provide development and maintenance for a new website.				
		Term of Contract:	04/15/2020 - 04/14/2023	Contract # 22949		
44.	702	DEPARTMENT OF WILDLIFE - LAW ENFORCEMENT	ENTERCOM NEVADA, LLC	FEE: SPORTSMEN 50% FEDERAL 50%	\$300,000	
	Contract Description:	This is a new contract to provide radio advertising in southern Nevada to educate and inform the public, sportsmen and key influencers about the state's wildlife, safety and environmental mission and ongoing issues.				
		Term of Contract:	04/15/2020 - 04/14/2024	Contract # 22992		
45.	702	DEPARTMENT OF WILDLIFE - LAW ENFORCEMENT	RENO MEDIA GROUP, LP	FEE: SPORTSMEN 50% FEDERAL 50%	\$300,000	
	Contract Description:	This is a new contract to provide radio advertising in northern and eastern Nevada to educate and inform the public, sportsmen, and key influencers about the state's wildlife, safety and environmental missions and ongoing issues.				
		Term of Contract:	04/15/2020 - 04/14/2024	Contract # 22991		
46.	702	DEPARTMENT OF WILDLIFE - HABITAT	MODERN LAND & DEVELOPMENT	FEE: SPORTSMEN	\$250,000	
	Contract Description:	This is a new contract to provide ongoing fence construction and removal statewide.				
		Term of Contract:	04/14/2020 - 04/10/2021	Contract # 22887		
47.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	GOLD SYSTEMS, INC.	GENERAL	\$229,043	
	Contract Description:	This is a new contract to provide a web-based program that will automate and enhance the manual fire and resource project billing processes.				
		Term of Contract:	04/14/2020 - 04/13/2024	Contract # 22869		
48.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT & CORRECTIVE ACTION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNIVERSITY OF NEVADA, RENO	FEDERAL	\$116,811	
	Contract Description:	This is a new interlocal agreement to provide program support to facilitate a rural water protection program.				
		Term of Contract:	Upon Approval - 12/31/2020	Contract # 22668		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
49.	750	DEPARTMENT OF BUSINESS AND INDUSTRY – TAXICAB AUTHORITY	TRUEPOINT SOLUTIONS, LLC	FEE: TECHNOLOGY	\$167,024	
	Contract Description:	This is the second amendment to the original contract which provides an integrated records management system that will capture all necessary data elements, provide preset and ad-hoc queries and allow for communication between all work areas within the Taxicab Authority. This amendment extends the termination date from April 30, 2020 to June 30, 2021 and increases the maximum amount from \$1,117,520 to \$1,284,544 to implement Phase 3 (Company Portal) of the records management system.				
		Term of Contract:	03/13/2018 - 06/30/2021	Contract # 19675		
50.	920	DEPARTMENT OF ADMINISTRATION - DEFERRED COMPENSATION COMMITTEE	CASEY NEILON, INC.	OTHER: ADMINISTRATION CHARGE	\$71,750	
	Contract Description:	This is a new contract to provide a financial statement audit.				
		Term of Contract:	Upon Approval - 07/31/2021	Contract # 22925		
51.	B006	LICENSING BOARDS AND COMMISSIONS - COSMETOLOGY	DEPARTMENT OF ADMINISTRATION	FEE: LICENSING	\$100,000	
	Contract Description:	This is a new interlocal agreement to provide hearings officers for the resolution of cases pursuant to NRS 644A and NAC 644A.				
		Term of Contract:	Upon Approval - 01/31/2023	Contract # 22995		
52.	B011	LICENSING BOARDS AND COMMISSIONS - CONTRACTORS	THE ALLISON LAW FIRM CHTD.	FEE: LICENSING	\$400,000	Professional Service
	Contract Description:	This is a new contract to provide legal services.				
		Term of Contract:	04/14/2020 - 04/13/2022	Contract # 22963		

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: **22926**Agency Name: **OFFICE OF WORKFORCE INNOVATION**Agency Code: **018**Appropriation Unit: **1004-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Board of Regents-NSHE

Contractor Name: **Board of Regents-NSHE**Address: **2601 Enterprise Road**City/State/Zip: **Reno, NV 89512**

Contact/Phone: 775-784-3409

Vendor No.: D35000808

NV Business ID: GOVERNMENTAL ENTITY

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 %

Agency Reference #: ASD 2833905

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 04/2020

Retroactive? **Yes**

If "Yes", please explain

This contract is requested to be approved retroactively due to delays in working through the federal and sub-grant budget and allowable costs and processes.3. Termination Date: **10/31/2020**Contract term: **235 days**4. Type of contract: **Interlocal Agreement**Contract description: **Apprenticeship Prog**

5. Purpose of contract:

This is a new interlocal agreement to provide programs to support apprenticeship activities, increase apprentices from under-represented populations and expand apprenticeship opportunities.

6. NEW CONTRACT

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

Other basis for payment: Upon approval of itemized invoices.

II. JUSTIFICATION

7. What conditions require that this work be done?

An essential component of Nevada's Apprenticeship USA State Expansion ("TRAIN") grant is the creation of an infrastructure to support apprenticeship, increase opportunities for underrepresented populations, and diversify apprenticeships to non-traditional industries.

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

N/A This is an Interlocal Agreement9. 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?

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 and Policy Analyst Ph: 702-486-8080

20. Contract Status:


Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	02/21/2020 15:42:28 PM
Division Approval	ssands	02/21/2020 15:42:32 PM
Department Approval	ssands	02/21/2020 15:42:34 PM
Contract Manager Approval	ssands	03/03/2020 10:34:20 AM
Budget Analyst Approval	cbrekken	03/06/2020 14:47:55 PM
BOE Agenda Approval	cbrekken	03/06/2020 14:47:57 PM
BOE Final Approval	Pending	

MEMORANDUM

Date: February 27, 2020

To: Darlene Baughn, Executive Branch Budget Officer
Governor's Finance Office – Budget Division

From: Craig von Collenberg, Executive Director 
Governor's Office of Workforce Innovation (OWINN)

SUBJECT: Retroactive Contract – NSHE/BOR CETS #22926

The Governor's Office of Workforce Innovation (OWINN) respectfully requests approval of the attached contract with Board of Regents, Nevada System of Higher Education (NSHE) retroactive to March 10, 2020.

The funds from this contract will be used to fund supportive services for apprentices, employers, and/or the training programs that will be counted as activities for Nevada's ApprenticeshipUSA State Expansion ("TRAIN") grant. By providing supportive services, the goal is to increase the workforce development training and employment opportunities for the apprentices.

Through February 2020, OWINN worked to coordinate with the Nevada Department of Employment, Training and Rehabilitation (DETR), the U.S. Department of Labor (DOL), and NSHE to determine allowable costs and processes for expending the supportive service funds. Since that time, OWINN and NSHE have worked diligently and extensively with each other to finalize the contract details and Scope of Work. The backdate request to approve the contract effective March 10, 2020 would assist OWINN and NSHE in covering the expenses necessary to support apprentices, employers, and programs as part of this grant's activities.

Thank you for the consideration and I am available to provide any additional information or answer any further questions that you may have. Please do not hesitate to reach out to me as needed.

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: **22903**Agency Name: **ATTORNEY GENERAL'S OFFICE**Agency Code: **030**Appropriation Unit: **1038-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CHRISTOPHER R. VILLARREAL**Contractor Name: **CHRISTOPHER R. VILLARREAL**Address: **DBA PLUGGED IN STRATEGIES
9492 OLYMPIA DR**City/State/Zip: **EDEN PRAIRIE, MN 55347-2844**Contact/Phone: **CHRIS VILLARREAL 415-680-4224**Vendor No.: **T27043328**NV Business ID: **NV20201692003**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 %	Regulatory Assessments
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 **04/14/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/15/2024**Contract term: **4 years and 2 days**4. Type of contract: **Contract**Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide ongoing professional services as an expert witness as well as technical expertise and support in analyzing electric and gas utilities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$175,000.00**

Payment for services will be made at the rate of \$100.00 per hour maximum

Other basis for payment: Invoices must itemize work performed by time and date. Payable at presentation of invoice, its review and approval not to exceed 30 days.

II. JUSTIFICATION

7. What conditions require that this work be done?

Statute requires representation for consumers' interests in matters before the Public Utilities Commission and any legislature, board or commission with jurisdiction over Nevada regulated public utilities.

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

Based on this contractor's broad and extensive experience, he can provide assistance and credibility on issues that we cannot cover.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?

This contract was chosen based on his expertise availability and reasonable rates.

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:

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:

Paul E Stuhff, Sr Deputy Attorney General Ph: 702-486-3490

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hrobinso	02/26/2020 13:56:13 PM
Division Approval	hrobinso	02/26/2020 13:56:17 PM
Department Approval	hrobinso	03/10/2020 15:19:04 PM
Contract Manager Approval	hrobinso	03/10/2020 15:19:09 PM
Budget Analyst Approval	jyou23	03/11/2020 15:15:01 PM
BOE Agenda Approval	tgreenam	03/12/2020 08:12:55 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: **21679**Amendment
Number: **1**Agency Name: **SECRETARY OF STATE'S OFFICE**Agency Code: **040**Appropriation Unit: **1051-14**Is budget authority
available?: **No**If "No" please explain: Budget authority is currently not
available in FY21. The agency plans to balance forward
unused grant funds from FY20 to FY21.Legal Entity
Name: **CENTER FOR INTERNET SECURITY**Contractor Name: **CENTER FOR INTERNET SECURITY**Address: **31 TECH VALLEY DR**City/State/Zip **EAST GREENBUSH, NY 12061-4134**Contact/Phone: **Mark Talty 518-266-2088**Vendor No.: **T29041879**NV Business ID: **NV20191219407**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 **No** or b. other effective date **05/14/2019**
Examiner's approval?Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2020**

Termination Date:

Contract term: **2 years and 110 days**4. Type of contract: **Contract**Contract description: **System Monitoring**

5. Purpose of contract:

This is the first amendment to the original contract which provides network monitoring, analysis, and quarterly reporting on cybersecurity threats to county voter registration databases utilizing previously purchased Albert sensors for 12 rural Nevada counties. This amendment extends the termination date from June 30, 2020 to August 31, 2021 and increases the maximum amount from \$100,080 to \$189,360 due to continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$100,080.00	\$100,080.00	\$100,080.00	Yes - Action
2. Amount of current amendment (#1):	\$89,280.00	\$89,280.00	\$89,280.00	Yes - Action
3. New maximum contract amount:	\$189,360.00			
and/or the termination date of the original contract has changed to:	08/31/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

Monitoring cyber threats is essential to maintaining the integrity of elections in Nevada. All of Nevada's counties have already purchased or received Albert sensors from CIS. The Albert sensors allow network monitoring and analysis on county voter registration databases. CIS will provide quarterly reports to the counties and to SOS on their findings. This amendment will allow a continuation of these vital services.

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

Only the vendor can perform monitoring and analysis on its sensors.

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 #: 191204

Approval Date: 12/23/2019

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

Only CIS can provide the necessary services.

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:

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	shudder	01/13/2020 11:15:22 AM
Division Approval	shudder	01/13/2020 11:16:02 AM
Department Approval	shudder	01/13/2020 11:16:11 AM

Contract Manager Approval	adale	03/06/2020 14:22:01 PM
EITS Approval	tgalluzi	03/10/2020 09:19:33 AM
Budget Analyst Approval	dlenzner	03/13/2020 14:52:48 PM
BOE Agenda Approval	hfield	03/16/2020 11:32:32 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#:	191204 (C)

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>Secretary of State</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Wayne Thorley</i>	<i>775-684-5720</i>	<i><u>Wthorley@sos.nv.gov</u></i>

1b	Vendor Information:	
	Identify Vendor:	<i>CIS - Center for Internet Security</i>
	Contact Name:	<i>Dawn Harnish</i>
	Complete Address:	<i>31 Tech Valley Drive, East Greenbush, NY 12061</i>
	Telephone Number:	<i>518-880-0766</i>
Email Address:		<i>Dawn.harnish@cisecurity.org</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:	#1		
CETS:		#21679		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	5/14/2019	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	<i>Sub-grant from NDEM CFDA 97.067</i>
Other (Explain):		

Purchasing Use Only:

Approval #:

#191204 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$189,360.00
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>This amendment will allow a continuation of CIS Netflow/Intrusion Detection System Monitoring and Analysis Service, known as Albert, which provides a near real-time automated process that identifies and alerts on traditional and advanced threats on a network, facilitating rapid response to threats and attacks. The Albert sensor(s) provide traditional Intrusion Detection System (IDS) monitoring, along with netflow and passive DNS collection and analysis. Through its 24/7/365 Security Operations Center (SOC), CIS manages the sensor(s) to identify malicious activity, and, in accordance with escalation procedures prescribed by the partner, provides notification of malicious activity. The use of open source software allows CIS to provide enhanced monitoring capabilities in a more affordable, cost-effective way than a typical commercial IDS/IPS solution.</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>An IDS is only as effective as the signature set running on it. The Albert solution utilizes a unique and targeted signature set to ensure sensors rapidly recognize and alert on potentially malicious traffic occurring on the network. In addition, only the vendor of the IDS can perform monitoring on the IDS. CIS is the only vendor that can provide monitoring on the sensors purchased by the counties (see the response to Question 4 below). CIS is a non-profit organization funded by the federal government and can therefore provide services at a below market rate.</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 Albert service utilizes commodity hardware (Albert sensors) to help provide a robust offering. All of Nevada's 17 counties have already purchased and installed an Albert sensor from CIS. Only CIS can perform monitoring and analysis on their sensors. We cannot competitively bid for this service because no vendor except CIS can perform the services needed. Additionally, the use of open source software allows CIS to provide enhanced monitoring capabilities in a more affordable, cost-effective way than a typical commercial IDS solution.</i></p>
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5	Were alternative services or commodities evaluated? Check One.	Yes:		No:	X
	a. <i>If yes</i> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.				
	<p>b. <i>If not</i>, why were alternatives not evaluated?</p> <p><i>There are no alternatives available for the service that is required. As previously discussed, only CIS can perform the monitoring and analysis service on their sensors. Since all the counties have either purchased an Albert sensor from CIS or are in the process of purchasing an Albert sensor from CIS, there are no alternatives.</i></p>				

Purchasing Use Only:

Approval #:

#191204(2)

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 <u>ALL</u> previous waivers <u>MUST</u> accompany this request.			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 #)		
	5/14/19	8/31/20	\$104,640.00	CIS Netflow/Intrusion Detection	Waiver #190301		
			\$				
			\$				

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 the service is competitively bid, the only vendor that would provide a bid is CIS because they are the only vendor that can provide the monitoring and analysis service on their sensors. If this waiver request is not approved, then we will not be able to use the grant funding available to the Secretary of State's office from the Division of Emergency Management.</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>Based on discussions with CIS and research performed by the Secretary of State's office, it is clear that only CIS can provide the services required.</i>

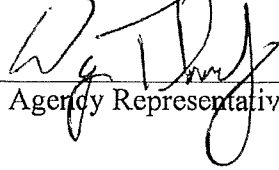
9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. If yes, please provide details regarding future obligations or needs.				
	<i>***This is an amended sole source due to the fact that the SOS was awarded additional subgrant funds from the Division of Emergency Management. If future funding is available, either through a new grant from the Division of Emergency Management or another funding source, to continue this service beyond the initial contract term, the Secretary of State's office will seek to renew/extend its contract with CIS for monitoring and analysis services. If funding is not available beyond the initial contract term, the counties will either have to contract directly with CIS for monitoring and analysis services or discontinue their use of the Albert sensors.</i>				

Purchasing Use Only:

Approval #:

#191204(C2)

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.



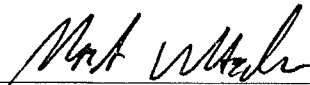
Agency Representative Initiating Request

Wayne Thorley, Deputy Secretary for Elections

Print Name of Agency Representative Initiating Request

12/12/19

Date



Signature of Agency Head Authorizing Request

Mark Wlaschin, Deputy Secretary for Operations

Print Name of Agency Head Authorizing Request

Dec 12, 2019

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 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.

Approved by:



Administrator, Purchasing Division or Designee

12/23/19

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: **22945**Agency Name: **ADMIN - DIVISION OF HUMAN
RESOURCE MANAGEMENT**Agency Code: **070**Appropriation Unit: **1363-20**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SIMMONS GROUP NEVADA, LLC**Contractor Name: **SIMMONS GROUP NEVADA, LLC**Address: **6841 S. Eastern Avenue
Suite 103**City/State/Zip: **Las Vegas, NV 89119**Contact/Phone: **Ann Simmons 702-492-5310**Vendor No.: **T32009595**NV Business ID: **NV20011005785**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 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % INTERNAL SERVICE FUNDS**Agency Reference #: **ASD 2833980**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/14/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 77 days**4. Type of contract: **Contract**Contract description: **Collective Bargain**

5. Purpose of contract:

This is a new contract to provide negotiation services related to collective bargaining to ensure proper ground rules and plans are in place, in response to SB135.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$440,000.00**

Payment for services will be made at the rate of \$250.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

During the 2019 Legislature, SB 135 was passed and approved by Governor Sisolak, which changed the nature of HR at the State of Nevada. In order to support the current mission and vision of DHRM. HR functions will have to be expanded and adapted to provide collective bargaining services.

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

The current staff does not have the expertise or the availability to manage complex collective bargaining activities. Collective bargaining is unique skill set that has been difficult to find 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: **Professional Service (As defined in NAC 333.150)**

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

Solicitation waiver 200203

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:

Frank Richardson, Deputy Administrator Ph: 775-684-0105

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/09/2020 07:44:11 AM
Division Approval	ssands	03/09/2020 07:44:13 AM
Department Approval	ssands	03/09/2020 07:44:16 AM
Contract Manager Approval	ssands	03/09/2020 07:44:19 AM
Budget Analyst Approval	stilley	03/16/2020 15:43:27 PM
BOE Agenda Approval	hfield	03/17/2020 10:16:09 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#:	200203 @

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:	Department of Administration- Division of Human Resource Management	
	Contact Name and Title	Phone Number	Email Address
	Frank Richardson, Deputy Administrator	775-684-0105	frichardson@admin.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Anne Simmons Group
	Contact Name:	Anne Simmons
	Complete Address:	6841 S. Eastern Ave. Ste 103, Las Vegas, NV, 89119
	Telephone Number:	702-492-5310
	Email Address:	ann@simmons-group.com

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:	#		

1e	Term: 2 year			
	One (1) Time Purchase:			
	Contract:	Start Date:	04/01/2020	End Date:

1f	Funding:	
	State Appropriated:	X
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

200203 ②

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$440,000.00

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>The contracted negotiator will work with the Chief Negotiator to develop strategies, provide collective bargaining services, and draft contract proposals. The contracted negotiator will consult with the Chief Negotiator on the significance of proposed changes, labor market conditions, prevailing union and management practices, labor legislation, and trends in wages and benefit programs. This role will provide proposals for ground rules regarding collective bargaining between labor unions and the State of Nevada and will evaluate strategies to ensure the State of Nevada does not engage in unfair labor practices.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>The Division of Human Resource Management (DHRM) will require external support for negotiations with labor organizations. A contracted negotiator will be necessary to provide negotiation services to the State of Nevada to ensure proper ground rules and plans are in place. Currently, DHRM does not have staff with the required expertise in collective bargaining to support the negotiation of the crucial first contracts with the bargaining units. The negotiation of a first collective bargaining agreement for any group of employees is a lengthy and demanding process and significant unanticipated costs to the taxpayers could result if not completed correctly. The contracted negotiator will work with the Chief Negotiator to develop strategies, provide collective bargaining services, and draft contract proposals. The contracted negotiator will consult with the Chief Negotiator on the significance of proposed changes, labor market conditions, prevailing union and management practices, labor legislation, and trends in wages and benefit programs. This role will provide proposals for ground rules regarding collective bargaining between labor unions and the State of Nevada and will evaluate strategies to ensure the State of Nevada avoids any unfair labor practice complaints.</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>Current staff does not have the expertise or the availability to manage complex collective bargaining activities. Collective bargaining is a unique skillset that has been difficult to find in the State of Nevada. Few negotiators outside of the State of Nevada are familiar with Senate Bill 135 and its requirements, and there is a limited pool of negotiators in the State of Nevada that are available to contract with the State.</i>

5	Were alternative services or commodities evaluated? Check One.	Yes:	X	No:	
	a. <i>If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>				

#200203(C)

	<p><i>An informal request for an estimate per hour was conducted for collective bargaining negotiators. Only two responded, the Cozen Group from Chicago with a \$400.00 per hour fee times two negotiators for an 800.00 per hour total and the Simmons Group from Las Vegas with a \$250.00 per hour fee. None of the other firms contacted responded to our query.</i></p>
	<p>b. <i>If not, why were alternatives not evaluated?</i></p>

Purchasing Use Only:

Approval #:

200203 @

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		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)		
	Start and End Dates						
			\$				
			\$				
			\$				
		\$					

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 alternative is to not have the support necessary to enact the provisions of Senate Bill 135. Current staff does not have the expertise or the availability to manage complex collective bargaining activities. Time is of the essence since the language in Senate Bill 135 indicates that the State of Nevada must begin negotiations as soon as practicable, once the Board designates an exclusive representative. Five exclusive representatives have been named, with a petition for the sixth pending. To avoid complaints of unfair labor practices, the State of Nevada must negotiate in good faith within the timelines set forth in Senate Bill 135.</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>The State surveyed resources within the National Public Negotiators Association network and with Directors at the State of Nevada who had experience with collective bargaining. We attempted to contact three providers receive estimates, with only two responding. The first, The Cozen Group provided an estimated rate of \$400.00 per hour times two attorneys, for a total of 800.00 an hour to negotiate. The other estimate from the Simmons Group was \$250.00 per hour for one negotiator.</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:	X
	a. If yes, please provide details regarding future obligations or needs. <i>It is anticipated that the contracted negotiator will be a one-time implementation cost. It is DHRM's intent to become proficient in labor negotiations as the Labor Relations Unit develops the appropriate skills to support collective bargaining. However, future negotiations may require expertise/resources in excess of what the LRU can provide, necessitating an extension of contracted negotiator services.</i>						

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Purchasing Use Only:

Approval #:

20020300

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.

FRANK RICHARDSON

Agency Representative Initiating Request

FRANK RICHARDSON

Print Name of Agency Representative Initiating Request

2/13/20
Date

Peter Long

Signature of Agency Head Authorizing Request

PETER LONG

Print Name of Agency Head Authorizing Request

2/13/20
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

2/13/2020
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: **19476** Amendment Number: **5**

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: **1510-71** Address: **ARCHITECTS PC**

Is budget authority available?: **Yes** City/State/Zip: **8882 SPANISH RIDGE AVE 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? **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.

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 #: 111548

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 200 days**4. Type of contract: **Contract**
Contract description: **Arch/Eng**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides professional architectural/engineering services for the Nevada State College Education Academic Building Advance Planning CIP project: CIP Project No 17-P08; SPWD Contract No. 111548. This amendment increases the maximum amount of \$1,687,341.05 to \$1,769,501.05 due to design review changes relating to Early Childhood and Speech Pathology Services space and orientation needs, the addition of a roundabout required by the City of Henderson and revision of the waterproofing membrane.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$1,502,735.00	\$1,502,735.00	\$1,502,735.00	Yes - Action
a. Amendment 1:	\$94,405.00	\$94,405.00	\$94,405.00	Yes - Action
b. Amendment 2:	\$74,558.50	\$74,558.50	\$74,558.50	Yes - Action
c. Amendment 3:	\$11,502.55	\$11,502.55	\$11,502.55	Yes - Info
d. Amendment 4:	\$4,140.00	\$4,140.00	\$15,642.55	No
2. Amount of current amendment (#5):	\$82,180.00	\$86,320.00	\$97,822.55	Yes - Action
3. New maximum contract amount:	\$1,769,521.05			

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	02/24/2020 13:05:18 PM
Division Approval	lwildes	02/24/2020 13:05:22 PM

Department Approval	lwildes	02/24/2020 13:05:28 PM
Contract Manager Approval	lwildes	02/24/2020 13:05:33 PM
Budget Analyst Approval	jrodrig9	03/24/2020 13:51:20 PM
BOE Agenda Approval	jrodrig9	03/24/2020 13:51:42 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: **22914**

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:	1550-74	Address:	6225 NORTH 24 STREET SUITE 250
Is budget authority available?:	Yes	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.

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

Agency Reference #: 113248

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 High Desert State Prison - Heavy Equipment Simulator Classrooms CIP project, to include schematic design, construction documents, bid assistance and construction administration services to construct classrooms that will house heavy equipment simulators use to train inmates in the operations and maintenance of heavy equipment: CIP Project No.19-C13; SPWD Contract No. 113248.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$57,810.00**

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:

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:

Labaj, Mark, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/18/2020 12:24:57 PM
Division Approval	Iwildes	02/18/2020 12:25:00 PM
Department Approval	Iwildes	02/18/2020 12:25:03 PM
Contract Manager Approval	Iwildes	02/18/2020 12:25:06 PM
Budget Analyst Approval	jrodrig9	03/02/2020 20:58:39 PM
BOE Agenda Approval	jrodrig9	03/02/2020 20:58:42 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: **22975**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	PETTY & ASSOCIATES, INC.
Agency Code:	082	Contractor Name:	PETTY & ASSOCIATES, INC.
Appropriation Unit:	1550-82	Address:	1375 GREG ST. #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 #: 113361

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 Northern Nevada Correctional Center - Housing Unit 6 Heating, Ventilation, and Air Conditioning Systems Renovation CIP project, to replace the dual-duct terminal units and a fan coil serving Housing Unit #6, Administration building, and the Operations building: CIP Project No. 19-M28; SPWD Contract No. 113361.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$135,000.00**

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 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:

Bassi, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	03/06/2020 09:39:23 AM
Division Approval	Iwildes	03/06/2020 09:39:26 AM
Department Approval	Iwildes	03/06/2020 09:39:30 AM
Contract Manager Approval	Iwildes	03/06/2020 09:39:33 AM
Budget Analyst Approval	nkephart	03/12/2020 11:13:11 AM
BOE Agenda Approval	jrodrig9	03/19/2020 22:28:55 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: **22927**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1558-61**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CORE CONSTRUCTION SERVICES OF NEVADA, INC.**Contractor Name: **CORE CONSTRUCTION SERVICES OF NEVADA, INC.**Address: **7150 CASCADE VALLEY CT.**City/State/Zip: **LAS VEGAS, NV 89128-0455**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 Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 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.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$295,075.00**

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 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:

Lewis, Willfred, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/24/2020 08:16:13 AM
Division Approval	Iwildes	02/24/2020 08:16:17 AM
Department Approval	Iwildes	02/24/2020 08:16:22 AM
Contract Manager Approval	Iwildes	02/24/2020 08:16:27 AM
Budget Analyst Approval	jrodrig9	03/02/2020 20:47:47 PM
BOE Agenda Approval	jrodrig9	03/02/2020 20:47:50 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: **22999**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1558-62**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **TATE SNYDER KIMSEY ARCHITECTS LTD DBA TSK**Contractor Name: **TATE SNYDER KIMSEY ARCHITECTS LTD DBA TSK**Address: **LTD DBA TSK
225 SOUTH ARLINGTON AVE, STE A
RENO, NV 89501**City/State/Zip: **RENO, NV 89501**Contact/Phone: **775-857-2949**Vendor No.: **T80883470**NV Business ID: **NV19821003232**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 #: **113390**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 60 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 Heroes Memorial Building - Advanced Planning Renovation and Seismic Retrofit CIP project, to include schematic design for seismic strengthening and a major remodel of the Heroes Memorial Building and Annex: CIP Project No. 19-P02; SPWD Contract No. 113390.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$259,556.00**

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:

Current, Jeff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	03/12/2020 08:26:46 AM
Division Approval	Iwildes	03/12/2020 08:26:49 AM
Department Approval	Iwildes	03/12/2020 08:26:52 AM
Contract Manager Approval	Iwildes	03/12/2020 08:26:55 AM
Budget Analyst Approval	nkephart	03/13/2020 16:24:24 PM
BOE Agenda Approval	jrodrig9	03/24/2020 13:52:16 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: **22961**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1577-45**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DINTER ENGINEERING COMPANY**Contractor Name: **DINTER ENGINEERING COMPANY**Address: **385 GENTRY WAY**City/State/Zip: **RENO, NV 89502-4608**Contact/Phone: **775-826-4044**Vendor No.: **T41734800**NV Business ID: **NV19861016365**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 %

X Federal Funds **47.00 %** **X** Bonds **53.00 %**

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 113389

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 Washoe County Armory - Install Emergency Generator CIP project, to include installation of an emergency generator, automatic transfer switch and remote monitoring control unit: CIP Project No. 19-M26; SPWD Contract No. 113389.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$63,590.00**

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 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:

Aviles, Jason, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	03/05/2020 09:10:21 AM
Division Approval	lwildes	03/05/2020 09:10:23 AM
Department Approval	lwildes	03/05/2020 09:10:26 AM
Contract Manager Approval	lwildes	03/05/2020 09:10:29 AM
Budget Analyst Approval	nkephart	03/12/2020 11:13:53 AM
BOE Agenda Approval	jrodrig9	03/19/2020 22:25:53 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: **22964**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	LUMOS & ASSOCIATES
Agency Code:	082	Contractor Name:	LUMOS & ASSOCIATES
Appropriation Unit:	1585-58	Address:	9222 PROTOTYPE DR
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89521-8989
If "No" please explain:	Not Applicable	Contact/Phone:	775-827-6111
		Vendor No.:	T80912843A
		NV Business ID:	NV19791006982

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	91.00 %	Fees	0.00 %
X	Federal Funds	9.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 113403

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 Hobart Creek Reservoir Dam - Advanced Planning CIP project, to develop the evaluation and corrective measure proposals for the Hobart Creek Reservoir Dam: CIP Project No. 19-S04B; SPWD Contract No. 113403.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$264,800.00**

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 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:

Wacker, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lwildes	03/05/2020 10:44:58 AM
Division Approval	lwildes	03/05/2020 10:45:02 AM
Department Approval	lwildes	03/05/2020 10:45:05 AM
Contract Manager Approval	lwildes	03/05/2020 10:45:08 AM
Budget Analyst Approval	nkephart	03/12/2020 11:12:51 AM
BOE Agenda Approval	jrodrig9	03/19/2020 22:31:14 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: **22931**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	ARCHITECTS + LLC
Agency Code:	082	Contractor Name:	ARCHITECTS + LLC
Appropriation Unit:	1593-23	Address:	35 MARTIN ST
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:	NV2000117428

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	44.00 %
X Highway Funds	56.00 %	Other funding	0.00 %
Agency Reference #:	113367		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 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 Department of Public Safety - Training Division Building Renovation CIP project, to include design construction and bid documents as well as construction administration services to refurbish/upgrades to the interior and exterior structure of the training building, the irrigation system, concrete walkways and the parking lot: CIP Project No.19-M18; SPWD Contract No.113367.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$177,500.00**

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 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:

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:

Benjamin, Adrianna, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/24/2020 10:06:52 AM
Division Approval	Iwildes	02/24/2020 10:06:55 AM
Department Approval	Iwildes	02/24/2020 10:06:58 AM
Contract Manager Approval	Iwildes	02/24/2020 10:07:00 AM
Budget Analyst Approval	jrodrig9	03/02/2020 20:36:57 PM
BOE Agenda Approval	jrodrig9	03/02/2020 20:37:01 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 CONTRACT

1. Contract Number: **19158** Amendment Number: **3**

Agency Name: **ADMIN - ENTERPRISE IT SERVICES** Legal Entity Name: **NAVAL FACILITIES ENGINEERING COMMAND**

Agency Code: **180** Contractor Name: **NAVAL FACILITIES ENGINEERING COMMAND**

Appropriation Unit: **1388-00** Address: **SOUTHWEST-REAL ESTATE DEPT
1220 PACIFIC HIGHWAY**

Is budget authority available?: **Yes** City/State/Zip: **SAN DIEGO, CA 92132**

If "No" please explain: Not Applicable Contact/Phone: **LORNA TIMOG 619/532-1164**

Vendor No.:
NV Business ID: **N.A**

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 %	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 **07/01/2017**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

3. Previously Approved Termination Date: **06/30/2019**Contract term: **4 years**4. Type of contract: **Revenue Contract**Contract description: **Rack Space Rental**

5. Purpose of contract:

This is the third amendment to the original revenue contract which provides rack space at Austin Mountain in Lander County. This amendment extends the termination date from June 30, 2020 to June 30, 2021 and increases the maximum amount from 48,864.24 to \$62,048.32 due to continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$14,932.12	\$14,932.12	\$14,932.12	Yes - Info
a. Amendment 1:	\$14,932.12	\$14,932.12	\$29,864.24	Yes - Info
b. Amendment 2:	\$19,000.00	\$19,000.00	\$48,864.24	Yes - Info
2. Amount of current amendment (#3):	\$13,184.08	\$13,184.08	\$62,048.32	Yes - Action
3. New maximum contract amount:	\$62,048.32			
and/or the termination date of the original contract has changed to:	06/30/2021			

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 Naval Facilities Engineering Command Southwest, Real Estate Department 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 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	ddav12	02/28/2020 08:47:02 AM
Division Approval	ddav12	02/28/2020 08:47:07 AM
Department Approval	ddav12	02/28/2020 08:47:11 AM
Contract Manager Approval	ascott	03/04/2020 07:19:53 AM
Budget Analyst Approval	nhovden	03/05/2020 16:10:09 PM
BOE Agenda Approval	nhovden	03/05/2020 16:10:15 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: **22866**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Agency Code: **180**Appropriation Unit: **1388-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **NEW CINGULAR WIRELESS PCS, LLC**Contractor Name: **NEW CINGULAR WIRELESS PCS, LLC**Address: **1025 LENOX PARK BLVD. NE, 3RD**City/State/Zip: **ATLANTA, GA 30319**Contact/Phone: **JENNIFER RAMEN 877 231 5447**

Vendor No.:

NV Business ID: **NV19991079179**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 %	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 **07/01/2017**Anticipated BOE meeting date **04/2020**Retroactive? **Yes**

If "Yes", please explain

The attached Revenue Contract with New Cingular Wireless PCS has been submitted for approval. Due to the necessity of continued public communications coverage, we are asking to retroactively approve this contract back to July 1, 2017.

3. Termination Date: **06/30/2021**Contract term: **4 years**4. Type of contract: **Revenue Contract**Contract description: **Rack Space Rental**

5. Purpose of contract:

This is a new revenue contract to provide ongoing rack space at Penn Hill in Elko County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$51,195.84**

Other basis for payment: Rack Rent FY18 \$2,33.16, FY19 \$2,133.16, FY20 \$2,133.16, FY21 \$2,133.16.

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 New Cingular Wireless PCS 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:

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	02/06/2020 07:09:38 AM
Division Approval	ddav12	02/06/2020 07:09:42 AM
Department Approval	ddav12	02/06/2020 07:09:46 AM
Contract Manager Approval	ascott	02/12/2020 08:37:18 AM
Budget Analyst Approval	nhovden	02/24/2020 10:03:20 AM
BOE Agenda Approval	nhovden	02/24/2020 10:05:10 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor



Laura Freed
Director
~Vacant~
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 | it.nv.gov | Fax: (775) 687-9097

February 4, 2020

MEMORANDUM

To: Colleen Murphy, Budget Analyst

From: Ann Scott, Management Analyst
Enterprise Information Technology Services

Purpose: **Request BOE retroactively approve for attached Revenue Contract**

The attached Revenue Contract with New Cingular Wireless PCS has been submitted for the BOE's approval. Due to the necessity of continued public communications coverage, we are asking the Board of Examiners to retroactively approve this contract to July 1, 2017.

The agency takes its contract process serious and with the recent closing of the budget and delay of rates being published, we had a delay in processing revenue contracts and anticipate being timelier in the future.

I appreciate your time and assistance. Should you have questions please call me at (775) 684-5859 or email to annmscott@admin.nv.gov.

Sincerely, Ann Scott

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: **22978**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER LEARNING ON BEHALF OF
Agency Code:	300	Contractor Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER LEARNING ON BEHALF OF
Appropriation Unit:	2612-13	Address:	UNIVERSITY OF NV, LAS VEGAS 4505 MARYLAND PKWY BOX 451005
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89154-1055
If "No" please explain:	Not Applicable	Contact/Phone:	FELICIA SUMLER 702/895-1357
		Vendor No.:	D35000815
		NV Business ID:	GOV ENTITY

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

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **90 days**4. Type of contract: **Contract**Contract description: **Impact/Validity Study**

5. Purpose of contract:

This is a new interlocal agreement to provide an impact and validity study for Nevada's Educator Performance Framework.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$174,975.00**

Other basis for payment: As invoiced by contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to SB475 signed during the 80th Legislative Session NDE is required to enter into a contract with a consultant to study the impact and validity of statewide performance evaluation system.

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

Legislature required NDE to hire a consultant.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):

Board of Regents UNLV
Board of Regents UNR
KSM Business Technology

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #30DOE-S1026, 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: 01/17/2020 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?

Yes If "Yes", please explain

Currently works for NSHE at UNLV.

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 NDE Has multiple contracts with BOE-UNLV-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	bfarra2	03/11/2020 12:11:17 PM
Division Approval	bfarra2	03/11/2020 12:11:22 PM
Department Approval	bfarra2	03/11/2020 12:11:27 PM
Contract Manager Approval	bfarra2	03/11/2020 12:11:32 PM
Budget Analyst Approval	mranki1	03/16/2020 14:09:26 PM
BOE Agenda Approval	cbrekken	03/23/2020 13:56:50 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: **22984**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2612-32**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DATA INSIGHT PARTNERS, LLC**Contractor Name: **DATA INSIGHT PARTNERS, LLC**Address: **4350 S MARYLAND PKWY STE 177**City/State/Zip: **LAS VEGAS, NV 89119**Contact/Phone: **JUSTIN WHITE 702-613-2248**Vendor No.: **T32009017**NV Business ID: **NV20161703339**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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/30/2020**Contract term: **243 days**4. Type of contract: **Contract**Contract description: **Comprehensive Eval**

5. Purpose of contract:

This is a new contract to provide a comprehensive analysis of factors that affect Nevada class sizes, national teacher workforce characteristics, and trends to help provide context around local data.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$135,000.00**

Other basis for payment: Per itemized invoice for each phase completed

II. JUSTIFICATION

7. What conditions require that this work be done?

Study is needed to help identify various problems in the teacher workforce to help set benchmarks to reduce class sizes and provide the best service to students.

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

Current education employees do not have the experience nor time to complete the 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 #: 200207

Approval Date: 02/19/2020

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

Data Insight Partners is the ideal candidate for this work because of their proven track record of taking complex, analytical topics and distilling them to their essence in an easy to understand manner that ensures the largest audience possible can engage and meaningfully contribute to the solution.

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	vostin	03/09/2020 13:18:11 PM
Division Approval	bfarra2	03/11/2020 16:38:10 PM
Department Approval	bfarra2	03/11/2020 16:38:13 PM
Contract Manager Approval	bfarra2	03/11/2020 16:38:15 PM
Budget Analyst Approval	mranki1	03/16/2020 14:09:49 PM
BOE Agenda Approval	cbrekken	03/23/2020 10:32:40 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor



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#:	200207 @

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: → Dept. of Education		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Felicia Gonzales, Deputy Superintendent	702-668-4320	fgonzales@doe.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Data Insight Partners, LLC
	Contact Name:	Justin White
	Complete Address:	4350 S. Maryland Parkway Suite 177 Las Vegas, NV 89119
	Telephone Number:	702-613-2248
	Email Address:	Justin@datainsightpartners.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:	March 1, 2020	End Date:	Nov 30, September 15, 2020

1f	Funding:	
	State Appropriated:	
	Federal Funds:	Title IIA
	Grant Funds:	
	Other (Explain):	

Redd
02/14/2020

Purchasing Use Only:

Approval #:

200207 (C)

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$135,000
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p>Data Insight Partners will conduct a comprehensive evaluation of the Nevada teacher workforce to provide a comprehensive look at all the factors that play into Nevada class sizes. In addition to a local evaluation, Data Insight Partners will provide an analysis of national teacher workforce characteristics and trends to help provide the context around local data.</p> <p>This will help inform the scale of various problems in the workforce (e.g. how bad is our teacher supply compared to national statistics) and help set benchmarks to reduce class sizes and provide best in class service to students (e.g. what percent of classroom teachers should be retained within a school each year).</p> <p>Data Insight Partners is the ideal candidate for this work because of their proven track record of taking complex, analytical topics and distilling them to their essence in an easy to understand manner that ensures the largest audience possible can engage and meaningfully contribute to the solution.</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>As former employees within the Nevada K-12 education system, Data Insight Partners staff have decades of experience working with Nevada education data and its information systems. Co-founders of the company, Nathan Trenholm and Justin White, worked as the Clark County School District's Director of Research and Accountability and the Coordinator over the Enterprise Data Warehouse System respectively.</p> <p>Their pertinent experiences include building an interactive application to monitor the teacher recruitment pipeline, building district reports regarding Title I spending that including the allocation of monies for licensed staff, and collecting and reporting state accountability data regarding student-teacher ratios and average class sizes, as well as leading and facilitating a group of national researchers to analyze teacher recruitment and retention trends in the Clark County School District.</p> <p><u>Nevada Comprehensive Class Size Analysis Timeline Constraints</u></p> <p>The 81st session of the Nevada Legislature will meet in January 2021, and it is anticipated that one of the topics that legislators will consider is K-12 class sizes. The Nevada Comprehensive Class Size Analysis is intended to provide all policymakers and stakeholders, accurate and deep insights into the state of Nevada's class sizes past, present, and future. To provide these insights, it is imperative that this analysis is completed in September of 2020 so the Nevada Department of Education can begin providing briefings and training on the results ahead of the legislative session.</p> <p>The selection of a vendor must consider this compressed timeline for this analysis. Data Insight Partners is uniquely positioned to complete this analysis in the allotted time (8 months) because of their unique experience with Nevada systems, processes, and people.</p>
---	---

4	Explain why this service or good cannot be competitively bid and why this purchase is
---	--

#200207(c)

<p>economically only available from a single source:</p> <p>Their expertise with data analysis and in particular their experience with Nevada and local school district systems, processes, and people make Data Insight Partners uniquely qualified to support the Nevada Department of Education in their efforts to analyze all aspects regarding class sizes, student-teacher ratios, and the supply and demand of the teacher workforce.</p> <p>If this service is competitively bid, the Nevada Department of Education would not have the information needed to provide all Nevada policymakers and stakeholders, accurate and deep insights into the state of Nevada's class sizes past, present, and future. To provide these insights, it is imperative that this analysis is completed in September of 2020 so the Nevada Department of Education can begin providing briefings and training on the results ahead of the legislative session.</p>

5	Were alternative services or commodities evaluated? Check One.	Yes:		No:	X
	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?				
There are no other vendors with these unique features/qualifications and services within Nevada.					

Purchasing Use Only:

Approval #:

200207(2)

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:	X
	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	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>This work is essential to the work NDE is engaging in to inform legislative discussions around:</i> <ul style="list-style-type: none"> • Class sizes • Labor market supply and demand • Teacher attrition and retention rates • Workforce demographics pertaining to future staffing needs • Financial trends and future obligations (staffing and capital projects)

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>There were no other vendors found with these unique features/qualifications and services within Nevada.</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 #:

200207(C)

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.



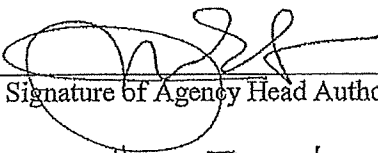
Agency Representative Initiating Request

Felicia Gonzales

Print Name of Agency Representative Initiating Request

1/30/20

Date



Signature of Agency Head Authorizing Request

John Ebert

Print Name of Agency Head Authorizing Request

2/13/20

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

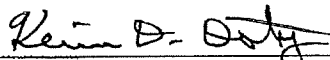
Print Name of Representative Providing Review

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:



Administrator, Purchasing Division or Designee

2/19/20

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: **22922**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2709-21**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-NSHE ON BEHALF OF UNLV**Contractor Name: **BOARD OF REGENTS-NSHE ON BEHALF OF UNLV**Address: **OFFICE OF SPONSORED PROGRAMS
4505 S MARYLAND PKWY MS 451055**City/State/Zip: **LAS VEGAS, NV 89154**Contact/Phone: **Amanda Haboush-Deloye 702-895-5908**Vendor No.: **D35000813B**NV Business ID: **Gov Entity**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 %
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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 90 days**4. Type of contract: **Interlocal Agreement**Contract description: **CCDF Quality**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing evaluations of the Quality Rating & Improvement System and facilitate annual early childhood research symposiums.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$148,790.00**

Other basis for payment: FY20 \$40,790, FY21 \$54,000, FY22 \$54,000.

II. JUSTIFICATION

7. What conditions require that this work be done?

The QRIS (and evaluation of the QRIS) is required as part of the Child Care and Development state plan.

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

The Nevada Institute for Children's Research and Policy (NICRP) is a state agency and has the expertise to complete the program evaluation.

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?

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:

Education-Satisfactory 2020,2019,2018,2017 Ect.

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	bfarra2	03/10/2020 09:24:05 AM
Division Approval	bfarra2	03/10/2020 09:24:08 AM
Department Approval	bfarra2	03/10/2020 09:24:12 AM
Contract Manager Approval	bfarra2	03/10/2020 09:24:17 AM
Budget Analyst Approval	mranki1	03/16/2020 14:11:36 PM
BOE Agenda Approval	cbrekken	03/23/2020 09:57:40 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: **22938**Agency Name: **NDE - DEPARTMENT OF
EDUCATION**Agency Code: **300**Appropriation Unit: **2709-21**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CURRICULUM ASSOCIATES, LLC**Contractor Name: **CURRICULUM ASSOCIATES, LLC**Address: **153 Rangeway Rd**City/State/Zip: **North Billerica, MA 01862**Contact/Phone: **Jill Bradford 978-339-4388**Vendor No.: **T29037897A**NV Business ID: **NV20121607707**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	40.00 %	Fees	0.00 %
X	Federal Funds	60.00 %	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 **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 90 days**4. Type of contract: **Contract**Contract description: **Childhood Screening**

5. Purpose of contract:

This is a new contract to provide training and access to the Brigance Early Childhood Screening Program and Online Management System to allow users to score screenings, run reports for families, and allow the Department to pull data to study program effectiveness.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$355,200.00**

Other basis for payment: Per Itemized Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

As part of the Read by Grade 3 Act (SB391 2015 Legislative Session) a screening must be completed within the first 30 days of kindergarten. In addition the Brigance is now required as part of State Pre-k and the Quality Rating & Improvement System (QRIS).

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

Curriculum Associates is the publisher of the Brigance Early Childhood Screen as well as the OMS. They have the expertise to provide training on the tool.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 #: 191003

Approval Date: 10/18/2019

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:

Education-Satisfactory FY18-FY19

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	bmcDani	03/03/2020 11:49:41 AM
Division Approval	bfarra2	03/12/2020 08:19:38 AM
Department Approval	bfarra2	03/12/2020 08:19:42 AM
Contract Manager Approval	bfarra2	03/12/2020 08:19:47 AM
Budget Analyst Approval	mranki1	03/16/2020 14:11:08 PM
BOE Agenda Approval	cbrekken	03/23/2020 10:13:18 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor



Deanne E. Conline
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#: 19100900

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 Education		
	Contact Name and Title	Phone Number	Email Address
	Patti Oya, Education Programs Director	702-486-6492	poya@doe.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Curriculum Associates LLC
	Contact Name:	Jill Bradford
	Complete Address:	153 Rangeway Rd
	Telephone Number:	800-225-0248
Email Address:	customercontracts@cainc.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:	Jan 1, 2020	End Date: June 30, 2021

1f	Funding:	
	State Appropriated:	X - 2709 State Pre-K
	Federal Funds:	X - Child Care and Development Block Grant (CCDBG)
	Grant Funds:	
Other (Explain):		

Rec'd 10/07/19

Purchasing Use Only:

Approval #:

1910030

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$427,400.00 <i>PER YEAR</i>

2	Provide a description of work/services to be performed or commodity/good to be purchased: 1. Provide training on the use of the Curriculum Associates' Brigance Early Childhood Screen III tool 2. Provide train the trainer to build capacity of trainers in Nevada 3. Per child licenses (\$2.50 per child) for the Curriculum Associates Online Management System (OMS) that will allow scoring reporting at a program and statewide level.
---	---

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor: Curriculum Associates is the sole publisher and vendor of the Brigance Early Childhood Screen III tool and Online Management System that scores, generates reports, and data collection.
---	---

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source: Currently school districts that provide State Pre-K and Kindergarten, child care centers, and community agencies statewide have purchased and are screening children with the Brigance Early Childhood Screen III. There are three screening kits by age group (0-35 months, 3-5 years, and K & 1 st grade.) A 0-35 month kit costs \$309 and a kit for 3-5 year or K & 1 costs \$279 plus the annual cost of scoring sheets \$65 for a pack of 60 for one age group. Depending on the age of children served, programs need to purchase one to three kits and corresponding scoring sheets. Over the past two years, programs have spent \$904,812 for the Brigance and an additional \$30,800 for professional development for a total of \$935,612. (This is in addition to the \$143,847 that NDE spent over the past two years on training.)
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	Were alternative services or commodities evaluated? Check One.	Yes:		No:	X
5	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility. If we cannot provide training to the field, we cannot ensure scores are accurate and valid. Also, if we do not provide access to the Online Management System, programs would have to score the screening by hand, would not have access to report features, and NDE would not be able to collect and report data at a statewide level.				
	b. <u>If not</u> , why were alternatives not evaluated? If an alternative screening is used statewide, there would be significant costs to school districts, child care centers, and community agencies to purchase new materials. It would also be a significant time investment to retrain the community on a new tool. The Department would lose the ability to present longitudinal data with continuity and would need to start again.				

Purchasing Use Only:

Approval #:

1910030

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 #)			
	07/01/2017	6/30/2019	\$281,200	Training on the Brigrance Screen III only (this contract did not include cost of Online Management System)	160904			
			\$					
			\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>During the time that it would require to competitively bid for a screening tool, NDE would not have the capacity to collect data for the 2019/20 school year. This would impact NDE's ability to report longitudinal data across programs that has been collected over the past two years.</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>In December 2015, the Department of Education issued a request for information (RFI) to identify an assessment to meet the requirements of SB391 Read by Grade Three Act. SB391 required an initial kindergarten screener as part of an ongoing suite of assessments that would identify struggling readers. Two vendors were chosen and approved by the State Board of Education. Curriculum Associates was chosen for the initial screening and NWEA MAPS was selected as the assessment for kindergarten through 3rd grade.</i>
	<i>The current NWEA Maps contract will expire June 30, 2021. Prior to that date NDE will complete a request for proposal (RFP) process that will include the screening requirement. Vendors will be able to address the screener separately or as part of their overall assessment suite of tools.</i>

If this waiver is approved, the contract with Curriculum Associates will expire June 30, 2021 to align with the NWEA Maps contract and align the RFP process.

Purchasing Use Only:	
Approval #:	191003 @

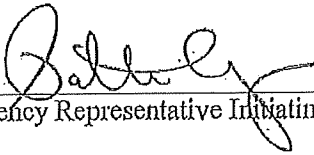
	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. If yes, please provide details regarding future obligations or needs.				
9	In order to collect longitudinal data, the same screening tool must be used over time. The Department now has two years of data from the State Pre-k programs and is just beginning to collect data from other program types. Ultimately early childhood data will be included in the Nevada P-20 Workforce Research Data System (NPWR) - a collaborative project between the Department of Education, Nevada System of Higher Education, and Department of Employment and Training and Rehabilitation maintained by the Governor's Office of Workforce Innovation for a New Nevada (OWINN).				

Purchasing Use Only:

Approval #:

1910020

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.



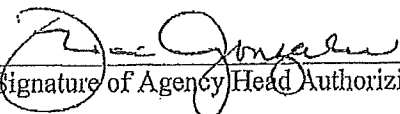
Agency Representative Initiating Request

Patti Oya

Print Name of Agency Representative Initiating Request

9/19/2019

Date



Signature of Agency Head Authorizing Request

FELIX GONZALEZ

Print Name of Agency Head Authorizing Request

9/23/19

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

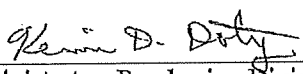
Print Name of Representative Providing Review

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 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.

Approved by:



Administrator, Purchasing Division or Designee

10/8/19

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: **22159** Amendment Number: **2**

Agency Name: **NDE - DEPARTMENT OF EDUCATION** Legal Entity Name: **SRI International**

Agency Code: **300** Contractor Name: **SRI International**

Appropriation Unit: **2709-63** Address: **333 Ravenswood Ave**

Is budget authority available?: **Yes** City/State/Zip: **MENLO PARK, CA 94025-3493**

If "No" please explain: Not Applicable Contact/Phone: **Kim Cargill 650-859-2655**

Vendor No.: **T29040825A**

NV Business ID: **NV20021209683**

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

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	76.90 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	23.10 % Donation Match Funds

Agency Reference #: 300

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2019**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2020**Contract term: **322 days**4. Type of contract: **Contract**Contract description: **Alignment Study**

5. Purpose of contract:

This is the second amendment to the original contract which provides a review of the early learning guidelines, pre-kindergarten standards, NV Silver State Stars Quality Ratings & Improvement System program standards and professional competencies to revise and align the standards across age groups and programmatic elements. This amendment revises the scope of work to add a draft of early childhood leadership competencies, strategies to increase professional development offerings that support higher order thinking and skill acquisition and a draft of the Nevada emerging level workforce competencies.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$152,050.00	\$152,050.00	\$152,050.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$70,000.00	\$70,000.00	\$70,000.00	Yes - Action
3. New maximum contract amount:	\$222,050.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

A study needs to be conducted for the alignment process.

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 the Department of Education cannot do.

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 #30DOE-S598, 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: 04/15/2019 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	bmcdani	03/03/2020 11:39:35 AM
Division Approval	bfarra2	03/11/2020 16:39:18 PM
Department Approval	bfarra2	03/11/2020 16:39:21 PM
Contract Manager Approval	bfarra2	03/11/2020 16:39:30 PM
Budget Analyst Approval	mranki1	03/16/2020 14:09:02 PM
BOE Agenda Approval	cbrekken	03/23/2020 10:42:15 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: **22928**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2712-64**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-NSHE ON BEHALF UNLV**Contractor Name: **BOARD OF REGENTS-NSHE ON BEHALF UNLV**Address: **NEVADA AFTER SCHOOL NETWORK
4505 MARYLAND PKWY BOX 451005**City/State/Zip: **LAS VEGAS, NV 89154-1006**Contact/Phone: **Stephanie Page 702/895-1895**Vendor No.: **D35000815**NV Business ID: **Gov 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.

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? **No** or b. other effective date **01/06/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

The Board of Regents has recently been appointed by the Mott Foundation as the new fiscal sponsoring organization of the statewide Nevada Afterschool Network. Therefore, a new retroactive interlocal agreement is necessary to continue these services through the Board of Regents, NSHE.3. Termination Date: **09/30/2022**Contract term: **2 years and 267 days**4. Type of contract: **Interlocal Agreement**Contract description: **NV Afterschool Netwk**

5. Purpose of contract:

This is a new interlocal agreement to provide technical assistance, professional development resources, network meetings and training in partnership with the state as part of the 21st Century Community Learning Centers program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$73,388.00**

Payment for services will be made at the rate of \$24,463.00 per Per FY20, FY21, FY22

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal program requirements of 21st CCLC include the state providing grantees with technical or other assistance. The partnership with the NSHE/UNLV- Nevada Afterschool Network will increase program outreach and expand resources throughout the state of Nevada.

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

NDE employees do not have the expertise 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?

There is only one statewide afterschool network established through the Mott Foundation in each state in the US.

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:

Education-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	vrutledg	02/24/2020 08:56:12 AM
Division Approval	vrutledg	02/24/2020 09:00:51 AM
Department Approval	bfarra2	03/10/2020 09:22:53 AM
Contract Manager Approval	bfarra2	03/10/2020 09:22:56 AM
Budget Analyst Approval	mranki1	03/16/2020 14:10:09 PM
BOE Agenda Approval	cbrekken	03/23/2020 09:54:46 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Jhone M. Ebert
Superintendent of
Public Instruction



Southern Nevada Office
2080 East Flamingo Rd,
Suite 210
Las Vegas, Nevada 89119-0811
Phone: (702) 486-6458
Fax: (702) 486-6450

STATE OF NEVADA
DEPARTMENT OF EDUCATION

700 E. Fifth Street | Carson City, Nevada 89701-5096
Phone: (775) 687-9200 | www.doe.nv.gov | Fax: (775) 687-9101

~~February 18, 2020~~ March 9, 2020

MEMORANDUM

TO: Susan Brown
Clerk of the Board of Examiners
Governor's Finance Office

THROUGH: Catherine Bartlett
Executive Budget Officer 2, Governor's Finance Office

FROM: Heidi Haartz *Heidi K Haartz*
Deputy Superintendent, Business and Support Services Division

SUBJECT: Title IV, Part B – Nina M. Lowey 21st Century Community Learning Centers
Request for Retroactive Interlocal Contract with the Board of Regents, NSHE in
partnership with the Nevada Afterschool Network (NAN)

This memorandum serves as a request for retroactive approval to January 6, 2020, on a contract with the Board of Regents, NSHE on behalf of the University of Nevada Las Vegas, for the project titled Nevada Afterschool Network. The Nevada Department of Education has previously partnered and contracted with the Nevada Afterschool Network's and their former fiscal sponsors to provide professional development, technical assistance for programs and partner at the annual Showcase Nevada conference for the Title IV, Part B- 21st Century Community Learning Center programs. The Board of Regents has recently been appointed by the Mott Foundation as the new fiscal sponsoring organization of the statewide Nevada Afterschool Network effective October 2019. Therefore, a new retroactive inter local contract is necessary to continue these services through the Board of Regents, NSHE to continue support for afterschool programs. A new scope of work was developed in January but the finalization of the new fiscal sponsor's internal processes and signing of contract documents took more time.

The Nevada Afterschool Network is the sole state network, formed through the Mott Foundation, to provide resources and opportunities for afterschool/out of school time programs in Nevada. The National Network of Statewide Afterschool Networks is focused on the core components of afterschool and summer learning opportunities, engaged learning, school-community partnerships and family involvement.

Over the past 12 years in partnership with the USDE, the Charles Stewart Mott Foundation has made investments in coalitions of diverse stakeholders and organizations coming together to build good policies and practices to sustain and expand quality afterschool and summer learning opportunities. Now reaching over 50 states, the statewide afterschool networks cultivate partnerships and initiatives that develop and support quality afterschool and summer learning opportunities for young people. The goal is to engage schools, community-based organization

and other entities in providing youth with access to high-quality afterschool programs. We appreciate your consideration of this request for retroactive approval.

Attachment(s): Interlocal Contract for the Board of Regents, NSHE for NAN

CC: Maria Sauter, Education Programs Professional, Office of Student & School Supports
 Dr. Seng Dao Keo, Director, Office of Student & School Supports
 Dr. Jonathan Moore, Deputy Superintendent of Student Achievement

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: **18152**Amendment
Number: **3**Agency Name: **NDE - DEPARTMENT OF
EDUCATION**Legal Entity
Name: **SPECIAL EDUCATION LAW
ASSOCIATES, LLC**Agency Code: **300**Contractor Name: **SPECIAL EDUCATION LAW
ASSOCIATES, LLC**Appropriation Unit: **2715-14**Address: **14904 E LOWDEN CT**Is budget authority
available?: **Yes**City/State/Zip **SCOTTSDALE, AZ 85262-7012**

If "No" please explain: Not Applicable

Contact/Phone: **Gail Imobersteg 480/471-1151**Vendor No.: **T27015548**NV Business ID: **NV20181925280**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 %
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 **No** or b. other effective date **01/01/2017**
Examiner's approval?

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

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

Termination Date:

Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Dispute Resolution**

5. Purpose of contract:

This is the third amendment to the original contract which provides assistance in the implementation of the Special Education alternative dispute resolution systems in accordance with federal and state laws and regulations. This amendment increases the maximum amount from \$500,000 to \$620,000 due to the increase in special education complaints and special education due process hearing requests.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$500,000.00	\$500,000.00	\$500,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#3):	\$120,000.00	\$120,000.00	\$120,000.00	Yes - Action
3. New maximum contract amount:	\$620,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal and state laws require that the State of Nevada have Special Education alternative dispute resolution systems in accordance with required procedures.

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

The scope of work and the qualifications require specialized expertise and a non-employee status that cannot be met with the agency or other state agency.

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?

There were no other potential vendors with similar qualifications and experience. The individuals with some similarity in qualifications and experience lack comprehensive experience of the contractor and/or present the local education agencies or parents and do not meet the neutrality requirement in this contract.

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 Education - the quality of services 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:

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	bfarra2	03/02/2020 11:01:45 AM
Division Approval	bfarra2	03/02/2020 11:01:50 AM
Department Approval	bfarra2	03/02/2020 11:01:55 AM
Contract Manager Approval	bfarra2	03/02/2020 11:01:59 AM
Budget Analyst Approval	mranki1	03/16/2020 14:10:39 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: **22904**

Agency Name:	ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS	Legal Entity Name:	CALIFA GROUP
Agency Code:	332	Contractor Name:	CALIFA GROUP
Appropriation Unit:	2895-04	Address:	330 Townsend Street, Ste. 133
Is budget authority available?:	Yes	City/State/Zip	SAN FRANCISCO, CA 94107
If "No" please explain:	Not Applicable	Contact/Phone:	650-356-2128
		Vendor No.:	T32005920
		NV Business ID:	NV20171780554

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

Agency Reference #: ASD 2833895

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

While we determined the scope of the next contract the vendor did not suspend access to services. We've instructed the vendor that in the future, any services should wait until a contract has been signed. We do not anticipate this to be an ongoing problem. However, this contract needs to have a retroactive start date of 01/01/2020.

3. Termination Date: **01/01/2022**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **ETEAP**

5. Purpose of contract:

This is a new contract to provide ongoing deployment of virtual reality equipment, software, content, technical support and continuing education to Nevada libraries.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00**

Other basis for payment: 50K for FY20; 50K for FY21

II. JUSTIFICATION

7. What conditions require that this work be done?

The Califa Group - through XR Libraries - will maintain and enhance the XR pilot program in Nevada through ongoing technical support related to hardware and software issues; access to curated XR content (to include Lifelique); continuing education/training and programming support all accessible through the XR Learn portal interface using Springboard. Focus is also placed on the Libraries = Education initiative and XR content creation (360 videos). Phase II; starting Jan. 2020; Dec 31, 2021, includes memberships for 21 libraries, namely: Carson City Library; Churchill County High School; Churchill County Library; Douglas County; Elko-Lander-Eureka; Henderson; Humboldt County; Humboldt County; McDermitt; LVCCLD - Teen Tech Center; LVCCLD - West Las Vegas; Lyon County; Mineral County; Nevada State Library; North Las Vegas; Pershing County High School; Tonopah Library District; Washoe; Downtown; Washoe - South Valleys; Washoe; Sparks; Washoe - Sierra View; Washoe - Incline Village and 3 bookmobiles, namely Elko, Lander Eureka; Humboldt and Lincoln.

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

State of Nevada Library employees do not have the breadth of technology skills or subject matter expertise to provide technical support for virtual reality equipment or content. Nor do staff have the ability to curate virtual reality content within a library-centric portal. Further staff do not possess the capacity or expertise to lead training in creating XR content, to include the production of 360 videos.

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 #: 200206
Approval Date: 02/13/2020

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:

Tammy Westergard, Administrator Ph: 684-3306

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	02/24/2020 12:09:05 PM
Division Approval	ssands	02/24/2020 12:09:09 PM
Department Approval	ssands	02/24/2020 12:09:12 PM
Contract Manager Approval	ssands	02/24/2020 12:09:15 PM

EITS Approval	tgalluzi	03/05/2020 17:31:22 PM
Budget Analyst Approval	mlynn	03/19/2020 12:23:12 PM
BOE Agenda Approval	nhovden	03/19/2020 12:42:48 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#: 200206 (2)

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: State Library and Archives		
	Contact Name and Title	Phone Number	Email Address
	Tammy Westergard, Administrator	(775) 684-3306	twestergard@admin.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Califa Group
	Contact Name:	Paula MacKinnon
	Address:	330 Townsend St., Suite 133 San Francisco, CA 94107
	Telephone Number:	415-796-3901
Email Address:	pmackinnon@califa.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:	January 2, 2020	End Date:

1f	Funding:	
	State Appropriated:	FY2020 Fund 101 General Fund Agency 332 Budget Account 2891 Category 27 The State Library and Archives (NSLA) annual projected expenditures of each year of the 2019-21 biennium. \$50 K per year for initial contract of 2 years with the option to renew for an additional two years.

	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:	
Approval #:	200206 CD

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	<p>\$50,000 per year the above services/materials. (\$2,000 per participating library or bookmobile for the 22 participating libraries and 3 bookmobiles).</p> <p>LIBRARIES (22)</p> <ol style="list-style-type: none"> 1. Carson City Library; 2. Churchill County High School; 3. Churchill County Library; 4. Douglas County; 5. Elko-Lander-Eureka; 6. Henderson; 7. Humboldt County; 8. Humboldt County – McDermitt; 9. LVCCLD - Teen Tech Center; 10. LVCCLD - West Las Vegas; 11. Lyon County; 12. Mineral County; 13. Nevada State Library; 14. North Las Vegas; 15. Pershing County High School; 16. Tonopah Library District; 17. Washoe – Downtown; 18. Washoe - South Valleys; 19. Washoe – Sparks; 20. Washoe - Sierra View; 21. Washoe - Incline Village 22. College of Southern Nevada <p>Bookmobiles (3)</p> <ol style="list-style-type: none"> 23. Elko Lander Eureka 24. Humboldt 25. Lincoln

2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p>1. HARDWARE AND TECH SUPPORT</p> <p>Califa will provide NSLAPR continued tech support to the libraries for the 15 HTC Vive VR systems from Phase I.</p> <p>Califa will provide NSLAPR tech support for one additional library for the HTC Vive VR system, for Phase II, installations for the College of Southern Nevada.</p> <p>Califa will provide NSLAPR technology to 22 library systems for Oculus Go and Oculus Rift headsets.</p> <p>Califa will provide NSLAPR technology to 3 bookmobiles for 15 Oculus Gos (five per bookmobile for circulation to libraries = education partners)</p> <p>2. XR CONTENT</p> <p>Califa will provide NSLAPR access to XR curated content; training and tech support for the 22 selected libraries and three bookmobiles. This includes access to the XRLearn portal that will provide the above referenced support resources for library staff about XR technology, capabilities, applications in libraries, and best practices.</p> <p>Califa will provide access to STEM educational, premium VR titles, to include VR content creator through the XR Learn portal.</p> <p>3. CONTINUING EDUCATION</p> <p>Califa will provide a minimum of monthly webinars centered on the technology issues related to the VR systems through our training project. Califa will support NSLAPR in developing webinars that build on the foundation laid by the first phase of this pilot program; and ensure that they are targeted toward a more experienced audience, i.e. under the assumption that the library staff member has experience with XR. Califa will also support the creation of in-depth tutorials on the equipment and technology associated with XR, as well as demonstrations and examples of XR programming.</p> <p>Califa will also support further training that will focus on teaching librarians how to create 360 video(s), as well as provide instruction on how to use 360 camera equipment and related production and software license access for all libraries.</p> <p>Califa will contribute to program success through evaluation and assessment partner of library programs.</p>
	<p>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</p> <p>The unique features required not available from any other consortia vendors are:</p> <ul style="list-style-type: none"> ▪ https://icolc.net/consortia please see this list of all library consortia in the world – this can be reviewed to confirm no other library consortia provide this content, continuing education and technology support. 1) Access to the 3D tools, content, continuing education 2) Technology support for the hardware systems 3) The 3D learning modules that engage partners as a community of practice help member libraries continue the deployment of these educational resources <p>BACKGROUND OF A UNIQUE PILOT PROGRAM:</p>

With the help of subject matter experts from Califa's *XR Libraries* Nevada public libraries have launched a pilot program installing virtual and augmented reality experiences or extended reality, commonly called XR. Nevada's *XR Libraries* have been focused on familiarizing librarians with the technical aspects of using XR and creating educational programs. General community access and focused education and workforce training partnerships have also rolled out. Each pilot library has been provided with 1 HTC Vive headset; an XR system-ready computer capable of running virtual reality educational and STEAM content software, and robust training and tech support. In collaboration with area schools, after school providers, workforce training partners and more, library staff facilitates programming through leveraging onsite technology space and programs. The Nevada XR Libraries pilot program is focused on workforce development with emphasis on career exploration and classroom "homework help."

In order to make accessible this program into Phase II, the Nevada State Library, Archives and Public Records (NSLAPR) requires assistance from Califa continuing this program.

Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:

<https://icolc.net/consortia> please see this list of all library consortia in the world – this can be reviewed to confirm no other library consortia provide this content, continuing education and technology support.

Features not available from any other vendor are described below; therefore, the unique required qualities of the platform necessitate sole sourcing:

4

- Access to the Califa XR Learn platform provides the necessary program elements: 3D content, professional development and technology hardware and software support.
- The in place connection to the comprehensive Nevada-first 3D learning ETEAP does not exist with any other library consortia;
- The STEM-focused, curated content for the NV XR Libraries is unique and reflects a focus on STEM education that create valuable learning to replicate the deployment of this program through all Nevada libraries;
- The infrastructure that drives Califa's AR/VR resources, continuing education and tech support combines to deliver to the Phase II member libraries

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.***

5

Yes, we did inquire please see consortia noted above. No other library consortia have 3D STEM content in their services for purchase. Further, none have integrated coordination of content access, professional development and technology hardware and software support. The combination of the unique assets is essential to the success of the unique program with member libraries.

b. ***If not, why were alternatives not evaluated?***

Purchasing Use Only:

Approval #:

#2000000

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:	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#, RFO#, Waiver #)		
	3-2-2019	12-31-19	\$30,000	To continue the first phase of the XR Libraries project to the end of 2019	New contract to provide ongoing deployment of virtual reality equipment and software/content, tech support and continuing education to 15 Nevada libraries		
	9/2019	9-30-2020	\$245,000	CSN project – for the workforce development healthcare/dialysis technician	Waiver 190701		
	6-20-2018	12-31-18	\$22,000	Emerging Technology Early Adopter Program (ETEAP) CETS#200003	New contract		

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	Much of the progress we have made to date will be lost. The second phase of the Nevada XR Libraries pilot to facilitate immersive 3D programs and the integration of these resource into local school classrooms, hinges on this unique combination of assets and services. If this waiver is denied it is unclear how we will be able to move forward in the pilot. At the end of 4 years if other library consortia have 3D services, resources, technology training opportunities to expand providers will allow wider solicitation, at this moment Califa is the only consortia to have these 3D resources

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 previously noted, there are no other vendors that are part of this first of its kind emerging technology pilot program. We have substantiated this by talking to vendors, website analysis, email inquiries. The quality of this pilot program is driven from the combination of these subject matter experts. The easy to use Califa program delivers services that interface of the ETEAP pilot program. The Phase II ETEAP program is priced fairly and is reasonable. Year after year, NSLAPR licenses many information resources on various platforms and the price for this resource is comparable to resources analogous to this. We are wholly familiar with industry pricing and trends and this is a reasonable price.

#20000002

	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:	
9	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
	<p>https://icolc.net/consortia please see this list of all library consortia in the world – this can be reviewed to confirm no other library consortia provide this content, continuing education and technology support.</p> <p>At the end of 4 years if other library consortia have 3D services, resources, technology training opportunities to expand providers will allow wider solicitation, at this moment Califa is the only consortia to have these 3D resources.</p>				



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Nevada State Library, Archives and Public Records
100 N. Stewart Street | Carson City, Nevada 89701
Phone: (775) 684-3313 | TDD: (775) 687-8338 | Fax: (775) 684-3311

DATE: March 10, 2020

TO: Susan Brown
Clerk of the Board of Examiners
Governor's Finance Office – Budget Division

THROUGH Michele Lynn, Executive Branch Budget Officer
Governor's Finance Office

FROM: Tammy Westergard 
Administrator, Nevada State Library, Archives and Public Records

RE: Request for Retroactive Contract with Califa Group

This memorandum serves as a request for retroactive approval to January 1, 2020 on a contract with Califa Group. The contract is necessary for the Phase II deployment of the Emerging Technology Early Adopter Program (NVXR Libraries). The vendor's program partners have made maintenance updates, provided technology hardware support, access to content and conducted professional development training for the phase II pilot libraries.

Program staff did not realize this contract required both a Solicitation Waiver and Technology Investment Notification (TIN) in order to move the contract through the approval process. Both were authorized, 2-12-2020 and 3-6-2020, respectively.

In anticipation of needing to deepen knowledge of the State's procurement processes and integrated divisional requirements impacting contracts, six NSLAPR staff completed the Certified Contract Manager course offered by the State Purchasing Division. On February 25 all were awarded certificates of completion (predicated on passing the exam). Additionally, NSLAPR's program managers will work more closely with the Administrative Services Division. At present the NSLAPR administration is operating with both assistant administrator positions vacant, which is adding additional strain on operations and causing delays. One of these positions has been vacant for the past 18 months and the other since October 2019. Steps to fill these positions are underway and we anticipate being complete at the beginning of the fiscal year, but not until then. We appreciate your patience and understanding. Once fully and appropriately staffed we do not anticipate this to be an ongoing problem.



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

MEMORANDUM

TO: Tammy Westergard, Administrator, NSLA
Suzie Block, IT Chief, EITS
Jeanne Peat, Budget Analyst, ASD

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 – *ETEAP NVXR Libraries Phase II* – T289141

DATE: March 05, 2020

We have completed the review for Nevada State Library and Archives' (NSLA) – *ETEAP NVXR Libraries Phase II* TIN.

The submitted TIN, for an estimated \$50,000, with an option for renewal, supports the renewal and update of a maintenance, licensing or consulting agreement already in place. With the help of subject matter experts from Califa's *XR Libraries* Nevada public libraries have launched a pilot program installing virtual and augmented reality experiences or extended reality, commonly called XR. *Nevada's XR Libraries* have been focused on familiarizing librarians with the technical aspects of using XR and creating educational programs. General community access and focused education and workforce training partnerships have also rolled out. Each pilot library has been provided with 1 HTC Vive headset; an XR system-ready computer capable of running virtual reality educational and STEAM content software, and robust training and tech support. In collaboration with area schools, after school providers, workforce training partners and more, library staff facilitates programming through leveraging onsite technology space and programs. The Nevada XR Libraries pilot program is focused on workforce development with emphasis on career exploration and classroom "homework help."

This solution will not contain or transmit State data and will not be on the State network.

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: **22940**Agency Name: **DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE**Agency Code: **400**Appropriation Unit: **3195-69**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CENTER FOR APPLIED MANAGEMENT**Contractor Name: **CENTER FOR APPLIED MANAGEMENT**Address: **PRACTICES INC, THE 320 LAMP POST LN**City/State/Zip: **CAMP HILL, PA 17011-1460**Contact/Phone: **717/730-3705**Vendor No.: **T27041947**NV Business ID: **NV20181329349**To what State Fiscal Year(s) will the contract be charged? **2020-2025**

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 **6.70 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **93.30 % Funds for Healthy Nevada**Agency Reference #: **RFP # 40DHHS-S874**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2025**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Case Management**

5. Purpose of contract:

This is a new contract to provide a comprehensive case management system for use in Community Action Agencies, Family Resource Centers and other agencies, as necessary.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

DHHS, Grants Management Unit is in need of a case management software system

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

This is a specialized system that DHHS will use to enhance case management services and reporting from its providers.

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):

**InLumon
GRM Information Management Services
BitFocs Inc**b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #40DHHS-S874, 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: 11/24/2019 Anticipated re-bid date: 11/01/2024

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?

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	tmilazz1	02/26/2020 10:08:36 AM
Division Approval	tmilazz1	02/27/2020 14:10:04 PM
Department Approval	mwinebar	03/02/2020 16:39:48 PM
Contract Manager Approval	tmilazz1	03/05/2020 09:06:12 AM
EITS Approval	daxtel1	03/05/2020 11:09:46 AM
Budget Analyst Approval	bwooldri	03/13/2020 15:30:10 PM
BOE Agenda Approval	bwooldri	03/13/2020 15:30:14 PM
BOE Final Approval	Pending	

Steve Sisolak
Governor



Patrick Cates
Director

Michael Dietrich
State CIO

David Haws
EITS Administrator

**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

DATE: February 15, 2019

TO: Lorraine McMullen, OIT ITP III IT Project Manager, DPBH
Crystal Johnson, SSPS3, DPBH
Thomas Milazzo, MA4, DPBH
Vanessa Alpers, Deputy Director, DPBH

CC: David Haws, Administrator, DOA, EITS

FROM: David Axtell, Chief Enterprise Architect (Acting Technical Investment Administrator), DOA, EITS

SUBJECT: TIN Review: Case Management and Statewide Reporting System for Community Action Agencies (T400181010142054)

We completed the review of the *Case Management and Statewide Reporting System for Community Action Agencies* TIN.

This TIN documents DPBH's move to bring a client/cast management and analysis software system under state oversight and management to better align grant funds to clients.

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: **20042**Amendment
Number: **1**Agency Name: **DHHS - AGING AND DISABILITY
SERVICES DIVISION**Legal Entity
Name: **THOMAS TANNEHILL DBA ET&M
REFRIGERATION**Agency Code: **402**Contractor Name: **THOMAS TANNEHILL DBA ET&M
REFRIGERATION**Appropriation Unit: **3279-07**Address: **PO BOX 90418**Is budget authority
available?: **Yes**City/State/Zip **HENDERSON, NV 89009**

If "No" please explain: Not Applicable

Contact/Phone: **Carmen Goodman 702/564-3511**Vendor No.: **T29040547**NV Business ID: **NV20171426322**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.

X	General Funds	41.00 %	Fees	0.00 %
X	Federal Funds	57.70 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	1.30 % CLIENT PAYMENTS

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **07/01/2018**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2020**

Termination Date:

Contract term: **4 years**4. Type of contract: **Contract**Contract description: **HVAC**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing inspection and repair services for facility air conditioning systems. This amendment extends the termination date from June 30, 2020 to June 30, 2022 and increases the maximum amount from \$35,358 to \$60,358 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:	\$35,358.00	\$35,358.00	\$35,358.00	Yes - Info
2. Amount of current amendment (#1):	\$25,000.00	\$25,000.00	\$60,358.00	Yes - Action
3. New maximum contract amount:	\$60,358.00			
and/or the termination date of the original contract has changed to:	06/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

Per Code of Federal Regulations Title 42, Chapter 483.70 Physical Environment, the facility must be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public. Air Conditioning/Heating units must be operational at all times to maintain a safe, comfortable living environment for people who live on campus and to prevent costly breakdown of units.

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 necessary tools or expertise 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):

A-1 Mechanical
Sun City Heating & Cooling
Southwest Air
Number One Plumbing, Heating & Air
Ideal Services
HVAC Connection LLC
Hacienda Air
ET&M Refrigeration
Climate Control Experts
Anytime Plumbing
Cal Air

- b. Solicitation Waiver: **Not Applicable**

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

The vendor was chosen because they were able to provide a reliable maintenance schedule and fair charges for services.

- d. Last bid date: 03/19/2018 Anticipated re-bid date: 01/10/2022

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:

ADSD 7/1/2018 - current. 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	dbowma1	02/13/2020 07:04:57 AM
Division Approval	dbowma1	02/13/2020 07:05:00 AM
Department Approval	mwinebar	02/21/2020 11:17:08 AM
Contract Manager Approval	ltuttl1	02/21/2020 13:21:51 PM
Budget Analyst Approval	jyou23	02/27/2020 08:30:22 AM
BOE Agenda Approval	bwooldri	02/28/2020 10:30:12 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: **22923**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3158-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MERCER US, INC. DBA Mercer Health and Benefits, LLC**Contractor Name: **MERCER US, INC. DBA Mercer Health and Benefits, LLC**Address: **2325 E. Camelback Road Suite 600**City/State/Zip: **Phoenix, AZ 85016**Contact/Phone: **Fred Gibson 602-522-6500**Vendor No.: **T32007146**NV Business ID: **NV20051573788**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	50.00 %	Fees	0.00 %
X	Federal Funds	50.00 %	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 **04/14/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **1 year and 169 days**4. Type of contract: **Contract**Contract description: **Procurement Assist**

5. Purpose of contract:

This is a new contract to provide assistance with the re-procurement of the Medicaid Managed Care Organization program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$394,825.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The State requires assistance with ensuring compliance with State and Federal rules, regulations and sub-regulatory guidance for RFP development.

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 with combined State and Federal regulatory experience 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):

**Navigant Consulting
 Peter Harbage Consulting
 Manatt, Phelps and Phillips**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S1013 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: 01/03/2020 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?

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 vendor with DHCFP. Satisfied.

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	rmille8	03/04/2020 08:42:24 AM
Division Approval	rmille8	03/04/2020 08:42:26 AM
Department Approval	mwinebar	03/05/2020 11:19:54 AM
Contract Manager Approval	rmille8	03/09/2020 11:05:29 AM
Budget Analyst Approval	laaron	03/12/2020 14:23:40 PM
BOE Agenda Approval	bwooldri	03/13/2020 14:31:08 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: **22568**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3219-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Board of Regents, Nevada System of Higher Education

Contractor Name: **Board of Regents, Nevada System of Higher Education**Address: **Nevada State Public Health Lab
1664 N. Virginia St.**City/State/Zip: **Reno, NV 89557**

Contact/Phone: Stephanie Van Hooser 775-682-6205

Vendor No.: D35000816

NV Business ID: Governmental Entity

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 %

Agency Reference #: C 17497

2. Contract start date:

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

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

A delay in the final award and a decrease in budget caused revisions and approval process delays. Please see attached retroactive request memo.3. Termination Date: **12/31/2020**Contract term: **1 year**4. Type of contract: **Interlocal Agreement**Contract description: **Laboratory Testing**

5. Purpose of contract:

This is a new interlocal agreement that continues ongoing laboratory testing on all acid-fast bacilli smear and culture requests from healthcare providers and referring laboratories.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,377.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This contract is required to be in compliance with the CDC grant for laboratory testing Mycobacterium Tuberculosis.

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

NSHE employees will be performing the work at the Nevada State Public Health Laboratory (NSPHL).

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?

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?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

8%

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 perform services for each other - 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	kquinter	03/04/2020 14:10:02 PM
Division Approval	kquinter	03/04/2020 17:00:06 PM
Department Approval	mwinebar	03/05/2020 11:33:31 AM
Contract Manager Approval	tgrundy	03/12/2020 14:34:53 PM
Budget Analyst Approval	afrantz	03/12/2020 15:08:06 PM
BOE Agenda Approval	bwooldri	03/13/2020 10:08:55 AM
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

DATE: February 7, 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: Julia Peek
*Deputy Administrator, Division of Public and Behavioral Health
Office of Public Health Investigations and Epidemiology (OPHIE)*

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – C 17497

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: Nevada State Public Health Laboratory (NSPHL), Board of Regents, Nevada System of Higher Education
- Services to be provided: Conduct laboratory testing on specimens for rapid identification and reporting of *Mycobacterium tuberculosis* (*M.tb.*) presence or absence and additional tuberculosis related laboratory testing.
- Funding source and expenditure category: 3219-14; Centers for Disease Control and Prevention (CDC) Grant CDC-RFA-PS20-2001
- Requested start date of work: January 1, 2020
- Expected execution date of agreement April 14, 2020
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - The contractual process began in August of 2019 when the initial CDC Grant year 2020 budget was developed. The CDC requested a revision in this submitted budget as funding was decreased for the grant year 2020. A new budget was developed between the NSPHL and the OPHIE TB Program and submitted October 4, 2019. The University of Nevada Board of Regents and NSPHL received the interlocal contract C 17497 for review and approval November 8, 2019. Final Notice of Award from the CDC was obtained December 13, 2019. NSPHL returned signed contract to the program on February 6, 2020.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: Rapid identification of *M. tb.* is necessary for the public health of all Nevadans. Delaying funding to the Nevada State Public Health Laboratory will potentially create a delay in the order and acquisition of supplies necessary to carry out the primary objective, identifying *M. tb.*

Revised 8/19

Public Health: Working for a Safer and Healthier Nevada

- Explain how the program/bureau will prevent future retroactive requests: OPHIE TB Program understands the need to initiate the negotiation process as soon as reasonably possible. Obtaining the approved federal funding amount is key to this process.

If you have any questions, please contact Susan McElhany, OPHIE TB, at (775) 684-5936 or smcelhany@health.nv.gov.

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: **22830**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Netsmart Technologies, Inc.
Agency Code:	406	Contractor Name:	Netsmart Technologies, Inc.
Appropriation Unit:	3223-12	Address:	4950 College Boulevard
Is budget authority available?:	Yes	City/State/Zip	Overland Park, KS 66211
If "No" please explain:	Not Applicable	Contact/Phone:	Jeff Matthews 913-202-1660
		Vendor No.:	PUR0003686
		NV Business ID:	NV20101021052

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

Agency Reference #: C 17570

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 90 days**4. Type of contract: **Contract**Contract description: **ScriptLink**

5. Purpose of contract:

This is a new contract to implement an approved technology investment which provides Avatar Webservices and Avatar ScriptLink to the division's Electronic Health Record, myAvatar, Avatar Web Services and Scriptlink which will substantially improve the completeness and integrity of client data.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,699.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Functionality from Avatar Webservices and Avatar ScriptLink is necessary to allow the behavioral health agencies to provide more efficient and accurate mandated Federal reporting of patient care.

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 expertise or have rights to the proprietary software.

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 #: 200109

Approval Date: 01/28/2020

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:

Vendor has provided services for DPBH since 7/04 - 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	ttlto1	03/13/2020 10:55:47 AM
Division Approval	ttlto1	03/13/2020 10:55:51 AM
Department Approval	mwinebar	03/16/2020 14:50:40 PM
Contract Manager Approval	cmoriart	03/17/2020 09:45:23 AM
EITS Approval	tgalluzi	03/17/2020 10:57:32 AM
Budget Analyst Approval	afrantz	03/18/2020 10:34:41 AM
BOE Agenda Approval	bwooldri	03/20/2020 09:38:26 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#:

200109



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	
	Contact Name and Title	Phone Number	Email Address
	DPBH Contract Unit	(775) 684-5915	contractunit@health.nv.gov
	Jeff Rahme, IT Professional 4	(775) 684-5988	jrahme@health.nv.gov
Erin Williams, IT Manager 3	(775) 684-4213	williams@health.nv.gov	

1b	Vendor Information:	
	Identify Vendor:	Netsmart Technologies
	Contact Name:	Cheryl Riddle
	Complete Address:	4950 College Boulevard Overland Park, KS 66211
	Telephone Number:	(913) 242-6290
Email Address:	contracts@ntst.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:	Upon Approval	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	X
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

HA001090

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$100,699
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>The Division of Public and Behavioral Health supports several behavioral health agency hospitals and service clinics throughout the state including Northern Nevada Adult Mental Health Services (NNAMHS), Southern Nevada Adult Mental Health Services (SNAMHS), Stein Hospital, Lakes Crossing Center, Rawson Neal Psychiatric Hospital, Outpatient services and Rural Clinics services. These facilities use the Netsmart myAvatar Electronic Health Record (EHR) to record patient personal and clinical information. The product to be integrated into myAvatar EHR is called the Avatar Web Services Suite. The suite, which includes Avatar Webservices and Avatar ScriptLink, provides the ability for staff to enhance workflows, customize application behaviors and customize application forms (by location, if desired) without the need for vendor assistance. This functionality will allow the behavioral health agencies to provide more efficient and accurate mandated Federal reporting of patient care. Because both the Avatar forms and the Avatar Web Services use the same processes to add and modify data, data from the Avatar forms is entered into the database through an Avatar Web Service with consistency and efficiency. Additionally, data entered in one area/form of the application can be displayed in a different area/form, streamlining staff access to clinical information. An additional benefit of this functionality is that as staff is entering information, they will be prompted to ensure that they update other related fields. Utilizing the enforcement of these types of rules substantially improves the completeness and integrity of client data by minimizing the entry of duplicate or incorrect data into a client health record.</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>Netsmart has a comprehensive suite of solutions and services that further extends the connectivity, interoperability and functionality designed and tailored specifically for behavioral health agencies. The suite of solutions is proprietary and, as such, a comprehensive, secure, cost-effective and seamless integration of the existing electronic health record (Netsmart myAvatar) and the Avatar Web Services Suite from another company cannot be achieved.</i></p> <p><i>The Avatar Web Services Suite was developed by Netsmart Technologies with the ability to seamlessly integrate exclusively into the myAvatar software application. Since the myAvatar software is proprietary to Netsmart, other third-party vendors would not have access to the code to be able to build and integrate their own web services suite into Netsmart myAvatar.</i></p> <p><i>Netsmart has successfully integrated the Avatar Web Services Suite into myAvatar in several counties in California including Placer, San Mateo and Monterey.</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 Avatar Web Services Suite was developed specifically to integrate directly into the Netsmart myAvatar proprietary software code. Other vendors do not have access to the code or the hosting environment, so if other vendors were to develop a web services suite, they would first be required to obtain software rights from Netsmart and would be charged for a connection to the Netsmart Plexus Cloud where the myAvatar servers are hosted. Historically, Netsmart has charged large fees for</i></p>
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professional services and rights to connect to their Plexus Cloud. Additionally, project risk would be greatly minimized if the Netsmart Avatar Web Services Suite is utilized because Netsmart would be performing the integration into their own proprietary product. This inherently reduces system errors and increases patient safety and data security.

Were alternative services or commodities evaluated? Check One.	Yes:	No:	X
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 no</u> , why were alternatives not evaluated?			
<p>5 Netsmart myAvatar is a proprietary product developed exclusively by Netsmart Technologies. The Netsmart Avatar Web Services Suite was also developed exclusively under the direction of Netsmart for integration directly into the myAvatar software code.</p> <p>Netsmart created the existing electronic health record system, myAvatar, and has previously implemented the integrated Avatar Web Services Suite solution with other institutions. As a result, Netsmart has proven that they have built, implemented and maintained a comprehensive, unified solution that can be integrated into myAvatar. Netsmart's intimate knowledge of the software integration process will result in significant savings to the State regarding this project's investments relating to budget, development, implementation and maintenance. Having Netsmart integrate the Avatar Web Services Suite solution into myAvatar will also result in a considerable reduction to project risk which increases patient safety and data integrity.</p> <p>Even if other web services were available from other vendors, it is unlikely that Netsmart would allow third-party software code to be integrated into the myAvatar software application. In the unlikely event that Netsmart did allow rights to their software code, the Plexus Cloud and integration of their product, the high fees that Netsmart would charge would prevent the execution of this contract.</p>			

Purchasing Use Only:

Approval #:

#200109 @

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 <u>ALL</u> previous waivers <u>MUST</u> accompany this request.			Yes:		No:	X
	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 #)	
			\$				
			\$				
			\$				
			\$				

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	Currently, the effort required of Division staff to collate the data required for Federal client health reporting is extremely cumbersome and time-consuming due to data duplication and error. The employment of the web services functionality will greatly reduce data duplication and errors and also greatly reduce the effort required to prepare the reports for submittal. If this waiver is denied, this functionality will be unable to be implemented because the costs of attempting to integrate the services from another vendor would be prohibitive. Staff time and effort to clean data and generate reports for Federal reporting will remain intensive and cumbersome due to the current state of data duplication and incorrect data.

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?
	Netsmart verified that the Avatar Web Services Suite is a proprietary product that was developed with the intention to integrate exclusively with Netsmart myAvatar.
	Costs for Netsmart's professional services are comparable to the State of Nevada's MSA contractor negotiated rates.

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.				
	Beginning in Year 2 (FY21), Netsmart will charge an annual fee for the licensing, hosting and maintenance of the Avatar Web Services Suite. Year 2 will be \$13,230. Netsmart adds an average of 4% each year to ongoing maintenance costs amounts to \$13,759 for Year 3 (FY22) and \$14,310 for Year 4 (FY24).				

Purchasing Use Only:

Approval #:

#200109 (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.

Richard Morse

Agency Representative Initiating Request

Rick Morse, MA III

Print Name of Agency Representative Initiating Request

1/16/2020

Date

Kelli Quintero

Signature of Agency Head Authorizing Request

Kelli Quintero, ASO III

Print Name of Agency Head Authorizing Request

1/17/2020

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.

***NOTE:**

TIN Approval letter from EITS dated 01/06/2020

Name of agency or entity who provided information or review:

Agency is advised to include TIN approval as an attachment in CETS. Additionally, agency is advised to engage the State OIS unit to help verify solution security elements.

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: **See Above NOTE**

Kevin D. Doty

Administrator, Purchasing Division or Designee

1/28/20

Date

Steve Sisolak
Governor



Peter Long
Interim 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: Debi Reynolds, Deputy Administrator, DPBH
Christina Hadwick, ASO IV, DPBH
Erin Williams, OIT IT Manager III, 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, DOA, EITS

SUBJECT: TIN Review Completed: DPBH – *Avatar Web Services Suite and Avatar ScripLink*- T406191028082028

DATE: January 06, 2020

We completed the review of the Division of Public and Behavioral Health's (DPBH) – *Avatar Web Services Suite and Avatar ScripLink* TIN.

The submitted TIN, for an estimated \$100,699, 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 submitted TIN is for DPBH to procure the Avatar Web Services Suite, which includes Avatar Web Services and Avatar ScriptLink, providing the ability for staff to enhance workflows, customize application behaviors and customize application forms without the need for vendor assistance. This functionality will allow Behavioral Health Agencies using Avatar to provide more efficient and accurate Federal reporting of patient care. The solution appears to provide a great deal of flexibility for reporting and reviewing information.

Given that the solution includes the processing of sensitive patient data it would be prudent for the agency to engage the State OIS unit to help verify solution security elements. OIS has a significant set of tools that allows them to determine where potential security holes may exist and how to plug them. The Office of Information Security (OIS) is available for pre and post-implementation security review, at no additional cost, so any potential security risks can be identified and mitigated.

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.



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: Debi Reynolds, Deputy Administrator, DPBH
Christina Hadwick, ASO IV, DPBH
Erin Williams, OIT IT Manager III, 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, DOA, EITS

SUBJECT: TIN Review Completed: DPBH – *Avatar Web Services Suite and Avatar ScripLink*- T406191028082028

DATE: January 06, 2020

We completed the review of the Division of Public and Behavioral Health's (DPBH) – *Avatar Web Services Suite and Avatar ScripLink* TIN.

The submitted TIN, for an estimated \$100,699, 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 submitted TIN is for DPBH to procure the Avatar Web Services Suite, which includes Avatar Web Services and Avatar ScriptLink, providing the ability for staff to enhance workflows, customize application behaviors and customize application forms without the need for vendor assistance. This functionality will allow Behavioral Health Agencies using Avatar to provide more efficient and accurate Federal reporting of patient care. The solution appears to provide a great deal of flexibility for reporting and reviewing information.

Given that the solution includes the processing of sensitive patient data it would be prudent for the agency to engage the State OIS unit to help verify solution security elements. OIS has a significant set of tools that allows them to determine where potential security holes may exist and how to plug them. The Office of Information Security (OIS) is available for pre and post-implementation security review, at no additional cost, so any potential security risks can be identified and mitigated.

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: **22920**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3228-25**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DELOITTE CONSULTING, LLP**Contractor Name: **DELOITTE CONSULTING, LLP**Address: **980 9th STREET SUITE 1800**City/State/Zip: **SACRAMENTO, CA 95814**Contact/Phone: **916/761-6466**Vendor No.: **T27024237A**NV Business ID: **NV20081436471**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 %

Agency Reference #: **407**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/30/2020**Contract term: **243 days**4. Type of contract: **Contract**Contract description: **Self-Service Portal**

5. Purpose of contract:

This is a new contract to provide project management, design, development, implementation, and production support services to add Supplemental Nutrition Assistance Program (SNAP) Employment and Training information and features to the Self-Service Portal and the Web-Based Worker Portal to increase awareness of the SNAP Employment and Training Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$776,000.00**

Other basis for payment: As outlined in Attachment AA - Deliverable Payment Schedule

II. JUSTIFICATION

7. What conditions require that this work be done?

The DWSS Eligibility and Payments Unit was recently awarded a grant through the USDA Food and Nutrition Services FY19 SNAP Process and Technology Improvements Grant to make SNAP Employment and Training information available on our Access Nevada application.

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

State staff do not have the resources or 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 #: 200106

Approval Date: 01/22/2020

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

Deloitte Consulting was named as the vendor in the grant application as Deloitte has a local team that has in-depth knowledge of DWSS processes and systems for efficient product delivery.

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:

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:

Lisa Swearingen, Chief, E&P Ph: 775-684-0560

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	02/24/2020 14:45:34 PM
Division Approval	bberry	02/28/2020 12:03:11 PM
Department Approval	mwinebar	03/04/2020 15:41:57 PM
Contract Manager Approval	mpomerle	03/10/2020 12:32:04 PM
EITS Approval	tgalluzi	03/10/2020 15:26:06 PM
Budget Analyst Approval	bwooldri	03/19/2020 10:12:27 AM
BOE Agenda Approval	bwooldri	03/19/2020 10:12:31 AM
BOE Final Approval	Pending	



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, CITM, DWSS
Lisa Swearingen, Chief E&P, DWSS
Dara Ludi, ASO III, DWSS

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: DWSS – *SNAP Self-Service Portal* -
T407191003085046

DATE: December 09, 2019

We completed the review of the Division of Welfare and Supportive Services' (DWSS) – *SNAP Self-Service Portal* TIN.

The submitted TIN, for an estimated \$776,000, 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.

This TIN is for development of a SNAP Self-Service Portal into the pre-existing, on-premise solution, for use by case managers and constituents to educate constituents on potential opportunities and resources.

Per the cost summary there are no additional EITS related costs projected or other EITS input required for the investment. If the agency is expecting EITS to provide additional services, such as server hosting or a security review, which we recommend, then the agency needs to contact us sooner rather than later to make necessary arrangements. Scheduling EITS support or input earlier rather than later helps in the planning process. The Open Systems Group at EITS may assist in estimating additional server requirements caused by this enhancement.

Given that the solution includes public access via a portal it may provide very helpful if the agency engages the State OIS unit. Identifying and helping to secure potential security holes before an event

occurs pays dividends. Having a third set of eyes to review the security posture/design and eventual implementation by a group not directly involved in the implementation - especially since there may be sensitive constituent data in flight - would be beneficial to the agency.

The Office of Information Security (OIS) is available for pre and post-implementation security review, at no additional cost, so any potential security risks can be identified and mitigated to ensure the safety of the data collected and mitigation of any potential threat vectors. It is expected that this implementation will follow established State security policies and procedures.

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.

State of Nevada
Department of Administration

Purchasing Division

315 E. Musser Street, Suite 700
Carson City, NV 89701



Steve Sisolak
Governor

Kevin D. Doty
Administrator

Purchasing Use Only:

Approval#: 200106 @

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: Division of Welfare and Supportive Services		
	Contact Name and Title	Phone Number	Email Address
	Lisa Swearingen, Chief of Eligibility and Payments Unit	(775) 684-0560	lswearingen@dwss.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Deloitte Consulting LLP
	Contact Name:	Rakesh Duttagupta
	Address:	980 9th St Suite 1800, Sacramento, CA 95814
	Telephone Number:	(916) 761-6466
	Email Address:	rduttagupta@deloitte.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:	upon approval		
	Contract:	Start Date:	End Date:	Project Duration
		February 24th, 2020 December 2019 IFC Approval	July 10th, 2020	20 Weeks

1f	Funding:	
	State Appropriated:	
	Federal Funds:	100% (FNS - FY19 SNAP Process and Technology Improvements Grant)
	Grant Funds:	
	Other (Explain):	

01/03/2020 - Monique Pomerleau (4-0678)

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1g	Total Estimated Value of this Service Contract, Amendment or Purchase: \$776,000
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>Deloitte Consulting LLP, named as the vendor in the grant application to FNS (Food and Nutrition Services), will provide Project Management, Design, Development, Implementation and Warranty services to add SNAP E&T information and features to the Self-Service Portal (Access Nevada) and the Web-Based Worker Portal (AMPS) as follows:</i></p> <ul style="list-style-type: none"> • <i>Make Information about E&T Services available on Access Nevada: Promote the SNAP E&T Program to a targeted population that are potentially eligible and would benefit from the program.</i> • <i>Make Online Assessments Accessible to SNAP Recipients: Add an online assessment to Access Nevada in both English and Spanish. The assessment can be completed online and submitted electronically.</i> • <i>Automate SNAP E&T Intake for Case Managers: Case Managers will receive a copy of the completed assessment with the necessary intake information in AMPS. Based on the participants' answers to the online assessment, Case Managers can then follow-up with creating an individualized plan for the participant in OASIS.</i> <p><i>Deloitte will work with DWSS to make the necessary system modifications to achieve the following:</i></p> <ol style="list-style-type: none"> i. <i>Access Nevada Modifications</i> <ol style="list-style-type: none"> a. <i>A new account type will be configured for case members.</i> b. <i>Information about the SNAP E&T Program and an option to take an online assessment will be available after a SNAP application has been completed and submitted.</i> c. <i>A new SNAP E&T Program assessment module will be added to the Dashboard to initiate online assessments.</i> d. <i>My Benefits will be modified to show if a household member is a candidate for SNAP E&T</i> e. <i>Assessment will collect information about the interested participant's education, skills, employment history and career goals.</i> f. <i>Assessment questions will be pre-populated when possible if information is available and questions will be dynamic.</i> g. <i>Assessment will be available in both English and Spanish.</i> ii. <i>AMPS Modifications</i> <ol style="list-style-type: none"> a. <i>A new SNAP E&T Assessment Task View will be created in the Case Manager Task Inbox in the Worker Portal.</i> b. <i>A task will be created for every assessment.</i> c. <i>SNAP E&T Case Managers will have access to a PDF copy of the interested participant's completed assessment.</i> d. <i>Client communication functionality will be modified to allow SNAP E&T Case Managers to send personalized communication to specific case members.</i> e. <i>Functionality to generate household member Personal Identification Numbers (PINs) will be added to enable household members to set up their own Self-Service Portal account using their own Unique Person Identifier (UPI) and PIN.</i> iii. <i>Paper and Electronic Communication Modifications</i> <ol style="list-style-type: none"> a. <i>An automated nudge will be sent to the head of household inbox to inform them about SNAP E&T Program services.</i> b. <i>Nudges will target households with members that meet a specific condition. This will be derived from data available in NOMADS and OASIS.</i> c. <i>Custom messages with attachments will be sent to SNAP E&T participants' private</i>
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	<p><i>inbox in the Self-Service Portal.</i></p> <p><i>d. Paperless and electronic correspondence will be modified for 4 notices to include information about voluntary participation in the SNAP E&T Program.</i></p> <p><i>iv. Reports</i></p> <p><i>a. The solution will include 2 reports that will be designed for tracking assessments completed online and their follow-up status.</i></p>
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>Deloitte Consulting LLP has a local team that has knowledge of DWSS processes and systems for efficient project delivery (e.g. Work Order creation process (WITS), Help Desk Systems (HEAT), and Configuration Management, Quality Management, Scope Management processes). The Deloitte team also has demonstrated in-depth knowledge of:</i></p> <ul style="list-style-type: none"> <i>i. Existing DWSS Standards</i> <i>ii. Existing Network, Security, Technical Architecture and Environments.</i> <i>iii. Existing Access Nevada, NOMADS, and AMPS Data-models and Functionality.</i> <i>iv. Existing Interfaces with Business Rules Engine, Case Management (AMPS and NOMADS), Lobby Management (Pathos) and Document Management/Imaging/Printing (DIS, FileNet and ThunderHead) sub-systems.</i> <i>v. Existing Electronic Communication and Nudges Functionality and Batches.</i> <i>vi. Existing Business and Technical requirements, User Interfaces and Workflows</i> <i>vii. Reports</i> <p><i>This new project includes implementing new features that require a strong understanding of these existing components (AMPS, Inbox, Access Nevada, Electronic Communication and Nudge Batches). Being the team that designed and implemented the components and the integration points between them, Deloitte's functional and technical understanding of the current system is an advantage over other vendors.</i></p> <p><i>Deloitte particularly has in-depth knowledge of DWSS's AMPS and Access Nevada framework and implementation. In the period between 2016-2019 Deloitte implemented the AMPS Modernization project that implemented the current AMPS application framework and design, integrated AMPS Inbox with PathOS, implemented the Access Nevada Modernization project, and enabled Electronic Communication and Nudge capabilities.</i></p>
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>Knowledge and Expertise:</p> <p><i>The proposed project scope pertains to modifying existing system components to add SNAP E&T Program information and assessment to Access Nevada, sending paper and electronic communication to potential SNAP E&T participants and enabling the AMPS Inbox to receive new SNAP E&T Assessment tasks while keeping existing Access Nevada, AMPS, Inbox and Electronic Communication functionality for other programs intact.</i></p> <p><i>Successful design, development and implementation of the features requires a strong understanding of these components (AMPS, Inbox, Access Nevada, Electronic Communication and Nudge Batches). Deloitte Consulting LLP, named as the vendor in the grant application to FNS (Food and Nutrition Services), is the only vendor with the required experience, knowledge and skills in all these areas since they have worked with them over the past several years in DWSS and ETS environments and they</i></p>

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were the vendor that designed and implemented the current system components and the integration points between them.

Risks and Quality:

If implemented by another vendor with less extensive knowledge of DWSS's current AMPS and Access Nevada application frameworks and design, there could be an adverse impact on the availability of these applications in the production environment.

Deloitte has demonstrated the ability to rollout 14 major change requests to AMPS and Access Nevada since 2016 with minimum interruption to the production environment.

Effective March 30, 2020, the state of Nevada must begin applying the ABAWD (Able-Bodied Adults Without Dependents) policy statewide. This project will allow the Division to provide a comprehensive, automated means to accurately, consistently and regularly disperse information to ABAWDs and SNAP recipients on services offered to the SNAP population through our existing online self-service portal, Access Nevada, ensuring participants understand SNAP work requirements.

This project will offer our SNAP population, case management, job search, educational/vocational training and volunteerism that meet the ABAWD work requirements, which will help lead to financial independence and assist us in complying with the legislative and federal mandates regarding the ABAWD rule. The Division will make this service available and allow SNAP participants to request enrollment and complete an online assessment. Case managers will use the assessment created in the online portal to determine the most suitable employment opportunity path and create an individualized service plan to lead to financial independence.

Additionally, the SNAP Self-Service Portal, will assist DWSS, in complying with the new regulations that took effect October 1, 2019 regarding the Employment and Training program. These changes are a result of the 2018 Farm Bill.

Failure to complete the grant on time and within the budget may negatively impact our ability to successfully be awarded grants in the future.

Timeline and Budget:

The timeline of this project is critical; the project is 100% funded by the FY19 SNAP PTIG, the SNAP Process and Technology Improvement Grant funds must be obligated and all activities under the Grant must be completed by end of the project period, September 30, 2019, through September 30, 2022 and within the awarded Grant amount.

Any other vendor will need additional time, additional DWSS staff resources and training to learn and become familiar with existing DWSS processes, systems and interfaces. Deloitte's proposed scope, timeline and budget does not include these additional activities and associated costs as they already have this knowledge and work relationship. Deloitte's proposed project timeline and budget are within the approved Grant's limits.

The SNAP E&T program promotes employment and wage gain for SNAP recipients through education and work activities. On October 1, 2019 the program changed from a mandatory to voluntary program. To provide vital SNAP E&T services to SNAP recipients, we rely primarily on the SNAP case managers to provide SNAP E&T program information during the interview process. This proposed project will allow consistent and regular dissemination of SNAP E&T information to the SNAP population and reduce the administrative burden on staff. It is imperative that the project is completed within a reasonable timeframe as this project has an impact on the employment outcomes

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of SNAP recipients.

5	Were alternative services or commodities evaluated? Check One.		Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	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>					
	Other Vendors: <ul style="list-style-type: none"> i. Risk of going over budget. FNS awarded a fixed amount through a competitive Grant process and DWSS would risk not completing the project if funds run out before the work is completed unless they can secure additional funds from another source (which at this time does not exist). ii. Knowledge and understanding of AMPS, Inbox, Access Nevada, Electronic Communication and Nudges and how various sub-systems are integrated together is a key success factor that no other vendor has. iii. DWSS has worked with other vendors during and after the ACA implementation who did not have knowledge and experience with existing computing environment, including legacy systems such as NOMADS, AMPS and DIS. These vendors either failed completely, were unable to deliver in a timely fashion or the deliverables did not meet the business requirements. 					
	In-house: <ul style="list-style-type: none"> i. DWSS's teams (Development, Operations and User Acceptance Testing) are occupied with other DWSS project implementations and in-house Work Items and their workload will not allow them take on additional comprehensive project implementations. If taken on, this project implementation risks not being implemented by the deadline and other critical work may be impacted or delayed. 					
b. <i>If not, why were alternatives not evaluated?</i>						

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 <u>ALL</u> previous waivers <u>MUST</u> accompany this request.				Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	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	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
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	<p><i>Increased risk to project schedule. If forced to implement the project in-house or through another vendor selected through competitive bid, the project will not meet FNS's FY19 SNAP PTIG timeline and budget restrictions and/or will fail.</i></p> <ul style="list-style-type: none"> <i>All activities under the Grant must be completed by end of the project period, September 30, 2019, through September 30, 2022.</i> <i>Failure to complete the grant on time and within the budget may negatively impact our ability to successfully be awarded grants in the future.</i> <p><i>Increased risk to project quality. If forced to implement the project in-house or through another vendor selected through competitive bid, the implementation will not have the same level of quality.</i></p> <ul style="list-style-type: none"> <i>Bugs in the implementation of the new features may impact the availability and performance of Access Nevada and AMPS if not implemented correctly.</i> <i>Issues in Access Nevada could prevent citizens from using the system to perform key self-service activities such as; applying for benefits, renewing benefits or reporting changes online. Currently, there are about 48,000 Access Nevada user accounts.</i> <i>Issues in AMPS Inbox could interrupt case worker productivity and their ability to process tasks on a timely basis. Currently, there are about 1,500 AMPS users.</i> <i>The project has an impact to the employment outcomes of SNAP recipients. Without consistent and regular dissemination of SNAP E&T information, the SNAP population may not be informed of the SNAP E&T educational and work activity services, including critical support services such as transportation.</i> <i>Effective March 30, 2020, the state of Nevada must begin applying the ABAWD policy statewide. This project will ensure participants understand SNAP work requirements. If this project is delayed, our SNAP population will not have additional services, such as case management, job search, educational/vocational training and volunteerism to assist them in meeting the ABAWD work requirements and financial independence.</i>
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8	<p>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?</p> <p><i>Since Deloitte has a deep functional and technical understanding of all the components impacted by this project e.g.: implemented and tested the current Access Nevada and AMPS applications; integrated AMPS Inbox with PathOS, enabled Electronic Communication and Nudges; and provided production support in the production environment for all these components, it would not be cost effective to use another vendor, as they would take a substantial amount of time to learn DWSS' system structure which would increase the cost well above what Deloitte has agreed to. Deloitte has experience in successfully adding support for new programs to Access Nevada. Accordingly, Deloitte is the most knowledgeable and experienced vendor to implement this project for DWSS.</i></p> <p><i>The service cost was evaluated by the State to be appropriate and approved by FNS.</i></p>
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9	<table border="1"> <tr> <td data-bbox="267 1505 1088 1606"> <p>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></p> </td> <td data-bbox="1088 1505 1177 1606">Yes:</td> <td data-bbox="1177 1505 1258 1606"></td> <td data-bbox="1258 1505 1339 1606">No:</td> <td data-bbox="1339 1505 1429 1606">X</td> </tr> <tr> <td data-bbox="267 1606 1088 1648">a. If yes, please provide details regarding future obligations or needs.</td> <td colspan="4"></td> </tr> </table>	<p>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></p>	Yes:		No:	X	a. If yes, please provide details regarding future obligations or needs.				
<p>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></p>	Yes:		No:	X							
a. If yes, please provide details regarding future obligations or needs.											

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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.

Lisa Swearingen
Agency Representative Initiating Request

Lisa Swearingen
Print Name of Agency Representative Initiating Request

1.3.20
Date

[Signature]
Signature of Agency Head Authorizing Request

Steve H. Fisher
Print Name of Agency Head Authorizing Request

1/3/2020
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.

* 01/22/2020 - Per EITS TIN APPROVAL: Agency must engage & work with the State OIS unit.*
Name of agency or entity who provided information or review: with the State OIS unit

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 **See Note** - TIN Approval must be attached in CETS**

* Kevin D. Doty
Administrator, Purchasing Division or Designee

1/22/20
Date
Kevin D. Doty
3/24/2020

Update

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: **18518**Amendment Number: **1**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Legal Entity Name: **OFFICE OF THE STATE CONTROLLER**Agency Code: **407**Contractor Name: **OFFICE OF THE STATE CONTROLLER**Appropriation Unit: **3238-23**Address: **101 N CARSON ST STE 5**Is budget authority available?: **Yes**City/State/Zip: **CARSON CITY, NV 89701-4786**

If "No" please explain: Not Applicable

Contact/Phone: **775-684-5636**Vendor No.: **D06000000**NV Business ID: **Gov't Entity**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 %
X Federal Funds	66.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	34.00 % State Share Collections

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**

Anticipated BOE meeting date 12/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **SCaDU Checks**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides check processing and printing services for the State Collection and Disbursement Unit. Checks are issued under special circumstances and all refunds to non-custodial parents and other state disbursement units are sent via check. This amendment increases the maximum amount from \$13,000 to \$54,075 and incorporates Attachment B - IRS Safeguarding Language due to the required security changes in order to comply with the safeguarding regulations of IRS information.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$13,000.00	\$13,000.00	\$13,000.00	Yes - Info
2. Amount of current amendment (#1):	\$41,075.00	\$41,075.00	\$54,075.00	Yes - Action
3. New maximum contract amount:	\$54,075.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

All refunds to non-custodial parents and other state disbursement units must be sent via check.

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

Office of the Controller is a State Agency.

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:

Currently under contract with DWSS and performing 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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	11/14/2019 17:00:14 PM
Division Approval	cbuscay	01/07/2020 08:43:20 AM
Department Approval	mwinebar	01/14/2020 11:18:05 AM
Contract Manager Approval	sjon23	01/21/2020 09:30:24 AM
Budget Analyst Approval	bwooldri	03/17/2020 09:17:49 AM
BOE Agenda Approval	bwooldri	03/17/2020 09:17:53 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: **19696**Amendment Number: **1**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Legal Entity Name: **Multi Health Systems, Inc.**Agency Code: **409**Contractor Name: **Multi Health Systems, Inc.**Appropriation Unit: **1383-19**Address: **3770 Victoria Park Avenue
M2H 3M6 Canada**Is budget authority available?: **No**City/State/Zip: **Toronto, ON 14120-0950**

If "No" please explain: Pending approval of non-IFC WP C49661.

Contact/Phone: **Dominic Guay 647-534-3986**Vendor No.: **PUR0003408A**NV Business ID: **NV20181191672**To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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	43.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	57.00 % County Reimbursement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/08/2018**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **04/30/2020**

Termination Date:

Contract term: **3 years and 358 days**4. Type of contract: **Contract**Contract description: **Risk Assessment**

5. Purpose of contract:

This is the first amendment to the original contract which provides unlimited use and training for the Youth Level of Service/Case Management Inventory risk and needs assessment tool. This amendment extends the termination date from April 30, 2020 to April 30, 2022 and increases the maximum amount from \$488,500 to \$558,500 due to annual licensing fees for the division and nine judicial districts.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$488,500.00	\$488,500.00	\$488,500.00	Yes - Action
2. Amount of current amendment (#1):	\$70,000.00	\$70,000.00	\$70,000.00	Yes - Action
3. New maximum contract amount:	\$558,500.00			
and/or the termination date of the original contract has changed to:	04/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract will fulfill the requirement in NRS 62A (AB 472) to implement a juvenile justice risk needs and assessment tool.

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

This is an evidence based tool. MHS is the developer and only company that sells this tool. This particular tool was chosen due to its validity and reliability, as well as eight (8) other counties throughout the State use the tool in the juvenile justice population.

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 #: 200303

Approval Date: 03/06/2020

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

Solicitation Waiver approved by the Purchasing Division.

- d. Last bid date: 01/23/2018 Anticipated re-bid date: 11/01/2021

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:

The vendor has been under contract with the Division since 2018. 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	dander16	02/25/2020 16:23:32 PM
Division Approval	knielsen	03/06/2020 16:04:33 PM
Department Approval	mwinebar	03/09/2020 08:16:32 AM

Contract Manager Approval	sknigge	03/12/2020 09:12:36 AM
EITS Approval	tgalluzi	03/12/2020 11:38:24 AM
Budget Analyst Approval	laaron	03/12/2020 13:19:53 PM
BOE Agenda Approval	bwooldri	03/16/2020 10:37:53 AM



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

MEMORANDUM

DATE: April 9, 2018

TO: Mandi Davis, Deputy Administrator, Child and Family Services

CC: David Haws, Interim Administrator, EITS, DOA
Tom Wolf, Chief IT Manager, Computing, EITS, DOA
Ken Adams, Chief IT Manager, Communications, EITS, DOA
Suzie Block, Chief IT Manager, Agency IT Services, EITS, DOA
Robert Dehnhardt, Chief IT Manager, Security, EITS, DOA
Governor's Finance Office

FROM: Tim Lewis, Technical Investment Administrator, EITS, DOA

SUBJECT: TIN Review Completion: Risk Need and Assessment Tool - Juvenile Justice System

We completed our review of the Technical Investment Notification for a Risk Need and Assessment Tool - Juvenile Justice System.

It is expected that this effort will follow the existing agency and State security policies. The Office of Information Security (OIS) (InfoSec@doit.nv.gov) are available to review security controls and provide guidance on system architecture and the protection of critical and personally identifiable information.

Please consider how the implementation of this system will affect the workflow of state data and the related records responsibilities of agency personnel. If you have questions or wish to receive a sampling of the types of Record Disposition Authorizations (RDAs) affected by this implementation, please contact the State Records Manager, Nevada Library and Archives at records@admin.nv.gov.

If you have any questions, or if EITS Planning can be of any further assistance, please feel free to contact me at 775-684-5845.



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#:	200303

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 Child and Family Services	
	Contact Name and Title	Phone Number	Email Address
	Katrina Nielsen	775-684-4414	knielsen@dcfs.nv.gov
	Sharon Knigge	775-684-7952	sharon.knigge@dcfs.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Multi-Health Systems, Inc.
	Contact Name:	Dominic Guay
	Complete Address:	3770 Victoria Parke Avenue, Toronto Ontario Canada M2H 3M6
	Telephone Number:	647-534-3986
	Email Address:	dominic.guay@mhs.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	Single Source
	Professional Service Exemption:	This is the developer of the risk assessment tool and the only vendor that sells the tool. The risk assessment tool was chosen by the Juvenile Justice Oversight Commission (JJOC) pursuant to NRS 62A (AB472).

1d	Contract Information:			
	Is this a new Contract?	Yes	No	X
	Amendment:	#1		
	CETS:	#19696		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	April 2018 - Original Agmt	End Date:

1f	Funding:	
	State Appropriated:	\$518,500
	Federal Funds:	

Rec'd 03/02/2020

Grant Funds:	
Other (Explain):	\$40,000 reimbursement by counties

Purchasing Use Only:

Approval #:

200303

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$70,000

	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>MHS has provided the following:</i>
2	<ol style="list-style-type: none"> 1. Two-Year License for unlimited use of the Youth Level of Service (YLS) for County Juvenile Probation Departments, County Camps, State Juvenile Correctional Institutions and State Parole. 2. 250 Training Kits 3. Focus Groups with Probation/Parole Departments and Judges to develop implementation plans. 4. Training to the YLS and MAISY-2 to all users. 5. Policy and Protocol Development regarding the use of the tools to be presented to JJOC
	<i>This amendment will continue the license for DCFS and add an additional nine (9) counties. The counties will reimburse DCFS for their license fees.</i>

	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
3	<i>The YLS is a risk and needs assessment tool for youth involved in the juvenile justice system. The use of the particular tool was chosen by the Juvenile Justice Oversight Commission pursuant to NRS 62A (AB472). MHS is the developer of this tool and the only company that sells the license and the tool.</i>

	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
4	<i>MHS is the developer and only company that sells the license to use the tool. They also provide the training to the tool.</i>

	Were alternative services or commodities evaluated? Check One.	Yes:	<input checked="" type="checkbox"/>	No:	<input 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.				
5	<i>The Juvenile Justice Oversight Commission considered three (3) juvenile risk assessment tools. They include the YLS (tool chosen); the Ohio Youth Assessment Tool and the Positive Achievement Change Tool. A matrix comparing each tool was developed by a subcommittee of the JJOC and presented to the full Commission. The deciding factor in choosing the tools was the fact that eight (8) counties in the State were already using the YLS.</i>				
	b. <u>If not</u> , why were alternatives not evaluated?				

Purchasing Use Only:

Approval #:

200303

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:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	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 #)			
	05/08/2018	04/30/2020	\$488,500	Purchase of licenses and training	Waiver 180105			
			\$					
			\$					
			\$					

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 State would be deviating from the tool chosen by the Juvenile Justice Oversight Commission, lose its initial investment in this Risk and Needs Assessment tool, and not be in compliance with NRS 62A (AB472) if the service was competitively bid.</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>The JJOC worked closely with national experts from the Council for State Governments Justice Center regarding tools used for juvenile justice risk assessment across the country. They confirmed that MHS is the only company that developed/sells the YLS. They also confirmed the YLS is used in several other states and is an evidence based, reliable, and validated risk assessment tool.</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:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	a. If yes, please provide details regarding future obligations or needs.				
	<i>The State would like the ability to extend the contract as necessary.</i>				

Purchasing Use Only:

Approval #:

200303

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

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

2/26/20

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

3/6/2020

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: **22873**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3148-95**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Vegas Hardscape, LLC**Contractor Name: **Vegas Hardscape, LLC**Address: **3318 Trickling Stream Circle**City/State/Zip: **Las Vegas, NV 89117**Contact/Phone: **Mike McAnulty 702-569-9163**Vendor No.: **T32009498**NV Business ID: **NV20101632683**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 **04/15/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 76 days**4. Type of contract: **Contract**Contract description: **Flooring Replacement**

5. Purpose of contract:

This is a new contract for the removal and replacement of the failed epoxy floor coating in the Sierra and Everest buildings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$97,500.00**

Other basis for payment: \$38,750 per building for the epoxy flooring plus: \$7,600 for removal; \$10,900 to install primer; \$1,500 for generator

II. JUSTIFICATION

7. What conditions require that this work be done?

This project was legislatively approved through SB527 as a Deferred Maintenance project for the replacement of the flooring at the Sierra and Everest buildings of Summit View Youth Center.

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

No Division employees have the knowledge, expertise or equipment 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):

FIA Solutions
Continental Flooring Company
DNI Construction
American Southwest Electric
Chief Concrete
COIT Services of Reno
Vegas Hardscape
Infinity Epoxy
Reveles Concrete
Technicoat Management

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #SVYC20-01, 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: 01/15/2020 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:

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:

Corrina Church, Admin Services Officer Ph: 702-668-4758

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	02/12/2020 11:26:38 AM
Division Approval	knielsen	02/18/2020 17:51:59 PM
Department Approval	mwinebar	02/24/2020 10:19:30 AM
Contract Manager Approval	sknigge	02/24/2020 11:21:42 AM
Budget Analyst Approval	laaron	03/05/2020 16:21:17 PM

BOE Agenda Approval
BOE Final Approval

bwooldri
Pending

03/13/2020 14:11:28 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: **22891**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3229-43**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Mark S. Preston

Contractor Name: **Preston Management & Organizational Consulting**Address: **11371 Corsica Mist Avenue**City/State/Zip: **Las Vegas, NV 89135**

Contact/Phone: Mark S. Preston 702-363-7386

Vendor No.: T29041473

NV Business ID: NV20161557952

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 **04/15/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **260 days**4. Type of contract: **Contract**Contract description: **Kinship Evaluation**

5. Purpose of contract:

This is a new contract to provide phase 2 of the evaluation of the Foster Kinship program. Phase 2 evaluates the program's effectiveness (for example, caretaker well-being; child safety, permanency, and wellbeing) for all kinship families receiving services across the state of Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$80,000.00**

Payment for services will be made at the rate of \$80,000.00 per Entire Project

II. JUSTIFICATION

7. What conditions require that this work be done?

Family First Prevention Services Act.

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.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 #: 200102

Approval Date: 01/14/2020

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

This vendor performed the initial evaluation of the Kinship Navigator program and therefore had the most experience to evaluate the next phase.

d. Last bid date: 10/01/2018 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 contractor has been under contract with the Division from 10/2018 to 9/2019. 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:

DBA

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knielsen	02/14/2020 08:55:41 AM
Division Approval	knielsen	02/14/2020 08:55:44 AM
Department Approval	mwinebar	02/20/2020 16:00:17 PM
Contract Manager Approval	sknigge	02/20/2020 16:37:23 PM
Budget Analyst Approval	laaron	03/06/2020 14:10:26 PM
BOE Agenda Approval	bwooldri	03/13/2020 11:11:32 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#: 200102 @

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>Sharon Knigge</i>	<i>775-684-7952</i>	<i>contracts@dcfs.nv.gov</i>
	<i>Katrina Nielsen</i>	<i>775-684-4414</i>	<i>knielsen@dcfs.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Mark S. Preston dba Preston Management and Organizational Consulting</i>
	Contact Name:	<i>Mark Preston</i>
	Complete Address:	<i>11371 Corsica Mist Avenue</i>
	Telephone Number:	<i>702-363-7386</i>
Email Address:	<i>msprestonconsulting@gmail.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>Upon Approval</i>	End Date: <i>12/31/20</i>

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	<i>100%</i>
	Other (Explain):	

Purchasing Use Only:

Approval #:

200/02 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:			
	\$80,000			

2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>The primary goal of the continuing evaluation is to further determine if Nevada's Kinship Navigator program yields significantly better child(ren) outcomes (safety, permanency, well-being) in comparison to child(ren) placed in relative foster care or non-relative foster care by the State of Nevada's Division of Child and Family Services (DCFS), Clark County Family Services or Washoe County Human Services Agency. The secondary goal is to determine if the Kinship Navigator Programs manual clearly outlines protocols and procedures that illustrate key components of effective practice.</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>DCFS was recently awarded additional competitive grant funding to complete a phase 2 of the project. With the initial Kinship Navigator grant, Mark S. Preston dba Preston Management and Organizational Consulting was awarded the original Kinship Navigation Evaluation contract through a competitive RFP process in which he was the only respondent. Mr. Preston was instrumental in developing the custom designed research and data collection program to evaluate the program's effectiveness.</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>Mr. Preston's intimate knowledge of, and involvement in, phase 1 of the project make him an invaluable asset with his firsthand knowledge and experience that other evaluators may not share. He is knowledgeable with regard not only to the Family First Prevention Services Act 2018 but also Nevada's Kinship Navigator program. He is the one that got us started and has put us on the road to potentially being the 1st nationally recognized, well supported Kinship Navigator program. Because the Kinship Navigator grant is competitive, it was not known whether Nevada would be successful in receiving the second-year grant award. In the meantime, Mr. Preston's original contract expired prior to receiving the second-year grant award notification for completion of phase 2.</i></p>			
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5	Were alternative services or commodities evaluated? Check One.		Yes:		No:	X
	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?					
<p><i>The Kinship Navigator grant is a one-year grant award with a short timeframe in which to complete the project. The only alternative would be to release another RFP for the services. Doing so would result in significantly less time to provide the evaluator services. DCFS would have to conduct the RFP and then would have to bring a new evaluator "up to speed", where Mr. Preston would be able to start right away with the knowledge and familiarity with the tool he helped develop.</i></p>						

Purchasing Use Only:	
Approval #:	200102 @

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 <u>ALL</u> previous waivers <u>MUST</u> accompany this request.				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 #)			
	10/24/2018	11/30/2019	\$80,000	Kinship Navigator Evaluation Phase #1	Agency RFP #RCW19-01			
			\$					
			\$					
			\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	Phase two of the evaluation will not be completed timely and the federal reporting requirements will not be met.

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?
	Mark S. Preston dba Preston Management and Organizational Consulting was the only vendor to respond to the previous RFP. DCFS did not know we were receiving the most recent grant award until after the termination date of the contract resulting from that RFP.

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.				

<i>Purchasing Use Only:</i>	
Approval #:	200102④

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

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

Mandi Davis, Deputy Administrator

1/2/20
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

1/14/20
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: **22813**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	BOARD OF REGENTS, NSHE UNR
Agency Code:	409	Contractor Name:	BOARD OF REGENTS, NSHE UNR
Appropriation Unit:	3646-18	Address:	1664 N. VIRGINIA ST. MAILSTOP 325
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89557-0325
If "No" please explain:	Not Applicable	Contact/Phone:	ASHLEY GREENWALD 775-784-8218
		Vendor No.:	D35000816
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 %

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 04/2020

Retroactive? **Yes**

If "Yes", please explain

The Division was awaiting approval for the new and unanticipated System of Care Grant and desired to implement services without delay to the benefiting youth with disabilities.

3. Termination Date: **09/30/2023**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **PBIS Direct**

5. Purpose of contract:

This is a new contract for the Nevada Center for Excellence in Disabilities to develop an intensive interdisciplinary behavior support pilot program to serve youth with intellectual and developmental disabilities and/or co-occurring mental health diagnoses.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$360,000.00**

Payment for services will be made at the rate of \$90,000.00 per federal fiscal year

Other basis for payment: Annual amount includes costs for Personnel, \$49,573.58; Fringe Benefits, \$13,888.67; Participant Support, \$1,096.61, Travel, \$7,096; and Indirect, \$18,345.14.

II. JUSTIFICATION

7. What conditions require that this work be done?

There is a significant need to reduce challenging behaviors of youth with dual diagnoses, build capacity for their caregivers, and provide high quality behavioral supports and interdisciplinary supports as the number of youth placed outside of the home/State has greatly increased. Qualifying youth will have previously accessed State services through the Division and/or Aging and Disability Services Division without demonstrating significant improvement in behavior and/or quality of life.

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

This is an evidence-based model that only certified NCED can develop and train.

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?

NRS 277.180 - Governmental Entity - Interlocal Agreement

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

26%

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 Division has multiple current and prior interlocal agreements with UNR and services 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:
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	knielsen	02/11/2020 09:40:09 AM
Division Approval	knielsen	02/11/2020 09:40:12 AM
Department Approval	mwinebar	02/20/2020 17:26:18 PM
Contract Manager Approval	sknigge	02/21/2020 12:31:04 PM
Budget Analyst Approval	laaron	03/05/2020 15:59:06 PM
BOE Agenda Approval	bwooldri	03/13/2020 14:05:43 PM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
Division of Child and Family Services
Helping people. It's who we are and what we do.



Ross Armstrong
Administrator

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office

THROUGH: Mark Winebarger, Administrative Services Officer IV
Division of Child and Family Services

FROM: Katrina Nielsen, Administrative Services Officer IV
Division of Child and Family Services

DATE: 01/29/2020

SUBJECT: Retroactive Contract Request
Board of Regents – Nevada System of Higher Education, Nevada Center for Excellence in Disabilities (NCED)

A retroactive effective date of October 1, 2019 is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Board of Regents – Nevada System of Higher Education, Nevada Center for Excellence in Disabilities (NCED), in order to provide an intensive interdisciplinary behavior support pilot program to serve youth with Intellectual and Developmental Disabilities and/or co-occurring mental health diagnoses.

Positive Behavioral Interventions and Support (PBIS) is an evidence-based model that only certified Nevada Center for Excellence in Disabilities (NCED) staff can develop and provide training for. This retroactive memo is necessary because the Division was awaiting approval for the new, unanticipated System of Care Grant and desired to implement services without delay to the benefiting youth with disabilities. The importance of entering into contracts in advance of services being performed has been conveyed.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4414.

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: **22993**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-16**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Best in the West Safety, Inc.**Contractor Name: **Best in the West Safety, Inc.**Address: **820 S. Valley View Blvd.**City/State/Zip: **LAS VEGAS, NV 89107-4411**Contact/Phone: **Diane Hale 702/897-4906**Vendor No.: **T32008535**NV Business ID: **NV19961095186**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2024**Contract term: **4 years and 14 days**4. Type of contract: **Contract**Contract description: **Enviromental WBT**

5. Purpose of contract:

This is a new contract to provide web-based environmental compliance training modules to be utilized by Nevada state and federal employees of the Nevada Army National Guard.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$140,450.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This is a new contract to provide web-based training modules for Environmental Compliance Activities to be utilized for the state and federal employees located at the Nevada Army National Guard statewide locations. The training is required to be in compliance per 40 CFR 112.

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 certifications to provide these professional 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):

**Gravity Systems
Miracle Software Systems
Therap Services LLC
ECF Data LLC**

b. Solicitation Waiver: **Not Applicable**

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

This vendor has the expertise and qualification to provide the training. In addition, the vendor is the only one to respond to the RFP.

d. Last bid date: 12/19/2019 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	ctyle1	03/10/2020 15:48:49 PM
Division Approval	ctyle1	03/10/2020 15:48:51 PM
Department Approval	ctyle1	03/10/2020 15:48:53 PM
Contract Manager Approval	twollan1	03/10/2020 15:56:00 PM
Budget Analyst Approval	jrodrig9	03/24/2020 14:32:47 PM
BOE Agenda Approval	jrodrig9	03/24/2020 14:32:51 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: **22989**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-16**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MDK, LLC DBA WESTERN ENVIRONMENTAL TESTING LAB**Contractor Name: **MDK, LLC DBA WESTERN ENVIRONMENTAL TESTING LAB**Address: **475 E GREG ST SUITE 119**City/State/Zip: **SPARKS, NV 89431-8517**Contact/Phone: **Garry Gray 775-355-0202**Vendor No.: **T81201715**NV Business ID: **NV20151665199**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2024**Contract term: **4 years and 14 days**4. Type of contract: **Contract**Contract description: **Lab Testing Services**

5. Purpose of contract:

This is a new contract to provide environmental laboratory testing and analytical services for the Nevada Army National Guard Environmental Office.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$80,000.00**

Payment for services will be made at the rate of \$20,000.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?

Environmental samples, consultation, analysis, collection records, Quality Assurance and Quality Control (QA/QC) reports for the Nevada National Guard facilities statewide are required so that the Office of the Military is in compliance with State and Federal environmental laws.

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 certifications and skills to provide these required 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):

b. Solicitation Waiver: **Not Applicable**

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

The vendor has performed satisfactory service for the Office of the Military in the past and was the only vendor to provide a bid.

d. Last bid date: 02/20/2020 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?

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 performed satisfactory service for Corrections and Department of Transportation since 2002 and the Office of the Military in the past. In addition this was the only vendor to provide a bid.

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)?

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:

null, null Ph: null

null, null Ph: null

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ctyle1	03/10/2020 15:48:28 PM
Division Approval	ctyle1	03/10/2020 15:48:31 PM
Department Approval	ctyle1	03/10/2020 15:48:33 PM
Contract Manager Approval	twollan1	03/10/2020 15:56:46 PM
Budget Analyst Approval	jrodrig9	03/19/2020 21:12:12 PM
BOE Agenda Approval	jrodrig9	03/19/2020 21:12:14 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: **22256** Amendment Number: **1**

Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD** Legal Entity Name: **NEVADA ARMY NATIONAL GUARD**

Agency Code: **431** Contractor Name: **NEVADA ARMY NATIONAL GUARD**

Appropriation Unit: **All Appropriations** Address: **2452 FAIRVIEW DR**

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

If "No" please explain: Not Applicable Contact/Phone: **775-887-7824**

Vendor No.: **T81089009**

NV Business ID: **N/A**

To what State Fiscal Year(s) will the contract be charged? **2020-2025**

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	12.00 %	Fees	0.00 %
X	Federal Funds	88.00 %	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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2024**Contract term: **5 years and 1 day**4. Type of contract: **Cooperative Agreement**Contract description: **MCA FFY 2020-2024**

5. Purpose of contract:

This is a first amendment to the original cooperative agreement which establishes the terms and conditions of National Guard Bureau funding in support of the operations and training of the Nevada Army and Air National Guards. This amendment increases the maximum amount from \$124,000,000 to \$126,147,190 due to the transitioning of the federally administered State Family Program to a state administered program.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$124,000,000.00	\$124,000,000.00	\$124,000,000.00	Yes - Action
2. Amount of current amendment (#1):	\$2,147,190.00	\$2,147,190.00	\$2,147,190.00	Yes - Action
3. New maximum contract amount:	\$126,147,190.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The conditions that require this work to be done are to sustain daily operations of the Nevada National Army and Air National Guard units.

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

N/A

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?

N/A

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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ctyle1	03/13/2020 17:00:57 PM
Division Approval	ctyle1	03/13/2020 17:01:00 PM
Department Approval	ctyle1	03/13/2020 17:04:01 PM
Contract Manager Approval	twollan1	03/13/2020 17:05:59 PM
Budget Analyst Approval	jrodrig9	03/19/2020 20:42:24 PM
BOE Agenda Approval	jrodrig9	03/19/2020 20:42:28 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: **18445** Amendment Number: **1**

Agency Name: **DEPARTMENT OF CORRECTIONS** Legal Entity Name: **Puliz Moving & Storage Co. DBA Puliz Records Management Services**

Agency Code: **440** Contractor Name: **Puliz Moving & Storage Co. DBA Puliz Records Management Services**

Appropriation Unit: **3710-04** Address: **1095 Standard Street**

Is budget authority available?: **Yes** City/State/Zip: **Reno, NV 89506-8663**

If "No" please explain: Not Applicable Contact/Phone: **Rob LaVoy 775-544-5329**

Vendor No.: **T80914937**

NV Business ID: **NV19771009093**

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.

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 **05/01/2017**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **04/30/2021**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Record Storage**

5. Purpose of contract:

This is the first amendment to the original contract which continues ongoing services for a manageable file storage system with a clean and accessible controlled environment for the storage of paroled and discharged inmate files. This amendment increases the maximum amount from \$40,885 to \$59,985 due to reduced storage capacity in building 17 & 89 and capacity issues associated with the fire safety code and storage areas lost due to buildings returned to Nevada Indian Commission.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$40,885.00	\$40,885.00	\$40,885.00	Yes - Info
2. Amount of current amendment (#1):	\$19,100.00	\$19,100.00	\$59,985.00	Yes - Action
3. New maximum contract amount:	\$59,985.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The department has 81,283 inmate files currently stored offsite with this vendor. Each inmate file is cataloged and available for delivery to the department within 24 hours or sooner should the need arise. The department is required to retain permanent inmate records for each inmate incarcerated, discharged and paroled. This contract is for storage of files for inmates that have been paroled or discharged.

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

Prior to a contract for inmate file storage services, the files were not kept in a safe environment to keep the file from being damaged. This contract will continue to keep inmate files in a storage facility in a protected environment. No other state facility performs this service except the Nevada State Library and Archives and they do not have the space to store the volume required to store these files.

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):

b. Solicitation Waiver: **Not Applicable**

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

Puliz Moving and Storage Co was the lowest bidder

d. Last bid date: 02/15/2017 Anticipated re-bid date: 02/15/2021

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:

FY 13 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:

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	bweisent	02/18/2020 16:44:51 PM
Division Approval	amonro1	03/04/2020 15:58:53 PM
Department Approval	sewart	03/06/2020 09:29:39 AM
Contract Manager Approval	aroma2	03/10/2020 11:00:47 AM
Budget Analyst Approval	bmacke1	03/18/2020 16:32:07 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: **22708**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3719-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Allwyre WYO, Inc.

Contractor Name: **Allwyre WYO, Inc.**Address: **P.O. BOX 1000**City/State/Zip: **Chowchilla, CA 93610**

Contact/Phone: Alan Hopkins, President 559-665-4893

Vendor No.: N/A

NV Business ID: E3675792019-0

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 % Revenue

Agency Reference #: 440

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2024**Contract term: **4 years**4. Type of contract: **Revenue Contract**Contract description: **Lease & Inmate Labor**

5. Purpose of contract:

This is a new revenue contract to provide leased space and inmate labor at Southern Desert Correctional Center to manufacture poly pipe, cable and wire harness assemblies, printed circuit board assembly and electromechanical assemblies.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,142,052.00**

Other basis for payment: Estimated monthly revenue: \$112,793.00 for an annual estimate of \$1,353,513.00~Work Program in progress C49781~Revenue G/L 4301 & 4021

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 209.461 authorizes the State of Nevada, Department of Corrections (NDOC), by and through its Director to provide offender work, contractual activity or business activity, subject to the approval of the Board of State Prison Commissioners and the State Board of Examiners. This contract will allow NDOC to provide work and occupational training for offenders through All Wire, Inc.

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

This is a revenue generating 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?

NRS 209.391. This contractor was chosen because they approached NDOC for work.

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	ddastal	01/08/2020 07:10:19 AM
Division Approval	amonro1	01/13/2020 13:58:23 PM
Department Approval	sewart	01/16/2020 10:46:55 AM
Contract Manager Approval	aroma2	01/31/2020 11:04:33 AM
Budget Analyst Approval	bmacke1	03/17/2020 08:17:57 AM
BOE Agenda Approval	jrodrig9	03/19/2020 21:53:16 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: **18019**Amendment Number: **3**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **LET'S DO LUNCH, INC., DBA INTEGRATED FOOD SERVICE**Agency Code: **550**Contractor Name: **LET'S DO LUNCH, INC., DBA INTEGRATED FOOD SERVICE**Appropriation Unit: **1362-21**Address: **INTEGRATED FOOD SERVICE**Is budget authority available?: **No**City/State/Zip: **GARDENA, CA 90248**

If "No" please explain: WP C50003 is pending approval for April 2020.

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? **2017-2021**

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 #: 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 04/2020

Retroactive? **Yes**

If "Yes", please explain

3. Previously Approved Termination Date: **09/30/2020**Contract term: **4 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 allows school districts to purchase food for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment increases the maximum amount from \$3,511,773 to \$5,107,205 due an increased 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
2. Amount of current amendment (#3):	\$1,595,432.00	\$1,595,432.00	\$1,595,432.00	Yes - Action
3. New maximum contract amount:	\$5,107,205.00			

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: 06/30/2020

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:

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?

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	03/16/2020 13:40:00 PM
Division Approval	bbel1	03/16/2020 13:40:04 PM
Department Approval	bbel1	03/16/2020 13:40:07 PM
Contract Manager Approval	melli2	03/16/2020 13:46:11 PM
Budget Analyst Approval	mlynn	03/16/2020 14:52:20 PM
BOE Agenda Approval	nhovden	03/24/2020 14:25:39 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: **17996**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: **P.O. Box 601099**Is budget authority available?: **Yes**City/State/Zip: **PASADENA, CA 91189-1099**

If "No" please explain: Not Applicable

Contact/Phone: **Teneka Williams 479-290-7449**Vendor No.: **T32007184**NV Business ID: **NV20111130012**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 %

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 **04/2020**Retroactive? **Yes**

If "Yes", please explain

3. Previously Approved Termination Date: **09/30/2020**Contract term: **4 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 allows school districts to purchase food for the National School Lunch and Breakfast programs using USDA commodities as ingredients. This amendment increases the maximum amount from \$950,000 to \$1,381,068 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:	\$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
2. Amount of current amendment (#5):	\$431,068.00	\$431,068.00	\$431,068.00	Yes - Action
3. New maximum contract amount:	\$1,381,068.00			

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: 06/30/2020

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:

Current contract holder for Nevada Department of Agriculture and service 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:

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	bbe1	03/16/2020 13:39:17 PM
Division Approval	bbe1	03/16/2020 13:39:22 PM
Department Approval	bbe1	03/16/2020 13:39:27 PM
Contract Manager Approval	melli2	03/16/2020 13:46:58 PM
Budget Analyst Approval	mlynn	03/16/2020 15:14:37 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: **17828** Amendment Number: **3**

Agency Name: **DPS-GENERAL SERVICES** Legal Entity Name: **Norberg, Scott W. DBA NorSoft Consulting**

Agency Code: **655** Contractor Name: **Norberg, Scott W. DBA NorSoft Consulting**

Appropriation Unit: **4709-26** Address: **8452 - 133rd Street Court**

Is budget authority available?: **Yes** City/State/Zip: **Apple Valley, MN 55124**

If "No" please explain: **Not Applicable** Contact/Phone: **952-997-3888**

Vendor No.: **PUR0000536**

NV Business ID: **NV20101419648**

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 %	X	Fees	100.00 % Various Repository
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 **09/13/2016**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2020**

Termination Date:

Contract term: **5 years and 291 days**4. Type of contract: **Contract**Contract description: **Technology/Software**

5. Purpose of contract:

This is the third amendment to the original contract that continues on-going software support and maintenance services for various software systems operated by the Nevada Criminal History Repository. This amendment extends the termination date from June 30, 2020 to June 30, 2022, adds Attachment BB-2 - Maintenance Fees and increases the maximum amount from \$1,866,260 to \$2,890,536 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:	\$1,866,260.00	\$1,866,260.00	\$1,866,260.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#3):	\$1,024,276.00	\$1,024,276.00	\$1,024,276.00	Yes - Action
3. New maximum contract amount:	\$2,890,536.00			
and/or the termination date of the original contract has changed to:	06/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

Maintenance and enhancements are necessary to the JusticeLink and CHR Accounting software (proprietary to NorSoft Consulting) in order for the Department of Public Safety to remain compliance with all statutory requirements.

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 any employees with the ability to complete the required 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: **Not Applicable**

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

This is for on-going maintenance and support that was originally contemplated in the initial purchase of the system. Per State Purchasing, no solicitation is required.

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:

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	lgallow1	03/12/2020 16:19:49 PM
Division Approval	lgallow1	03/12/2020 16:24:54 PM
Department Approval	cboegle	03/16/2020 15:50:29 PM
Contract Manager Approval	cboegle	03/16/2020 15:50:36 PM

Budget Analyst Approval
BOE Agenda Approval

jrodrig9
jrodrig9

03/19/2020 22:36:58 PM
03/19/2020 22:37:17 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: **22362**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: Utah State University

Contractor Name: **Utah State University**Address: **5230 Old Main Hill**City/State/Zip: **Logan, UT 84322-5230**

Contact/Phone: 435-797-9147

Vendor No.:

NV Business ID: Government Entity

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 %	X	Fees	83.00 %	Heritage
X Federal Funds	17.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: 20-12

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2020**Contract term: **182 days**4. Type of contract: **Interlocal Agreement**Contract description: **Feral Horses/Burros**

5. Purpose of contract:

This is a new interlocal agreement to provide data analysis and reporting services to identify the impacts of feral horses and burros on big game in Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$58,750.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The feral horse and burro population in Nevada is over four times the allowable limit (as of March 2019) according to the Bureau of Land Management website. This research project is critical for understanding the impact of feral horses and burros on wildlife populations in the state including mule deer and pronghorn. Furthermore this research will provide statistical tools to help in crucial decision making protocols for how and when to prioritize feral horse gathers in coordination with BLM future projects.

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

This work will require a level of technical expertise in remote sensing and geo-spatial statistics that far exceed the capacity and training of State employees. Additionally, an independent researcher will help to remove any potential bias in the analysis and provide a quantitative perspective that will help further collaboration between the state of Nevada and partnering agencies.

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?

Yes

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

17.5%

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 Wildlife and work 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 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:

Cody Schroeder, Wildlife Staff Specialist Ph: 775-688-1659

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	09/04/2019 15:08:47 PM
Division Approval	tdoucett	10/01/2019 15:44:13 PM
Department Approval	eobrien	01/31/2020 15:57:38 PM
Contract Manager Approval	zalbert	01/31/2020 16:54:28 PM
Budget Analyst Approval	mlynn	02/25/2020 12:14:53 PM
BOE Agenda Approval	nhovden	02/25/2020 16:57:49 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: **22949**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4462-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **THE ABBI AGENCY**Contractor Name: **THE ABBI AGENCY**Address: **1385 HASKELL ST STE A**City/State/Zip: **RENO, NV 89509-2844**Contact/Phone: **775/323-2977**Vendor No.: **T27037235**NV Business ID: **NV20081200897**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 % **X** Fees **100.00 % SPORTSMEN**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **RFP #72DOW-S864**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/15/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2023**Contract term: **2 years and 364 days**4. Type of contract: **Contract**Contract description: **NDOW Website**

5. Purpose of contract:

This is a new contract to provide development and maintenance for a new website.

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?

The development of the NDOW website directly plays into the strategic goals outlined in the department's FY18-22 strategic plan. This includes citizen outreach and engagement, which directly calls for the agency to develop and launch a mobile-friendly website. It will also increase our ability to share NDOW's successes and leverage digital marketing platforms. In addition, the new website will aid in the initiative to recruit, retain, and reactivate by providing more efficient access to information regarding hunting, angling, and education. NDOW's current site is a challenge for web staff to manage, and for the public to navigate.

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

Developing a website takes time and a specific skill set outside of what staff can manage.

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 #72DOW-S864, 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: 10/24/2019 Anticipated re-bid date: 10/24/2022

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:

Department of Motor Vehicles 7/1/19 � 6/30/23
Governor�s Office of Economic Development 2/9/19 � 6/30/19
Department of Wildlife 5/9/19-5/8/21
Department of Education 12/12/18-11/30/19
Governor�s Office of Workforce Innovation 9/5/18-2/28/19
Department of Employment, Training and Rehabilitation 11/3/17-11/30/17
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	eobrien	03/09/2020 16:58:10 PM
Division Approval	eobrien	03/09/2020 16:58:13 PM
Department Approval	eobrien	03/09/2020 16:58:15 PM
Contract Manager Approval	zalbert	03/16/2020 13:39:09 PM
EITS Approval	tgalluzi	03/17/2020 10:12:51 AM
Budget Analyst Approval	mlynn	03/19/2020 15:47:20 PM

BOE Agenda Approval
BOE Final Approval

nhovden
Pending

03/20/2020 15:59:30 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: Tony Wasley, Director, NDOW
Eric Dugger, IT Program Manager, NDOW
Katie Jameson, Administrative Service Officer III, NDOW

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: NDOW – NDOW Website - TIN:
T702190606083859

DATE: September 13, 2019

We completed the review of NDOW's – *NDOW Website* TIN.

The submitted TIN, for the estimated investment of \$100,000, is for replacing the current NDOW Website. NDOW reported that "The current NDOW website has broken functionality, such as searching and content management, and is not ADA compliant. A new website is needed to better provide information to the public, other agencies and NDOW staff."

EITS is currently in the process of a Content Management System (CMS) upgrade/replacement. We look forward to opportunities for collaboration between EITS and NDOW as both agencies move forward with their respective RFPs and subsequent procurements. EITS is also available to discuss ADA compliance for the selected solution.

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: **22992**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4463-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ENTERCOM NEVADA, LLC**Contractor Name: **ENTERCOM NEVADA, LLC**Address: **7255 S TENAYA WAY**City/State/Zip: **LAS VEGAS , NV 89113**Contact/Phone: **SUSAN BUNGAY 916-224-9413**

Vendor No.:

NV Business ID: **NV20191055337**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	50.00 % SPORTSMEN
X Federal Funds	50.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP 72DOW-S976**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/15/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Radio Advertising**

5. Purpose of contract:

This is a new contract to provide radio advertising in southern Nevada to educate and inform the public, sportsmen and key influencers about the state's wildlife, safety and environmental missions, and ongoing issues.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00**

Other basis for payment: As invoiced by the Contractor and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

Educate and inform the public, sportsmen and key influencers of NDOW's wildlife, safety and environmental missions and ongoing issues of any kind.

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

NDOW does not have qualified staff or access to advertising outlets.

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):

RENO MEDIA GROUP
LOTUS RADIO
ENTERCOM NEVADA LLC
KRNV

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #72DOW-S976, and in accordance with NRS 333, the selected vendor was one of two highest scoring proposers as determined by an independently appointed evaluation committee.

d. Last bid date: 01/02/2020 Anticipated re-bid date: 01/02/2024

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:

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:

AARON MEIER, BOATING EDUCATION COORDINATOR Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	eobrien	03/10/2020 14:31:10 PM
Division Approval	eobrien	03/10/2020 14:31:14 PM
Department Approval	eobrien	03/10/2020 14:31:17 PM
Contract Manager Approval	zalbert	03/16/2020 13:38:12 PM
Budget Analyst Approval	mlynn	03/19/2020 18:14:21 PM
BOE Agenda Approval	nhovden	03/20/2020 16:32:06 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: **22991**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4463-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **RENO MEDIA GROUP, LP**Contractor Name: **RENO MEDIA GROUP, LP**Address: **961 MATLEY LN STE 120**City/State/Zip: **RENO, NV 89502-2119**Contact/Phone: **FRANK BONARI 775/829-1964**Vendor No.: **T32006486**NV Business ID: **NV20071521304**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	50.00 % Sportsmen
X Federal Funds	50.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RPF 72DOW-S976**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/15/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Radio Advertising**

5. Purpose of contract:

This is a new contract to provide radio advertising in northern and eastern Nevada to educate and inform the public, sportsmen, and key influencers about the state's wildlife, safety and environmental missions and ongoing issues.

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?

Educate and inform the public, sportsmen and key influencers of NDOW's wildlife, safety and environmental missions and ongoing issues of any kind.

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

NDOW does not have qualified staff or access to advertising outlets9. 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):

Entercom Nevada LLC**Lotus Radio
KRNV**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #72DOW-S976, and in accordance with NRS 333, the selected vendor was one of two highest scoring proposers as determined by an independently appointed evaluation committee.

d. Last bid date: 01/02/2020 Anticipated re-bid date: 01/24/2024

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)?

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:

Aaron Meier , Boating Education Coordinator Ph: 775-688-1548

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	eobrien	03/10/2020 14:31:41 PM
Division Approval	eobrien	03/10/2020 14:31:44 PM
Department Approval	eobrien	03/10/2020 14:31:47 PM
Contract Manager Approval	zalbert	03/16/2020 13:40:12 PM
Budget Analyst Approval	mlynn	03/16/2020 15:45:37 PM
BOE Agenda Approval	nhovden	03/20/2020 16:16:21 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: **22887**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: **MODERN LAND & DEVELOPMENT**Contractor Name: **MODERN LAND & DEVELOPMENT**Address: **PO BOX 8387**City/State/Zip: **SPRING CREEK, NV 89815**Contact/Phone: **MIKE SHANKS 775-934-9356**

Vendor No.:

NV Business ID: **NV20081546798**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 % **X** Fees **100.00 % Sportsmen**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **RFQ #3285**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/14/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/10/2021**Contract term: **361 days**4. Type of contract: **Contract**Contract description: **Fence Construction**

5. Purpose of contract:

This is a new contract to provide the ongoing constructing and removing of fences statewide.

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?

This contract will provide protection to state owned and private lands by either construction or removing fences for resource enhancements of springs, riparian areas and crucial habitats.

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

Lack of proper equipment

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?

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:

Caleb McAdoo, Habitat Supervisor Ph: 775-777-2306

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	eobrien	03/05/2020 14:36:38 PM
Division Approval	eobrien	03/05/2020 14:36:42 PM
Department Approval	eobrien	03/05/2020 14:36:45 PM
Contract Manager Approval	zalbert	03/05/2020 14:59:35 PM
Budget Analyst Approval	mlynn	03/20/2020 10:13:41 AM
BOE Agenda Approval	nhovden	03/20/2020 15:36:07 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: **22869**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-33**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Gold Systems, Inc.

Contractor Name: **Gold Systems, Inc.**Address: **2121 S McClelland St Ste 204**City/State/Zip: **Salt Lake City, UT 84106-2558**

Contact/Phone: Steve Gold 801-456-6129

Vendor No.: T29042829

NV Business ID: NV20191645381

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 #: RFP #70CNR-S926

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/14/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/13/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Fire Billing System**

5. Purpose of contract:

This is a new contract to provide a web-based program that will automate and enhance the manual fire and resource project billing processes.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$229,043.00**

Other basis for payment: Within 30 days upon receipt of invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Gold Systems web based Fire Billing System is linked to the Integrated Reporting of Wildland Fire Information (IRWIN) database allowing NDF to access incident data in real time, eliminating the need for manual data entry. Additional features include advanced reporting capabilities and also allow Cooperators to access the data base directly to enter billing rates, accounts payables/receivables and the like to further eliminate manual entry.

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 skill set required to accomplish this project.

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):

Datagain, Inc
Gold Systems, Inc

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #70CNR-S926, 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:

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:

null, null Ph: null

Crotteau, Darcy, Incident Accounting specialist Ph: 775-684-2523

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dprather	02/11/2020 07:35:12 AM
Division Approval	dprather	02/11/2020 07:35:19 AM
Department Approval	dprather	02/11/2020 07:35:23 AM
Contract Manager Approval	jcoope8	02/26/2020 10:35:24 AM
EITS Approval	tgalluzi	02/27/2020 17:13:38 PM
Budget Analyst Approval	nhovden	03/24/2020 10:10:29 AM
BOE Agenda Approval	nhovden	03/24/2020 10:10:32 AM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
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MEMORANDUM

TO: Kurt Green, ASO III, DCNR, Forestry
Ian Oliver, IT Professional II, DCNR, Forestry
Jennifer Cooper, MA III, DCNR

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technology Investment Administrator, DOA, EITS

SUBJECT: TIN Update Completed – DCNR Fire Billing Software - T706180315104859

DATE: February 27, 2020

An update has been completed for Department of Cultural and Natural Resources' (DCNR) – *Fire Billing Software* TIN.

The updated TIN, has increased the total value of the previously reviewed investment to \$229,044, supports the continuation of a solution currently in place and in use by the agency. The original TIN documents the Nevada Division of Forestry's (NDF's) intent to procure a billing system. NDF's business model is contingent on invoicing local, state and federal agencies to receive reimbursement for services and to track the cost of reimbursable incidents. A centralized billing software platform integrated with existing external systems used by local, state, and federal partners, would expedite the billing process, reduce collection time, increase billing accuracy, and provide a repository of reliable historical data.

The Office of Information Security (OIS) is available for pre and post-implementation security review, at no additional cost, so any potential security risks can be identified and mitigated to ensure the safety of the data collected and mitigation of any potential threat vectors. It is expected that this implementation will follow established State security policies and procedures.

A copy of this update 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: **22668**

Agency Name:	DCNR - ENVIRONMENTAL PROTECTION	Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNR
Agency Code:	709	Contractor Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNR
Appropriation Unit:	3187-58	Address:	KUNR 88.7 FM MAIL STOP 0294
Is budget authority available?:	Yes	City/State/Zip:	RENO, NV 89557-0294
If "No" please explain:	Not Applicable	Contact/Phone:	775/682-6052
		Vendor No.:	D35000816B
		NV Business ID:	Government Entity

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 %

Agency Reference #: **DEP# 20-034**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **274 days**4. Type of contract: **Interlocal Agreement**Contract description: **USDA BEP Support**

5. Purpose of contract:

This is a new interlocal agreement to provide program support to facilitate a rural water protection program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$116,811.32**

Other basis for payment: For work performed per quarter.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada does not currently have a household hazardous waste management program. The USDA has provided funding to the NDEP for the initial set up of rural water protection through household hazardous waste management.

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

The NDEP does not have the resources to conduct the required 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: **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?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

8%

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 UNR-BEP has held support contracts for the past 15 years with the Bureau of Sustainable Materials Management (formally the Bureau of Waste Management). Their support has been a crucial element in our bureaus success.

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:

Ruffner, Michael, PD Supervisor Ph: 775-687-9472

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kbradle1	03/10/2020 13:54:32 PM
Division Approval	dwinkelm	03/10/2020 14:31:57 PM
Department Approval	dwinkelm	03/10/2020 14:52:34 PM
Contract Manager Approval	mruffner	03/10/2020 14:53:55 PM
Budget Analyst Approval	mtum1	03/13/2020 19:23:18 PM
BOE Agenda Approval	nhovden	03/19/2020 16:03:28 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: **19675**Amendment Number: **2**Agency Name: **B&I - TAXICAB AUTHORITY**Legal Entity Name: **TRUEPOINT SOLUTIONS, LLC**Agency Code: **750**Contractor Name: **TRUEPOINT SOLUTIONS, LLC**Appropriation Unit: **4130-11**Address: **774 MAYS BLVD STE 10 PMB 377**Is budget authority available?: **Yes**City/State/Zip: **INCLINE VILLAGE , NV 89451-9613**

If "No" please explain: Not Applicable

Contact/Phone: **KEN JOHNSON 916-259-1293**Vendor No.: **T27041955**NV Business ID: **E0117232011-4**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 %	X	Fees	100.00 % Technology
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 **03/13/2018**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **04/30/2020**Contract term: **3 years and 110 days**4. Type of contract: **Contract**Contract description: **Records Mngmt System**

5. Purpose of contract:

This is the second amendment to the original contract which provides an integrated records management system that will capture all necessary data elements, provide preset and ad-hoc queries and allow for communication between all work areas within the Taxicab Authority. This amendment extends the termination date from April 30, 2020 to June 30, 2021 and increases the maximum amount from \$1,117,520 to \$1,284,544 to implement Phase 3 (Company Portal) of the records management system.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$1,117,520.00	\$1,117,520.00	\$1,117,520.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$167,024.00	\$167,024.00	\$167,024.00	Yes - Action
3. New maximum contract amount:	\$1,284,544.00			
and/or the termination date of the original contract has changed to:	06/30/2021			

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:

State employees in our agency are not qualified to carry out the requested 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?

Pursuant to RFP #3422, 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: 04/12/2017 Anticipated re-bid date: 01/01/2021

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:

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	avance	03/09/2020 16:50:45 PM
Division Approval	avance	03/09/2020 16:50:49 PM
Department Approval	jhanse4	03/10/2020 13:36:32 PM
Contract Manager Approval	jhanse4	03/10/2020 13:38:19 PM

EITS Approval
Budget Analyst Approval
BOE Agenda Approval

tgalluzi
dlenzner
hfield

03/12/2020 13:46:26 PM
03/17/2020 16:45:43 PM
03/19/2020 15:15:16 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: **22925**Agency Name: **ADMIN - DEFERRED
COMPENSATION**Agency Code: **920**Appropriation Unit: **1017-04**Is budget authority available?: **No**

If "No" please explain: Two Work Programs have been submitted to augment the current authority for financial audits and are pending approval. C50146 for the fiscal year 2020 and C50185 for the fiscal year 2021.

Legal Entity Name: **CASEY NEILON, INC.**Contractor Name: **CASEY NEILON, INC.**Address: **503 N DIVISION ST**City/State/Zip: **CARSON CITY, NV 89703-4104**Contact/Phone: **775/283-5555**Vendor No.: **T29010569**NV Business ID: **NV20061293367**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 % ADMINISTRATION CHARGE

Agency Reference #: **ASD 2830557**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2021**Contract term: **1 year and 121 days**4. Type of contract: **Contract**Contract description: **Auditor**

5. Purpose of contract:

This is a new contract to provide a financial statement audit.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$71,750.00**

Other basis for payment: FY20 \$35,000; FY21 \$ 36,750.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 287.017 (F) (3) requires an independent audit.

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

not qualified

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):

Casey Neillon
Pierce, Bowler, Taylor & Kern
Eide Bailly

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?

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:

Rob Boehmer, Executive Officer Ph: 775-684-3397

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/03/2020 15:13:53 PM
Division Approval	ssands	03/03/2020 15:13:55 PM
Department Approval	ssands	03/03/2020 15:13:58 PM
Contract Manager Approval	ssands	03/05/2020 09:39:19 AM
Budget Analyst Approval	dlenzner	03/09/2020 12:11:42 PM
BOE Agenda Approval	hfield	03/10/2020 08:25:39 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: **22995**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B006 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DEPARTMENT OF ADMINISTRATION**Contractor Name: **DEPARTMENT OF ADMINISTRATION**Address: **HEARINGS DIVISION
2200 S. Rancho Drive, Ste 220**City/State/Zip: **Las Vegas, NV 89102**Contact/Phone: **Michelle Morgando 702-486-2527**Vendor No.: **D08000002**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.

General Funds	0.00 %	X	Fees	100.00 % LICENSING
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: **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2023**Contract term: **2 years and 305 days**4. Type of contract: **Interlocal Agreement**Contract description: **Hearings Division**

5. Purpose of contract:

This is a new interlocal agreement to provide hearings officers for the resolution of cases pursuant to NRS 644A and NAC 644A.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00**

Payment for services will be made at the rate of \$100.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The board requires hearing officers to hear contested matters and provide written recommendations to the board of directors.

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

The board currently has a backlog of cases that require timely resolution. This contract will help expedite those decisions. Hearing officers are licensed attorneys.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?

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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	89104	03/11/2020 08:43:06 AM
Division Approval	89104	03/11/2020 08:43:08 AM
Department Approval	89104	03/11/2020 08:43:10 AM
Contract Manager Approval	89104	03/11/2020 08:43:12 AM
Budget Analyst Approval	hfield	03/13/2020 10:53:07 AM
BOE Agenda Approval	hfield	03/13/2020 10:53:12 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: **22963**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B011 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: The Allison Law Firm Chtd.

Contractor Name: **The Allison Law Firm Chtd.**Address: **3191 East Warm Springs Rd**City/State/Zip: **Las Vegas, NV 89120**

Contact/Phone: Noah Allison 702-933-4444

Vendor No.:

NV Business ID: NV20141626730

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 %	X	Fees	100.00 % LICENSING
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 **04/14/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/13/2022**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Legal**

5. Purpose of contract:

This is a new contract to provide legal services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00**

Payment for services will be made at the rate of \$295.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board Requires legal representation as needed and requested to carry out the duties set forth in NRS 624.115

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

Ongoing Litigation, Contractor 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: **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 not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Chtd.

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	dlumbert	03/05/2020 09:54:36 AM
Division Approval	dlumbert	03/05/2020 09:54:39 AM
Department Approval	dlumbert	03/05/2020 09:54:43 AM
Contract Manager Approval	dlumbert	03/05/2020 09:54:45 AM
Budget Analyst Approval	hfield	03/09/2020 12:56:03 PM
BOE Agenda Approval	hfield	03/09/2020 12:56:06 PM
BOE Final Approval	Pending	

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.		VARIOUS STATE AGENCIES	ACCESS BUILDING SOLUTIONS, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing home modification services to support job development and rehabilitation.				
	Term of Contract:	Upon Approval - 06/30/2022	Contract # 22955			
2.		VARIOUS STATE AGENCIES	CARING HANDS ADULT DAY SERVICE, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide adult day care services statewide.				
	Term of Contract:	Upon Approval - 06/30/2022	Contract # 22909			
3.		VARIOUS STATE AGENCIES	HUNT & SONS, INC.	OTHER: VARIOUS AGENCIES	\$118,500,000	
	Contract Description:	This is a new contract to provide ongoing bulk fuel purchase and delivery services statewide on an as-needed basis for state owned tanks.				
	Term of Contract:	04/14/2020 - 01/31/2024	Contract # 22874			
4.		VARIOUS STATE AGENCIES	REENA GULL SIPPOLA	OTHER: VARIOUS AGENCIES	\$100,000	
	Contract Description:	This is a new contract to provide ongoing translation and interpretation services in Northern Nevada.				
	Term of Contract:	Upon Approval - 01/15/2022	Contract # 22937			
5.		VARIOUS STATE AGENCIES	SIERRA SERENTIY PROVIDERS, LLC	OTHER: VARIOUS AGENCIES	\$600,000	
	Contract Description:	This is the first amendment to the original contract which provides behavioral health services. This amendment increases the maximum amount from \$300,000 to \$900,000 due to an increased volume of requests for these services.				
	Term of Contract:	03/12/2019 - 06/30/2022	Contract # 21503			

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: **22955**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: **ACCESS BUILDING SOLUTIONS, LLC**Contractor Name: **ACCESS BUILDING SOLUTIONS, LLC**Address: **50 EMERY ST #455**City/State/Zip: **Pahrump, NV 89048**Contact/Phone: **Cynthia Cotton 702-419-5009**Vendor No.: **T27043206**NV Business ID: **NV20091455994**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 % VARIOUS AGENCIES**Agency Reference #: **S165-TB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 90 days**4. Type of contract: **MSA**Contract description: **Job Development**

5. Purpose of contract:

This is a new contract to provide ongoing home modification services to support job development and rehabilitation.

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-S165 for Job Development 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	03/05/2020 13:40:49 PM
Division Approval	jthom17	03/05/2020 13:40:51 PM
Department Approval	ldeloach	03/06/2020 08:39:04 AM
Contract Manager Approval	rvradenb	03/09/2020 11:10:40 AM
Budget Analyst Approval	stilley	03/16/2020 15:05:47 PM
BOE Agenda Approval	hfield	03/17/2020 10:20:38 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: **22909**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: **CARING HANDS ADULT DAY SERVICE, LLC**Contractor Name: **CARING HANDS ADULT DAY SERVICE, LLC**Address: **2580 North Rancho Rd., Ste 100**City/State/Zip: **North Las Vegas, NV 89032**Contact/Phone: **Ann M Williams 702-301-3006**Vendor No.: **T32009323A**NV Business ID: **NV20181743075**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 % 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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 90 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide adult day care services statewide.

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	02/27/2020 15:18:36 PM
Division Approval	jthom17	02/27/2020 15:18:39 PM
Department Approval	ldeloach	02/27/2020 15:52:11 PM
Contract Manager Approval	rvradenb	03/04/2020 13:44:10 PM
Budget Analyst Approval	stilley	03/16/2020 10:39:04 AM
BOE Agenda Approval	hfield	03/17/2020 09:05:18 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: **22874**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: **HUNT & SONS, INC.**Contractor Name: **HUNT & SONS, INC.**Address: **5750 S. Watt Ave.**City/State/Zip **Sacramento, NV 89434**Contact/Phone: **mcampbell@huntntsons.com 775-323-1866**Vendor No.: **T27040801**NV Business ID: **NV20101101886**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 % VARIOUS AGENCIES

Agency Reference #: **99SWC-S818 NF**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/14/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2024**Contract term: **3 years and 292 days**4. Type of contract: **MSA**Contract description: **Bulk Fuel Purchase**

5. Purpose of contract:

This is a new contract to provide ongoing bulk fuel purchase and delivery services statewide on an as-needed basis for state owned tanks.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$118,500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

State Agencies have the need for bulk fuel purchase and delivery services.

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

The State does not employ bulk fuel purchase and delivery services for the state.

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):

**Ferrellgas
River City
Rebel Oil**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S818 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 11 vendors selected by the appointed evaluation committee.

d. Last bid date: 08/19/2013 Anticipated re-bid date: 10/18/2023

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 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:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	02/26/2020 11:22:01 AM
Division Approval	jthom17	02/26/2020 11:22:07 AM
Department Approval	ldeloach	02/27/2020 12:16:29 PM
Contract Manager Approval	nfese1	02/27/2020 15:05:38 PM
Budget Analyst Approval	stilley	03/16/2020 14:25:08 PM
BOE Agenda Approval	hfield	03/17/2020 10:24:38 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: **22937**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: **REENA GULL SIPPOLA**Contractor Name: **REENA GULL SIPPOLA**Address: **5200 SUMMIT RIDGE DR. APT 3614**City/State/Zip: **RENO, NV 89523**Contact/Phone: **REENA SIPPOLA 7753384794**Vendor No.: **T32009487**NV Business ID: **NV20181510131**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 % VARIOUS AGENCIES**Agency Reference #: **S359-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/15/2022**Contract term: **1 year and 289 days**4. Type of contract: **MSA**Contract description: **Translation Services**

5. Purpose of contract:

This is a new contract to provide ongoing translation and interpretation services in Northern Nevada.

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?

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-S359 for translation and interpretation 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 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	jthom17	02/26/2020 11:37:17 AM
Division Approval	jthom17	02/26/2020 11:37:20 AM
Department Approval	ldeloach	02/27/2020 12:10:22 PM
Contract Manager Approval	rvradenb	03/16/2020 15:41:11 PM
Budget Analyst Approval	stilley	03/18/2020 15:35:57 PM
BOE Agenda Approval	hfield	03/19/2020 15:53:18 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: **21503**Amendment
Number: **1**Agency Name: **MSA MASTER SERVICE
AGREEMENTS**Legal Entity
Name: **SIERRA SERENTIY PROVIDERS, LLC**Agency Code: **MSA**Contractor Name: **SIERRA SERENTIY PROVIDERS, LLC**Appropriation Unit: **9999 - All Categories**Address: **515 E. Gault Way**Is budget authority
available?: **Yes**City/State/Zip **Sparks , NV 89431**

If "No" please explain: Not Applicable

Contact/Phone: **Trena Anderson 775-432-1035**Vendor No.: **T29041685**NV Business ID: **NV20171232466**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 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % VARIOUS AGENCIES

Agency Reference #: **RM167**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **03/12/2019**
Examiner's approval?Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**
Termination Date:Contract term: **3 years and 111 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is the first amendment to the original contract which provides behavioral health services. This amendment increases the maximum amount from \$300,000 to \$900,000 due to an increased volume of requests for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$300,000.00	\$300,000.00	\$300,000.00	Yes - Action
2. Amount of current amendment (#1):	\$600,000.00	\$600,000.00	\$600,000.00	Yes - Action
3. New maximum contract amount:	\$900,000.00			

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 must be provided by specially trained individuals.

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	02/27/2020 15:20:34 PM
Division Approval	jthom17	02/27/2020 15:20:37 PM
Department Approval	ldeloach	02/27/2020 15:48:20 PM
Contract Manager Approval	rvradenb	03/04/2020 13:43:54 PM
Budget Analyst Approval	stilley	03/16/2020 10:33:00 AM
BOE Agenda Approval	hfield	03/17/2020 10:12:02 AM

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	010	GOVERNOR'S OFFICE – ATHLETIC COMMISSION	TED W. GIBSON	FEE: ATHLETIC COMMISSION GATE FEES 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAMS) 10%	\$20,000	
		Contract Description:	This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.			
		Term of Contract:	03/16/2020 - 06/30/2024	Contract # 22910		
2.	010	GOVERNOR'S OFFICE – ATHLETIC COMMISSION	JACK V. LAZZAROTTO	FEE: ATHLETIC COMMISSION GATE FEE 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 10%	\$20,000	
		Contract Description:	This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.			
		Term of Contract:	03/16/2020 - 06/30/2024	Contract # 22908		
3.	010	GOVERNOR'S OFFICE – ATHLETIC COMMISSION	MICHAEL S. MARTINO	FEE: ATHLETIC COMMISSION GATE FEES 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 10%	\$20,000	
		Contract Description:	This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.			
		Term of Contract:	03/16/2020 - 06/30/2024	Contract # 22907		
4.	010	GOVERNOR'S OFFICE – ATHLETIC COMMISSION	EFREN MENDOZA DBA INSPECTOR NSAC	FEE: ATHLETIC COMMISSION GATE FEES 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 10%	\$20,000	
		Contract Description:	This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.			
		Term of Contract:	03/16/2020 - 06/30/2024	Contract # 22897		
5.	010	GOVERNOR'S OFFICE – ATHLETIC COMMISSION	LEON MOREHEAD	FEE: ATHLETIC COMMISSION GATE FEES 90% OTHER: TICKET SURCHARGE 10%	\$20,000	
		Contract Description:	This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.			
		Term of Contract:	03/16/2020 - 05/01/2024	Contract # 22895		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
6.	030	ATTORNEY GENERAL'S OFFICE - TORT CLAIMS FUND	SENECA HOLDINGS, LLC DBA HOLO DISCOVERY	OTHER: TORT CLAIM FUNDS	\$30,000	Exempt
	Contract Description:	This is a new contract to provide ongoing discovery in marijuana cases for forensic imaging and analysis for laptops and mobile devices.				
	Term of Contract:	09/20/2019 - 09/20/2022	Contract # 22780			
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	CHEM AQUA, INC.	OTHER: BUILDINGS AND GROUNDS - BUILDING RENT INCOME REVENUE	\$32,819	
	Contract Description:	This is a new contract to provide ongoing cooling tower cleaning treatment to protect heating, ventilation and air conditioning equipment for several state-owned buildings in southern Nevada.				
	Term of Contract:	07/01/2020 - 06/30/2024	Contract # 22884			
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	DG KOCH ASSOCIATES, LLC	BONDS	\$13,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Ely State Prison - Building 9 heating, ventilation and air conditioning replacement CIP Project; CIP project No. 19-M15; SPWD Contract No. 112908. This amendment increases the maximum amount from \$95,000 to \$108,000 due to the additional design requirement for an air-cooled chiller system.				
	Term of Contract:	09/10/2019 - 06/30/2023	Contract # 22257			
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	DLR GROUP ARCHITECTURE & ENGINEERING, INC.	GENERAL	\$29,540	Professional Service
	Contract Description:	This is a new contract to provide 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.				
	Term of Contract:	03/02/2020 - 06/30/2023	Contract # 22917			

INFORMATION 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	CORE CONSTRUCTION SERVICES OF NEVADA, INC.	BONDS	\$12,905	Professional Service
	Contract Description:	This is a new contract to provide professional construction cost and scheduling services for the Grant Sawyer - Fleet Services Maintenance Facility CIP project, to include complete construction documents cost estimates, project scope, quantities, and unit costs reconciliations and project critical path methodology development: CIP Project No. 17-P04; SPWD Contract No. 113369.				
	Term of Contract:	03/12/2020 - 06/30/2021	Contract # 22969			
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	Q&D CONSTRUCTION, INC.	GENERAL	\$12,300	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Hero's Memorial - Renovation and Seismic Retrofit Advance Planning CIP project, to include the constructability analysis and independent cost estimating services: CIP Project No. 19-P02; SPWD Contract No.113364.				
	Term of Contract:	03/02/2020 - 06/30/2023	Contract # 22929			
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$25,550	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Adult Mental Health Services - Building 1 ADA Upgrades CIP project, to include design, construction and bid documents as well as construction administration services to remodel two men's and two women's restrooms on the lower level of building 1: CIP Project No.19-S02-5; SPWD Contract No.113368.				
	Term of Contract:	03/02/2020 - 06/30/2023	Contract # 22930			
13.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER	ANYTIME PLUMBING, INC. DBA ABE'S PLUMBING AIR REPAIR FAST WATER	GENERAL 36% FEDERAL 64%	\$36,400	
	Contract Description:	This is a new contract to provide ongoing plumbing repair and maintenance services.				
	Term of Contract:	04/01/2020 - 03/31/2024	Contract # 22834			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
14.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	EXECUTIVE PEST SERVICES, LLC	GENERAL	\$30,000	
		Contract Description:	This is a new contract to provide ongoing pest control services at the Las Vegas hospital.			
		Term of Contract:	03/10/2020 - 02/28/2024	Contract # 22617		
15.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CALIENTE YOUTH CENTER	DESERT BOILERS & CONTROLS, INC.	GENERAL	\$12,400	
		Contract Description:	This is a new contract to rebuild the existing boiler system at the Juvenile Justice facility in Caliente.			
		Term of Contract:	01/07/2020 - 06/30/2020	Contract # 22823		
16.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	IDEAS COUNSELING, LLC	GENERAL	\$40,000	
		Contract Description:	This is a new contract to provide an initial client assessment, weekly individual counseling services, family therapy services and crisis intervention.			
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22801		
17.	440	DEPARTMENT OF CORRECTIONS - ELY STATE PRISON	DESERT BOILERS & CONTROLS, INC.	GENERAL	\$35,692	
		Contract Description:	This is a new contract to provide emergency repairs for boiler #2 and #3 at Ely State Prison.			
		Term of Contract:	02/11/2020 - 06/30/2020	Contract # 22889		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
18.	440	DEPARTMENT OF CORRECTIONS - FLORENCE MCCLURE WOMEN'S CORRECTIONAL CENTER	JAMES F. THOMSON, JR. DBA AMERICAN SOUTHWEST ELECTRIC	GENERAL	\$34,664	
	Contract Description:	This is a new contract to provide emergency generator switch repairs to the backup generators at Florence McClure Women's Correctional Center.				
		Term of Contract:	01/16/2020 - 06/30/2020	Contract # 22827		
19.	440	DEPARTMENT OF CORRECTIONS - INMATE WELFARE ACCOUNT	GET LOCAL SEARCH MARKETING, LLC DBA 777 SATELLITE STAR	OTHER: INMATE WELFARE ACCOUNT	\$15,700	
	Contract Description:	This is a new contract to provide services to analyze and repair cable issues throughout the Northern Nevada Correctional Center.				
		Term of Contract:	03/11/2020 - 06/30/2020	Contract # 22859		
20.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	SMG RENO FACILITIES DBA AMS GLOBAL	OTHER: REGISTRATION FEES AND SPONSORSHIPS	\$14,205	
	Contract Description:	This is a new contract to provide conference space and catering for the 2020 Nevada Governor's Conference on Agriculture. The focus will be on providing education and resources to Nevada farmers, ranchers, food processors and food and beverage manufactures interested in exporting their products.				
		Term of Contract:	03/04/2020 - 06/30/2020	Contract # 22934		
21.	611	GAMING CONTROL BOARD	KAMER ZUCKER ABBOTT	GENERAL	\$12,500	Professional Service
	Contract Description:	This is a new contract to provide updated employment and human resources law guidance to supervisory employees.				
		Term of Contract:	03/16/2020 - 06/30/2020	Contract # 22958		
22.	611	GAMING CONTROL BOARD - INVESTIGATION FUND	BERKELEY RESEARCH GROUP (HONG KONG) LIMITED	FEE: INVESTIGATIVE	\$48,000	
	Contract Description:	This is a new contract to provide ongoing investigative services in foreign jurisdictions.				
		Term of Contract:	02/24/2020 - 01/31/2022	Contract # 22885		
23.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	JONES WEST FORD	HIGHWAY	\$15,200	
	Contract Description:	This is the first amendment to the original contract which provides ongoing excess Nevada Highway Patrol fleet vehicle hauls from locations throughout the State of Nevada. This amendment extends the termination date from April 30, 2020 to March 1, 2022 and increases the maximum amount from \$16,000 to \$31,200 due the continued need for these services.				
		Term of Contract:	03/26/2018 - 03/01/2022	Contract # 19856		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
24.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	RENO FORKLIFT DBA RENO SCALES AND FORKLIFT	HIGHWAY 70% FEDERAL 30%	\$30,000	
	Contract Description:	This is a new contract to provide ongoing certification, repair, and calibration on semi-portable, portable and Weigh-In-Motion scales.				
		Term of Contract:	03/02/2020 - 03/02/2024	Contract # 22913		
25.	658	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY PLAN AND ADMINISTRATION	AGATE SOFTWARE, INC.	FEDERAL	\$48,976	Sole Source
	Contract Description:	This is a new contract that continues ongoing support, maintenance and hosting of the agency's existing grants management system.				
		Term of Contract:	02/01/2020 - 09/30/2020	Contract # 22941		
26.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	ALARMCO, INC.	FEE: SPORTSMEN	\$16,100	
	Contract Description:	This is a new contract for ongoing services of burglar and fire alarm maintenance at the southern Nevada offices.				
		Term of Contract:	09/01/2019 - 08/31/2023	Contract # 22782		
27.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	CAD, INC. DBA CAD PEST CONTROL SERVICES	FEE: SPORTSMEN 75% FEDERAL 25%	\$18,455	
	Contract Description:	This is a new contract to provide ongoing pest control services at the northern Nevada offices.				
		Term of Contract:	03/23/2020 - 06/30/2024	Contract # 22685		
28.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	HENDERSON PEST CONTROL, LLC	GENERAL 33% FEE: SPORTSMEN 34% FEDERAL 33%	\$14,725	
	Contract Description:	This is a new contract to provide ongoing pest control services at the Lake Mead Hatchery and the southern offices.				
		Term of Contract:	02/20/2020 - 06/30/2024	Contract # 22805		
29.	702	DEPARTMENT OF WILDLIFE - HABITAT	WESTERN CAROLINA UNIVERSITY	FEE: HABITAT CONSERVATION AND UPLAND GAME STAMP	\$20,000	
	Contract Description:	This is a new intralocal agreement to provide project management, data analyses and manuscript preparation services for the development of strategic multi-scale framework for assessing resource values and threats to Great Basin riparian and meadow ecosystems.				
		Term of Contract:	02/26/2020 - 12/31/2021	Contract # 22727		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
30.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	ANTHONY SPATUCCI DBA DAY GO ADVENTURES	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide kayaks for rent and guided tours at the Cave Rock location of Lake Tahoe Nevada State Park.				
		Term of Contract:	03/13/2020 - 10/31/2020	Contract # 22946		
31.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	RICHARD H. GIEBITZ DBA LAHONTAN PEAK TOWERS, LLC	GENERAL	\$21,000	
	Contract Description:	This is a new lease agreement to operated and maintain a radio repeater at the Lahontan Peak Tower radio site. This service is required to operate and maintain the radio repeater to improve communication service and reduce interference for radio transmission among State Park personnel and Lahontan State Recreation Area.				
		Term of Contract:	01/01/2020 - 12/31/2024	Contract # 22788		
32.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - MAINTENANCE OF STATE PARKS-NON-EXEC	LAS VEGAS SEPTIC SERVICES, LLC	FEE: UTILITY SURCHARGE	\$45,000	
	Contract Description:	This is a new contract to provide septic pumping services at Spring Mountain Ranch State Park.				
		Term of Contract:	03/10/2020 - 02/28/2023	Contract # 22901		
33.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - MAINTENANCE OF STATE PARKS-NON-EXEC	MARSHALL'S SEPTIC CARE, LLC	FEE: UTILITY SURCHARGE	\$46,400	
	Contract Description:	This is a new contract to provide septic pumping services at Dayton and Washoe Lake State Parks.				
		Term of Contract:	02/21/2020 - 12/31/2021	Contract # 22702		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
34.	705	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES - BASIN ACCOUNT REGION 1 - NON-EXEC	BOARD OF REGENTS - NEVADA SYSTEM OF HIGHER EDUCATION – OBO - DESERT RESEARCH INSTITUTE	OTHER: BASIN FUNDS	\$38,064	
	Contract Description:	This is the third amendment to the original interlocal agreement which provides for the development of a groundwater flow model for the Upper Humboldt Basin to simulate withdrawal-included change in inflow to or outflow from the near-surface aquifer. This amendment increases the maximum amount from \$396,487 to \$434,551 and amends the scope of work for additional capture map simulations for 1- and 5-year periods; high performance computing to evaluate the impacts of the parameter uncertainty on predicted capture fractions and ensure consistency in modeling strategies across all Humboldt River models.				
	Term of Contract:	04/12/2016 - 02/28/2021	Contract # 17422			
35.	705	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES - BASIN ACCOUNT REGION 1 - NON-EXEC	BOARD OF REGENTS - NEVADA SYSTEM OF HIGHER EDUCATION – OBO - DESERT RESEARCH INSTITUTE	OTHER: BASIN FUNDS	\$15,936	
	Contract Description:	This is a new interlocal agreement to complete capture maps and uncertainty analysis for the Lower Humboldt River basin. The maps will be developed from numerical groundwater model that quantifies potential streamflow capture caused by groundwater pumping.				
	Term of Contract:	03/19/2020 - 02/28/2021	Contract # 22980			
36.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	CARSON NUGGET, INC.	GENERAL	\$13,438	
	Contract Description:	This is a new contract to provide hotel lodging for out-of-area division employees attending the annual pre-fire season All Hands Meeting March 16-20, 2020.				
	Term of Contract:	03/16/2020 - 03/21/2020	Contract # 22959			
37.	B002	LICENSING BOARDS AND COMMISSIONS - ARCHITECTURE, INTERIOR DESIGN AND RESIDENTIAL DESIGN	AARON TVETER, LTD	FEE: APPLICATION AND LICENSURE	\$42,000	
	Contract Description:	This is a new contract to provide financial services.				
	Term of Contract:	01/01/2020 - 12/31/2024	Contract # 22868			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	B006	LICENSING BOARDS AND COMMISSIONS - COSMETOLOGY	JILL I. GREINER DBA LAW OFFICE OF JILL GREINER	FEE: LICENSING	\$40,000	
	Contract Description:	This is a new contract to provide a hearing officer to resolve contested matters pursuant to NRS 644A.				
		Term of Contract:	04/14/2020 - 04/13/2022	Contract # 22967		
39.	B015	LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS	CASEY NEILON, INC.	FEE: LICENSING	\$17,000	
	Contract Description:	This is a new contract to provide an independent financial audit.				
		Term of Contract:	03/10/2020 - 12/31/2020	Contract # 22951		
40.	B015	LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS	TRUCKEE MEADOWS OFFICE CLEANING, INC.	FEE: LICENSING	\$13,728	
	Contract Description:	This is a new contract to provide janitorial services.				
		Term of Contract:	03/10/2020 - 12/31/2020	Contract # 22935		
41.	B028	LICENSING BOARDS AND COMMISSIONS - VETERINARY MEDICAL EXAMINERS	KATHLEEN LAXALT	FEE: LICENSING	\$36,000	
	Contract Description:	This is a new contract to provide ongoing government affairs and lobbyist services through the 2021 legislative session.				
		Term of Contract:	02/26/2020 - 02/01/2022	Contract # 22681		
42.	B032	LICENSING BOARDS AND COMMISSIONS - ALCOHOL, DRUG AND GAMBLING COUNSELORS	PLATT LAW GROUP	OTHER: AGENCY FUNDS	\$45,000	
	Contract Description:	This is a new contract to provide ongoing legal services.				
		Term of Contract:	02/26/2020 - 09/30/2021	Contract # 22915		
43.	B032	LICENSING BOARDS AND COMMISSIONS - ALCOHOL, DRUG AND GAMBLING COUNSELORS	THENTIA GLOBAL SYSTEMS US, INC.	OTHER: AGENCY FUNDS	\$45,000	
	Contract Description:	This is a new contract to provide licensing software.				
		Term of Contract:	03/10/2020 - 12/31/2022	Contract # 22916		

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: **22910**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: **GIBSON, TED W**Contractor Name: **GIBSON, TED W**Address: **3397 NAMBE DR**City/State/Zip: **RENO, NV 89511-4300**Contact/Phone: **775/851-9669**Vendor No.: **T27021503**NV Business ID: **NV20111038088**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	90.00 % Athletic Commission Gate Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	10.00 % Ticket Surcharge (Amateur Programs)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 107 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in, \$50 per amateur gym inspection and \$150 per event/exhibition. Up to \$1,000 yearly for travel (not to exceed daily GSA rates), not to exceed \$20,000.00 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ inspectors as Independent Contractors.

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

The number of Inspectors required for an event exceed the total number of agency event staff. The agency staff who work events have different duties than the Inspectors. In addition, events are held on evenings, weekends and holidays. With the Commission's limited staff, the agency would incur excessive overtime in trying to fulfill these obligations. Finally, much of the Inspector Services are done in male locker rooms which would exclude 70% of our 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 Applicableb. Solicitation Waiver: **Not Applicable**

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

The vendor has extensive knowledge of the rules and regulations of unarmed combat and has previously contracted as an Inspector for the Nevada Athletic Commission. Performance is satisfactory.

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:

Athletic Commission - multiple contracts. This is a renewal contract and services provided 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 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	ssands	03/11/2020 13:59:57 PM
Division Approval	ssands	03/11/2020 14:00:01 PM
Department Approval	ssands	03/11/2020 14:00:04 PM
Contract Manager Approval	ssands	03/11/2020 14:00:07 PM
Budget Analyst Approval	mranki1	03/16/2020 15:20:44 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: **22908**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: **LAZZAROTTO, JACK V**Contractor Name: **LAZZAROTTO, JACK V**Address: **8942 BRACKEN CLIFF CT**City/State/Zip: **LAS VEGAS, NV 89129-3647**

Contact/Phone: 702/580-4395

Vendor No.: T81007716

NV Business ID: NV20111796985

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	90.00 % Athletic Commission Gate Fee
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	10.00 % Ticket Surcharge (Amateur Program)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 107 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in, \$50 per amateur gym inspection and \$150 per event/exhibition. Up to \$1,000 yearly for travel (not to exceed daily GSA rates), not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ inspectors as Independent Contractors.

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

The number of Inspectors required for an event exceed the total number of agency event staff. The agency staff who work events have different duties than the Inspectors. In addition, events are held on evenings, weekends and holidays. With the Commission's limited staff, the agency would incur excessive overtime in trying to fulfill these obligations. Finally, much of the Inspector Services are done in male locker rooms which would exclude 70% of our 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 Applicableb. Solicitation Waiver: **Not Applicable**

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

The vendor has extensive knowledge of the rules and regulations of unarmed combat and has previously contracted as an Inspector for the Nevada Athletic Commission. Performance is satisfactory.

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:

Athletic Commission. This is a renewal contract for Inspector Services - Performance 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 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:

Alejandro Ybarra, Chief Inspector Ph: 702-931-1991

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/11/2020 14:53:55 PM
Division Approval	ssands	03/11/2020 14:53:57 PM
Department Approval	ssands	03/11/2020 14:54:00 PM
Contract Manager Approval	ssands	03/11/2020 14:54:09 PM
Budget Analyst Approval	mranki1	03/16/2020 15:26:07 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: **22907**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: **MARTINO, MICHAEL S**Contractor Name: **MARTINO, MICHAEL S**Address: **1400 COPPER POINT CIR**City/State/Zip: **RENO, NV 89519-6262**Contact/Phone: **775/303-3747**Vendor No.: **T80931199**NV Business ID: **NV20121007823**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	90.00 % Athletic Commission Gate Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	10.00 % Ticket Surcharge (Amateur Program)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 107 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-ins, \$50 per amateur gym inspection, and \$150 for events and exhiitions. Up to \$1,000 yearly for travel (not to exceed daily GSA rates), not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ inspectors as Independent Contractors.

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

The number of Inspectors required for an event exceed the total number of agency event staff. The agency staff who work events have different duties than the Inspectors. In addition, events are held on evenings, weekends and holidays. With the Commission's limited staff, the agency would incur excessive overtime in trying to fulfill these obligations. Finally, much of the Inspector Services are done in male locker rooms which would exclude 70% of our 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 Applicableb. Solicitation Waiver: **Not Applicable**

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

The vendor has extensive knowledge of the rules and regulations of unarmed combat and has previously contracted as an Inspector for the Nevada Athletic Commission. Performance is satisfactory.

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:
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:

Alejandro Ybarra, Chief Inspector Ph: 702-931-1991

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/11/2020 14:52:56 PM
Division Approval	ssands	03/11/2020 14:52:58 PM
Department Approval	ssands	03/11/2020 14:53:00 PM
Contract Manager Approval	ssands	03/11/2020 14:53:03 PM
Budget Analyst Approval	mranki1	03/16/2020 15:28:28 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: **22897**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: **MENDOZA, EFREN DBA**Contractor Name: **MENDOZA, EFREN DBA**Address: **INSPECTOR NSAC
370 STRADELLA WAY
RENO, NV 89521-4298**City/State/Zip: **RENO, NV 89521-4298**Contact/Phone: **775/815-3864**Vendor No.: **T27006388**NV Business ID: **NV20121216302**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	90.00 % ATHLETIC COMMISSION GATE FEES
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	10.00 % TICKET SURCHARGE (AMATEUR PROGRAM)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 107 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in, \$50 per amateur gym inspection and \$150 per event/exhibition. Up to \$1,000 yearly for travel (not to exceed GSA rates), not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ Inspectors as independent contractors.

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

The number of Inspectors required for an event exceed the total number of agency event staff. The agency staff who work events have different duties than the Inspectors. In addition, events are held on evenings, weekends and holidays. With the Commission's limited staff, the agency would incur excessive overtime in trying to fulfill these obligations. Finally, much of the Inspector Services are done in male locker rooms which would exclude 70% of our 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?

The vendor has extensive knowledge of the rules and regulations of unarmed combat and has previously contracted as an Inspector for the Nevada Athletic Commission. Performance is satisfactory.

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:
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:

Alejandro Ybarra, Chief Inspector Ph: (702) 931-1991

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/11/2020 14:52:04 PM
Division Approval	ssands	03/11/2020 14:52:06 PM
Department Approval	ssands	03/11/2020 14:52:09 PM
Contract Manager Approval	ssands	03/11/2020 14:52:12 PM
Budget Analyst Approval	mranki1	03/16/2020 15:24:13 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: **22895**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: **MOREHEAD, LEON**Contractor Name: **MOREHEAD, LEON**Address: **2615 HIKO AVE**City/State/Zip: **RENO, NV 89512-3239**Contact/Phone: **775/229-3709**Vendor No.: **T27037219**NV Business ID: **NV20151200915**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	90.00 % ATHLETIC COMMISSION GATE FEES
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	10.00 % TICKET SURCHARGE

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/01/2024**Contract term: **4 years and 47 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing inspector services for unarmed combat weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in, \$150 per event/exhibition, \$50 per amateur gym inspection. Up to \$1,000 yearly for travel, not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ Inspectors as Independent Contractors.

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

The number of Inspectors required for an event exceed the total number of agency event staff. The agency staff who work events have different duties than the Inspectors. In addition, events are held on evenings, weekends and holidays. With the Commission's limited staff, the agency would incur excessive overtime in trying to fulfill these obligations. Finally, much of the Inspector Services are completed in male locker rooms which would exclude 70% of our 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 Applicableb. Solicitation Waiver: **Not Applicable**

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

The vendor has extensive knowledge of the rules and regulations of unarmed combat and has previously contracted as an Inspector for the Nevada Athletic Commission. Performance is satisfactory.

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:
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:

Alejandro Ybarra, Chief Inspector Ph: 702-931-1991

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	03/11/2020 14:54:48 PM
Division Approval	ssands	03/11/2020 14:54:50 PM
Department Approval	ssands	03/11/2020 14:54:53 PM
Contract Manager Approval	ssands	03/11/2020 14:54:57 PM
Budget Analyst Approval	mranki1	03/16/2020 15:22:43 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: **22780**Agency Name: **ATTORNEY GENERAL'S OFFICE**Agency Code: **030**Appropriation Unit: **1348-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SENECA HOLDINGS LLC DBA HOLO DISCOVER**Contractor Name: **SENECA HOLDINGS LLC DBA HOLO DISCOVER**Address: **3016 W CHARLESTON BLVD STE 170**City/State/Zip: **LAS VEGAS, NV 89102-1994**Contact/Phone: **702-333-4321**Vendor No.: **T32008944**NV Business ID: **NV20161209935**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 % Tort Claim Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/20/2019**Anticipated BOE meeting date **04/2020**Retroactive? **Yes**

If "Yes", please explain

We are requesting a retroactive approval to September 20, 2019 due to ongoing negotiations with the vendor.3. Termination Date: **09/20/2022**Contract term: **3 years and 1 day**4. Type of contract: **Contract**Contract description: **eDiscovery Services**

5. Purpose of contract:

This is a new contract to provide ongoing discovery in marijuana cases for forensic imaging and analysis for laptops and mobile devices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Holo Discovery provides services to obtain images of electronic devices for the purpose of discovery in marijuana cases.

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

State employees do not provide this type 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: **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?

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:

Steve Shevorsi , Chief Litigation Counsel Ph: 702-486-3783

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	03/18/2020 11:58:35 AM
Division Approval	jhoba2	03/18/2020 11:58:43 AM
Department Approval	jhoba2	03/18/2020 11:58:49 AM
Contract Manager Approval	Iramire7	03/18/2020 12:43:15 PM
Budget Analyst Approval	jyou23	03/24/2020 09:26:21 AM

AARON D. FORD
Attorney General

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First Assistant Attorney General

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RACHEL J. ANDERSON
General Counsel

HEIDI PARRY STERN
Solicitor General

STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street
Carson City, Nevada 89701

MEMORANDUM

Date: March 10, 2020

To: Jessica Young, Executive Branch Budget Officer
Governor's Finance Office

From: Lesley Volkov, Management Analyst II

Subject: Retroactive Approval for contract #22780 Seneca Holdings DBA
Holo Discovery

The Attorney General's Office received a court order requiring cell phone documents be provided in relation to a specific case. The court order required initial records to be provided within a 14 day time frame.

A solicitation was not conducted based on this vendor being used by all other parties involved in this case and potential requirement for services provided being used as expert witness defense. Additional subsequent trial dates also specifically identify this vendor as the required vendor in court documents for protocol.

Initial use projected costs to be within the agency authorization threshold. Continued need of these services in relation to this case now requires clerk of the board approval and request a retroactive contract to September 20, 2019 due to additional negotiation with the vendor to finalize this contractual agreement.

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: **22884**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	CHEM AQUA INC
Agency Code:	082	Contractor Name:	CHEM 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:	800/527-9921
		Vendor No.:	T29023740A
		NV Business ID:	NV19991172643
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 # 2833910		

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Water treatment**

5. Purpose of contract:

This is a new contract to provide ongoing cooling tower cleaning treatment to protect heating, ventilation, and air conditioning equipment for several state-owned buildings in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$32,819.00****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?

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?

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:

B&G 2015 to current. 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:

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	ssands	03/09/2020 08:47:15 AM
Division Approval	ssands	03/09/2020 08:47:17 AM
Department Approval	ssands	03/09/2020 08:47:20 AM
Contract Manager Approval	ssands	03/18/2020 15:30:18 PM
Budget Analyst Approval	nkephart	03/19/2020 09:43:54 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: **22257**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **DG KOCH ASSOCIATES, LLC**Agency Code: **082**Contractor Name: **DG KOCH ASSOCIATES, LLC**Appropriation Unit: **1550-80**Address: **2920 S JONES BLVD.
SUITE 100**Is budget authority available?: **Yes**City/State/Zip: **LAS VEGAS, NV 89146-5394**

If "No" please explain: Not Applicable

Contact/Phone: **702-221-5160**Vendor No.: **T29026336**NV Business ID: **NV20061487757**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 #: **112908**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/10/2019**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **3 years and 294 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 Ely State Prison - Building 9 heating, ventilation, and air conditioning replacement CIP Project; CIP project No. 19-M15; SPWD Contract No. 112908. This amendment increases the maximum amount from \$95,000 to \$108,000 due to the additional design requirement for an air-cooled chiller system.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$95,000.00	\$95,000.00	\$95,000.00	Yes - Action
2. Amount of current amendment (#1):	\$13,000.00	\$13,000.00	\$13,000.00	Yes - Info
3. New maximum contract amount:	\$108,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 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 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	Iwildes	02/27/2020 10:10:13 AM
Division Approval	Iwildes	02/27/2020 10:10:17 AM
Department Approval	Iwildes	02/27/2020 10:10:20 AM
Contract Manager Approval	Iwildes	02/27/2020 10:10:25 AM
Budget Analyst Approval	nkephart	03/12/2020 11:12:03 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: **22917**

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 SUITE 250
Is budget authority available?:	Yes	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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 119 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 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.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$29,540.00**

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:

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:

Labaj, Mark, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/18/2020 13:44:44 PM
Division Approval	Iwildes	02/18/2020 13:44:47 PM
Department Approval	Iwildes	02/18/2020 13:44:51 PM
Contract Manager Approval	Iwildes	02/18/2020 13:44:53 PM
Budget Analyst Approval	jrodrig9	03/02/2020 15:21:46 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: **22969**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1558-44**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CORE CONSTRUCTION SERVICES OF**Contractor Name: **CORE CONSTRUCTION SERVICES OF**Address: **NEVADA INC
7150 CASCADE VALLEY CT
LAS VEGAS, NV 89128-0455**City/State/Zip: **702-794-0550**Contact/Phone: **T81092744**Vendor No.: **NV19861002524**NV Business ID: **2020-2021**

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	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 113369

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/12/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 110 days**4. Type of contract: **Contract**Contract description: **Miscellaneous**

5. Purpose of contract:

This is a new contract to provide professional construction cost and scheduling services for the Grant Sawyer - Fleet Services Maintenance Facility CIP project, to include complete construction documents cost estimates, project scope, quantities, and unit costs reconciliations and project critical path methodology development: CIP Project No. 17-P04; SPWD Contract No. 113369.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,905.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 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 Commissioning, Surveying, and Miscellaneous 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:

Lutz, Andrew, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	03/05/2020 12:30:49 PM
Division Approval	Iwildes	03/05/2020 12:30:51 PM
Department Approval	Iwildes	03/05/2020 12:30:53 PM
Contract Manager Approval	Iwildes	03/05/2020 12:30:56 PM
Budget Analyst Approval	nkephart	03/12/2020 11:11:12 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: **22929**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: Q&D CONSTRUCTION INC
Agency Code: 082	Contractor Name: Q&D CONSTRUCTION INC
Appropriation Unit: 1558-62	Address: 1050 S. 21st STREET
Is budget authority available?: Yes	City/State/Zip: SPARKS, NV 89431
If "No" please explain: Not Applicable	Contact/Phone: 775-786-2677
	Vendor No.: T81009604A
	NV Business ID: 19671000639

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 #: 113364

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 119 days**4. Type of contract: **Contract**Contract description: **Owner - CMAR**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Hero's Memorial - Renovation and Seismic Retrofit Advance Planning CIP project, to include the completion of the programming and schematic design for the seismic strengthening and major remodel of the Hero's memorial building and annex: CIP Project No. 19-P02; SPWD Contract No.113364.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,300.00**

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 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:

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:

Current, Jeff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/24/2020 09:16:23 AM
Division Approval	Iwildes	02/24/2020 09:16:26 AM
Department Approval	Iwildes	02/24/2020 09:16:29 AM
Contract Manager Approval	Iwildes	02/24/2020 09:16:32 AM
Budget Analyst Approval	jrodrig	03/02/2020 15:52:14 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: **22948**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1558-62**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Q&D CONSTRUCTION, INC.**Contractor Name: **Q&D CONSTRUCTION, INC.**Address: **1050 S 21st STREET**City/State/Zip: **SPARKS, NV 89510-0835**Contact/Phone: **775-786-2677**Vendor No.: **T81009604A**NV Business ID: **NV16971000639**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 #: 113364

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/12/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 110 days**4. Type of contract: **Contract**Contract description: **OWNER-CMAR Pre Const**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Heroes Memorial Building - Advanced Planning Renovation and Seismic Retrofit CIP project, to include schematic design for seismic strengthening and a major remodel of the Heroes Memorial Building and Annex: CIP Project No. 19-P02; SPWD Contract No. 113364.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,300.00**

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 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:

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:

Current, Jeff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/28/2020 08:11:14 AM
Division Approval	Iwildes	02/28/2020 08:11:18 AM
Department Approval	Iwildes	02/28/2020 08:11:22 AM
Contract Manager Approval	Iwildes	02/28/2020 08:11:25 AM
Budget Analyst Approval	nkephart	03/12/2020 11:11:38 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: **22930**

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: 1585-54	Address: 1575 DELUCCHI LANE SUITE 120
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502
If "No" please explain: Not Applicable	Contact/Phone: 775-842-0261
	Vendor No.: T29033842
	NV Business ID: NV20131182382

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 #: 113368

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 119 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 Northern Nevada Adult Mental Health Services - Building 1 ADA Upgrades CIP project, to include design, construction and bid documents as well as construction administration services to remodel two men's and two women's restrooms on the lower level of building 1: CIP Project No.19-S02-5; SPWD Contract No.113368.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,550.00**

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 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:

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:

Current, Jeff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Iwildes	02/24/2020 09:37:37 AM
Division Approval	Iwildes	02/24/2020 09:37:39 AM
Department Approval	Iwildes	02/24/2020 09:37:46 AM
Contract Manager Approval	Iwildes	02/24/2020 09:37:49 AM
Budget Analyst Approval	jrodrig9	03/02/2020 16:21:49 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: **22834**Agency Name: **DHHS - AGING AND DISABILITY SERVICES DIVISION**Agency Code: **402**Appropriation Unit: **3279-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ANYTIME PLUMBING, INC.**Contractor Name: **ANYTIME PLUMBING, INC.**Address: **4690 W. POST RD., STE 130**City/State/Zip: **LAS VEGAS, NV 89118**Contact/Phone: **Scott Jester 702/362-9300**Vendor No.: **PUR0005090**NV Business ID: **NV19991205584**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	36.00 %	Fees	0.00 %
X	Federal Funds	64.00 %	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 **04/01/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Plumbing Services**

5. Purpose of contract:

This is a new contract to provide ongoing plumbing repair and maintenance services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$36,400.00**

Other basis for payment: Upon invoice per contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

NAC 449.6851(1) A facility must be designed, constructed, equipped, and maintained in a manner that protects the health and safety of the patients and personnel of the facility and members of the general public.

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

Contracted services are used when required repairs or services exceed the skills of state 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):

**Butter Plumbing
Anytime Plumbing
Pentagon Plumbing**b. Solicitation Waiver: **Not Applicable**

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

The vendor submitted the lowest bid.

d. Last bid date: 01/02/2020 Anticipated re-bid date: 01/02/2024

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:

2010-current. ADSD-Desert Regional Center. 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:

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:

Darrel Hansen, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbowma1	02/18/2020 10:13:22 AM
Division Approval	dbowma1	02/18/2020 10:13:25 AM
Department Approval	mwinebar	02/21/2020 08:49:36 AM
Contract Manager Approval	ltuttl1	02/21/2020 13:22:56 PM
Budget Analyst Approval	jyou23	02/27/2020 08:27:58 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: **22617**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	EXECUTIVE PEST SERVICES, LLC
Agency Code:	406	Contractor Name:	EXECUTIVE PEST SERVICES, LLC
Appropriation Unit:	3161-07	Address:	2120 JARDINE AVE
Is budget authority available?:	Yes	City/State/Zip	NORTH LAS VEGAS, NV 89032
If "No" please explain:	Not Applicable	Contact/Phone:	BRIAN HOLMES 702/321-9547
		Vendor No.:	T27020890A
		NV Business ID:	NV20061525544

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 #: **C17522**

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 **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2024**Contract term: **3 years and 355 days**4. Type of contract: **Contract**Contract description: **Pest Control**

5. Purpose of contract:

This is a new contract to provide ongoing pest control services at the Las Vegas hospital.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00**

Payment for services will be made at the rate of \$525.00 per month

Other basis for payment: \$1,200 contingency per year

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 555.100 and 555.110, pest control is required for keeping the facilities in a sanitary condition for the safety and health of patients, visitors and staff.

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

Currently there are not any state employees available that have the training or certification to use the chemicals needed to eliminate pests in a commercial environment.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):

Executive Pest Services
Red Rock Pest Control
Las Vegas Pest Control

b. Solicitation Waiver: **Not Applicable**

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

In accordance with NRS 333, the vendor was selected by an informal selection committee based on their proposal and cost.

d. Last bid date: 11/07/2019 Anticipated re-bid date: 11/01/2023

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:

August 2011 to February 2020 for Southern Nevada Adult Mental Health 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:

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:

PHILLIPS, BRETT, FACILITY MANAGER Ph: 702-486-5135

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	01/14/2020 12:09:03 PM
Division Approval	rmorse	01/14/2020 12:09:05 PM
Department Approval	mwinebar	03/03/2020 10:36:42 AM
Contract Manager Approval	cmoriart	03/03/2020 11:49:03 AM
Budget Analyst Approval	afrantz	03/10/2020 10:26:34 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: **22823**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3179-95**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DESERT BOILERS & CONTROLS INC**Contractor Name: **DESERT BOILERS & CONTROLS INC**Address: **305 W SAINT LOUIS AVE**City/State/Zip: **LAS VEGAS, NV 89102**Contact/Phone: **702/631-7780**Vendor No.: **PUR0001437**NV Business ID: **NV19971189711**To what State Fiscal Year(s) will the contract be charged? **2020**

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 **01/07/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

The boiler had a catastrophic failure resulting in a lack of hot water in the facility. Hot water is necessary for the sanitary conditions of the facility for daily food and laundry services.

3. Termination Date: **06/30/2020**Contract term: **174 days**4. Type of contract: **Contract**Contract description: **Boiler Repair**

5. Purpose of contract:

This is a new contract to rebuild the existing boiler system at the Juvenile Justice facility in Caliente.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,400.00**

Payment for services will be made at the rate of \$12,400.00 per Completion

Other basis for payment: Upon completion; includes materials, equipment, labor, freight and travel.

II. JUSTIFICATION

7. What conditions require that this work be done?

Caliente Youth Center is a secure 24-hour residential detention facility that houses youth ranging in age from 12 to 18. The facility has a boiler in the Multi-Purpose area that feeds hot water into the Kitchen Facility, Laundry Facility and Maintenance Department. Hot water is necessary for the sanitary conditions of the facility.

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

State employees are unable to provide the specialized expertise and repair parts necessary to rebuild the existing system.

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):

Nevada Chiller & Boiler
H and H Boiler Repair
Senco Boiler Service
Desert Boilers & Controls

b. Solicitation Waiver: **Not Applicable**

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

This vendor was the only one to be able to perform repairs quickly and willing to travel to Caliente.

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 provided services for the Division previously and performance 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:

Bruce Burgess, Superintendent, Caliente Youth Center Ph: 775-726-8206

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	03/09/2020 10:05:33 AM
Division Approval	knielsen	03/17/2020 10:14:33 AM
Department Approval	mwinebar	03/17/2020 10:31:10 AM
Contract Manager Approval	sknigge	03/18/2020 09:04:59 AM
Budget Analyst Approval	afrantz	03/19/2020 15:34:56 PM

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
Division of Child and Family Services
Helping people. It's who we are and what we do.



Ross Armstrong
Administrator

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office

FROM: Katrina Nielsen, Administrative Services Officer IV
Division of Child and Family Services

DATE: March 9, 2020

SUBJECT: Retroactive Contract – Desert Boilers & Controls, Inc.

A handwritten signature in cursive script, reading "Katrina Nielsen".

An emergency retroactive contract, with an effective date of January 7, 2020, is being requested between the Division of Child and Family Services (DCFS) and Desert Boilers & Controls, Inc. This contract will facilitate payment for repairs to a boiler that failed at the Caliente Youth Center (CYC) Juvenile Justice facility in Caliente, Nevada.

The CYC is a 24-hour, 7 day per week Juvenile Justice facility that houses youth offenders in the State of Nevada. It is in a rural area, making it difficult to find vendors to perform necessary services. The sole boiler for the facility experienced a catastrophic failure and was no longer functional. The boiler heats the laundry, kitchen and maintenance area's water systems, all of which impact the facility's sanitation.

Immediately after the boiler failed, staff assessed the failure and determined that repairs were possible. Staff then contacted four vendors to get a professional diagnosis and repair estimate. Two of the vendors declined to bid due to the remote location, one vendor agreed to bid contingent upon an agreement that the agency would pay a \$118 per hour rate for travel time to and from the facility in order to diagnose the system and prepare a bid, and Desert Boilers & Controls, Inc. provided an estimate at no charge.

The estimate \$12,400 boiler repair estimate covered all necessary equipment, parts and labor. Desert Boilers & Controls, Inc. was familiar with the facility through previous contracted work and has performed at or above expectations on past jobs.

This was an emergency repair due to the critical nature of this equipment, the sanitation risks for the youth houses at the facility, the potential for future damage to the property if the repair was not completed timely and the lead time necessary for parts for the repair. The Division is requesting approval of this retroactive contract for the work.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4414.

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: **22801**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	IDEAS Counseling LLC
Agency Code:	409	Contractor Name:	IDEAS Counseling LLC
Appropriation Unit:	3229-18	Address:	6200 Valley Wood Dr.
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89523-1243
If "No" please explain:	Not Applicable	Contact/Phone:	Kathryn Layosa 775-815-8751
		Vendor No.:	T32009030A
		NV Business ID:	NV20191090999

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 %

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 04/2020

Retroactive? **Yes**

If "Yes", please explain

Unique counseling services were required for a child needing intensive therapy.3. Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Counseling**

5. Purpose of contract:

This is a new contract to provide an initial client assessment, weekly individual counseling services, family therapy services and crisis intervention.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Payment for services will be made at the rate of \$100.00 per hour

Other basis for payment: 100 counseling hours per year is \$10,000 per year; four years at \$10,000 per year.

II. JUSTIFICATION

7. What conditions require that this work be done?

A contract with IDEAS Counseling, LLC, is being initiated for a child in state custody who was subjected to sexual abuse by her father as well as to family incest. The Division does not currently have access to therapy of this caliber and there is a gap in our services; this expertise can be used with other children that come into care going forward. The contract is to provide initial assessment, weekly individual counseling services, family therapy services (as determined as appropriate) and crisis intervention. Due to the nature and trauma associated with sexual abuse, various therapy providers in the Northern Nevada region were vetted by the Intensive Family Services (IFS) /Clinical Program for their experience working with sexually abused children; sexually abused children from family systems; family incest system specialty; religious preference/foundation (Latter-Day Saints); proximity to current and anticipated placement and who use trauma informed interventions. Over twenty (20) providers/agencies were contacted to assess specialty and few responded as able to meet these needs.

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 to meet the therapeutic needs of this child.

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):

Crossed Keys Counseling
Conversation and Change Center
IDEAS Counseling LLC
Alexandria Dimitroff, MA, LCPC
Michelle Sprague, MFT
Balance Therapy Center
Patricia Gilbert, MFT
Clover Counseling

b. Solicitation Waiver: **Not Applicable**

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

It was essential for the Division to identify a therapy provider who not only had knowledge and experience working with sexually abused children, but also knowledge of the Latter Day Saint's church to understand and interpret the religion and beliefs these children have built their lives around. Kati Layosa at IDEAS Counseling, LLC is a provider who meets all the therapeutic needs of this child.

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	hbugg	03/02/2020 08:54:01 AM
Division Approval	knielsen	03/02/2020 12:10:57 PM

Department Approval	mwinebar	03/05/2020 17:56:21 PM
Contract Manager Approval	mcenteej	03/11/2020 09:42:13 AM
Budget Analyst Approval	laaron	03/11/2020 14:25:16 PM



MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Admin Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Admin Services Officer IV
Division of Child and Family Services

DATE: February 21, 2020

SUBJECT: Retroactive Contract Request – CETS #22801

The Division of Child and Family Services respectfully requests a retroactive effective date of July 1, 2019 for the contract with IDEAS Counseling, LLC in order to provide intensive and specialized counseling services to a child in State custody. The Division does not currently have access to therapy of this caliber and there is a gap in our services; this expertise can be used with other children that come into care going forward. The contract is to provide initial assessment, weekly individual counseling services, family therapy services (as determined as appropriate) and crisis intervention. Due to the nature and trauma associated with sexual abuse, various therapy providers in the Northern Nevada region were vetted by the Intensive Family Services (IFS)/Clinical Program for their experience working with sexually abused children; sexually abused children from family systems; family incest system specialty; religious preference/foundation (Latter-Day Saints); proximity to current and anticipated placement and who use trauma informed interventions. Over twenty (20) providers/agencies were contacted to assess specialty and few responded as able to meet these needs.

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: **22889**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3751-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DESERT BOILERS & CONTROLS INC**Contractor Name: **DESERT BOILERS & CONTROLS INC**Address: **305 W SAINT LOUIS AVE**City/State/Zip: **LAS VEGAS, NV 89102**Contact/Phone: **Ginger Roden 702/631-7780**Vendor No.: **PUR0001437**NV Business ID: **NV19971189711**To what State Fiscal Year(s) will the contract be charged? **2020**

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 **02/11/2020**Anticipated BOE meeting date **02/2020**Retroactive? **Yes**

If "Yes", please explain

An emergency purchase was requested and approved under NAC 333.114. After the failure of 2 of 3 of the boilers, ESP was running the only remaining boiler at 100% capacity. The temperatures were only 8 degrees outside at the time and forecast to be in the single digits for the coming week. Due to the potential health and safety concerns associated with two inoperable boilers, repairs were required immediately.

3. Termination Date: **06/30/2020**Contract term: **139 days**4. Type of contract: **Contract**Contract description: **Emerg Boiler Repairs**

5. Purpose of contract:

This is a new contract to provide emergency repairs for boiler#2 and #3 at Ely State Prison.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,692.00**

Other basis for payment: B/A 3751 CAT 07 \$17,846.00 for Boiler#2 and \$17,846.00 Boiler#3.

II. JUSTIFICATION

7. What conditions require that this work be done?

An emergency situation developed with the boilers at Ely State Prison as two of the three boilers which supply the medium temperature hot water to the heating and domestic hot water loop at the facility failed, due to a blown tube, leaving only one operational boiler working at 100% capacity. With temperatures well below freezing, the facility cannot safely operate without heat or hot water, esp. this time of year.

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

No NDOC employees are trained to perform this work. No other State agency can 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):

O'Flaherty Plumbing and Heating

Desert Boilers & Controls Inc

b. Solicitation Waiver: **Not Applicable**

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

This vendor provided the lowest and most responsive bid.

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	cjackson	02/13/2020 08:58:03 AM
Division Approval	amonro1	02/14/2020 13:06:31 PM
Department Approval	amonro1	02/14/2020 13:09:31 PM
Contract Manager Approval	aroma2	02/20/2020 08:49:30 AM
Budget Analyst Approval	bmacke1	03/23/2020 08:40:39 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: **22827**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3761-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **THOMSON, JAMES F JR DBA**Contractor Name: **THOMSON, JAMES F JR DBA**Address: **AMERICAN SOUTHWEST ELECTRIC
4485 RIVIERA RIDGE AVE**City/State/Zip: **LAS VEGAS, NV 89115-1877**

Contact/Phone: Cheryl Harrison 702-643-2900

Vendor No.: T29035625

NV Business ID: NV20071096997

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

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 **01/16/2020**

Anticipated BOE meeting date 02/2020

Retroactive? **Yes**

If "Yes", please explain

Pursuant to NAC 333.114, the Purchasing Administrator has approved these repairs as emergency work. When the power failed at Florence McClure Women's Correctional Center, due to NV Energy transformer malfunction, the backup generators worked as intended. However, when the power was restored, the generators failed to power down, overloading the electrical system and creating a health and safety hazard, as door controls to inmate facilities and culinary equipment for meals became inoperable.

3. Termination Date: **06/30/2020**Contract term: **165 days**4. Type of contract: **Contract**Contract description: **Gen. Switch Repairs**

5. Purpose of contract:

This is a new contract to provide emergency generator switch repairs to the backup generators at Florence McClure Women's Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,664.00**

Other basis for payment: \$8,469.00 to provide and install a temporary ATS (automatic transfer switch) -\$26,195.00 - Replace temporary ATS with permanent ATS switch.

II. JUSTIFICATION

7. What conditions require that this work be done?

When the power failed at Florence McClure Women's Correctional Center, due to NV Energy transformer malfunction, the backup generators worked as intended. However, when the power was restored, the generators failed to power down, overloading the electrical system and creating a health and safety hazard, as door controls to inmate facilities and culinary equipment for preparing inmate meals became inoperable.

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

NDOC did not have staff to perform this work. No State agency was able to perform this 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: **Not Applicable**

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

This vendor provided the lowest and most responsive bid, as they were on-site at the time of the equipment failure performing work for an approved CIP.

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 currently performing work for an approved CIP at FMWCC. This work 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:

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	dbretche	01/29/2020 13:50:30 PM
Division Approval	amonro1	01/30/2020 09:21:06 AM
Department Approval	sewart	01/30/2020 14:53:46 PM
Contract Manager Approval	aroma2	02/07/2020 12:00:16 PM
Budget Analyst Approval	bmacke1	02/20/2020 09:47:06 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: **22859**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3763-58**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Get Local Search Marketing LLC

Contractor Name: **Get Local Search Marketing LLC**Address: **DBA 777 Satellite Star****35 N. Edison Way, Ste 38**City/State/Zip: **Reno, NV 89502-2352**

Contact/Phone: Aaron Landreth 775-453-0163

Vendor No.: T29041356

NV Business ID: NV20101886877

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

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 % Inmate Welfare Account

Agency Reference #: 440

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/11/2020**

Anticipated BOE meeting date 02/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **111 days**4. Type of contract: **Contract**Contract description: **Cable Repairs**

5. Purpose of contract:

This is a new contract to provide services to analyze and repair cable issues throughout the Northern Nevada Correction Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,700.00**

Other basis for payment: Current proposal is for \$11,854.76 without the identification of all required repairs. \$15,700. has been approved in the budget to complete all repairs for this work.

II. JUSTIFICATION

7. What conditions require that this work be done?

The satellite / cable service to NNCC has been below standard for several years. When the new satellite dish was installed in September 2018, the service to NNCC became worse (service to SCC remained about the same.) The inmates are not able to receive the full channel line-up offered, although it appears that the signal at the head-end is good. If this contract is not approved we will be subject to lawsuits by the inmates due to lack of performance on our part for keeping the cable accessible to the inmates.

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

NDOC employees are not trained to perform this work. No other State agency perform this 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: **Not Applicable**

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

This vendor provided the lowest and most responsive bid.

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	dmartine	02/11/2020 13:45:08 PM
Division Approval	amonro1	02/18/2020 09:50:30 AM
Department Approval	amonro1	02/18/2020 09:50:32 AM
Contract Manager Approval	aroma2	03/04/2020 13:47:45 PM
Budget Analyst Approval	bmacke1	03/11/2020 09:36:38 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: **22934**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **4554-24**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SMG Reno Facilities dba AMS Global**Contractor Name: **SMG Reno Facilities dba AMS Global**Address: **4590 S. Virginia Street**City/State/Zip: **Reno, NV 89502-6013**Contact/Phone: **Michael Day 775-229-7621**Vendor No.: **T27042831**NV Business ID: **NV20151521481**To what State Fiscal Year(s) will the contract be charged? **2020**

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 % Registration Fees and Sponsorships

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/04/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **117 days**4. Type of contract: **Contract**Contract description: **GOV AG Conference**

5. Purpose of contract:

This is a new contract to provide conference space and catering for the 2020 Nevada Governor's Conference on Agriculture. The focus will be on providing education and resources to Nevada farmers, ranchers, food processors and food and beverage manufactures interested in exporting their products.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,205.00**

Other basis for payment: 2/29/20 \$3687.50, 3/29/20 \$6840.50, 4/23/20 \$3153.00, possible final bill \$524.00 = \$14,205.00

II. JUSTIFICATION

7. What conditions require that this work be done?

NDA is in need of a facility that would accommodate 100+ attendees with the infrastructure requirements of breakout space for specific topics, plentiful parking, easy access to airport and hotel accommodations and catering company to work with NDA on showcasing Nevada food products.

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

The State does not have facility spaces to accommodate all requirements for this conference event.

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):

Reno Sparks Convention Center
The Row-ElDorado-Circus Circus-Silver Legacy
Atlantis Casino Resort Spa

b. Solicitation Waiver: **Not Applicable**

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

This vendor was able to supply NDA with our entire list of meeting requirements.

d. Last bid date: 01/20/2020 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	bbel1	02/27/2020 15:05:31 PM
Division Approval	bbel1	02/27/2020 15:05:34 PM
Department Approval	bbel1	02/27/2020 15:05:37 PM
Contract Manager Approval	melli2	03/03/2020 15:44:49 PM
Budget Analyst Approval	mlynn	03/04/2020 08:12:45 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: **22958**Agency Name: **GCB - GAMING CONTROL BOARD**Agency Code: **611**Appropriation Unit: **4061-30**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Kamer Zucker Abbott**Contractor Name: **Kamer Zucker Abbott**Address: **3000 West Charleston Blvd
Suite 3**City/State/Zip: **Las Vegas, NV 89102**Contact/Phone: **702-259-8640**

Vendor No.:

NV Business ID: **NV19931039663**To what State Fiscal Year(s) will the contract be charged? **2020**

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 **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **106 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide updated employment and human resources law guidance to supervisory employees at the Board.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,500.00**

Payment for services will be made at the rate of \$350.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required to develop its own plan of employment pursuant to subsection 6 of NRS 463.080. With various new changes to state employment laws and regulations, the Board is seeking outside legal advice relating to supervisor training and the peace officer rights and responsibilities afforded to the Board.

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

The Board does not have enough staff or resources to undertake this 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: **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 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	klay0	03/04/2020 11:43:57 AM
Division Approval	klay0	03/04/2020 11:44:00 AM
Department Approval	klay0	03/04/2020 11:44:03 AM
Contract Manager Approval	klay0	03/04/2020 11:44:05 AM
Budget Analyst Approval	hfield	03/16/2020 15:25:10 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: **22885**

Agency Name:	GCB - GAMING CONTROL BOARD	Legal Entity Name:	BERKELEY RESEARCH GROUP (HONG KONG) LIMITED
Agency Code:	611	Contractor Name:	BERKELEY RESEARCH GROUP (HONG KONG) LIMITED
Appropriation Unit:	4063-10	Address:	Level 20, One International Finance Centre, 1 Harbour View
Is budget authority available?:	Yes	City/State/Zip	Central, Hong Kong, HK 999077
If "No" please explain:	Not Applicable	Contact/Phone:	Stuart Witchell 85222972270
		Vendor No.:	
		NV Business ID:	NV20171124828

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 %	X	Fees	100.00 % INVESTIGATIVE 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 **02/24/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2022**Contract term: **1 year and 342 days**4. Type of contract: **Contract**Contract description: **Foreign Inv. Service**

5. Purpose of contract:

This is a new contract to provide ongoing investigative services in foreign jurisdictions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$48,000.00**

Other basis for payment: upon receipt of state-approved invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

The NCGB must conduct thorough investigations of foreign-based applicants. Difficult in performing research in large, foreign records facilities characterized by poor indices mandates use of outside contractors to perform some of this work.

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

On-site appearances at records locations or contractual relationships with data providers are required. In many cases, it is not economically feasible or gaming agents alone to physically search all available databases.

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):

b. Solicitation Waiver: **Not Applicable**

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

The selected vendor was the highest scoring proposer as determined by an evaluation committee.

d. Last bid date: 12/02/2019 Anticipated re-bid date: 06/01/2021

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 NGCB contracted with Berkeley Research Group from September 2017 through September 2019 and was satisfied with the service provided.

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	klay0	02/10/2020 12:03:10 PM
Division Approval	klay0	02/10/2020 12:03:13 PM
Department Approval	klay0	02/10/2020 12:03:16 PM
Contract Manager Approval	klay0	02/10/2020 12:03:19 PM
Budget Analyst Approval	hfield	02/24/2020 14:14:28 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: **19856** Amendment Number: **1**

Agency Name: **DPS-HIGHWAY PATROL** Legal Entity Name: **JONES WEST FORD**

Agency Code: **651** Contractor Name: **JONES WEST FORD**

Appropriation Unit: **4713-13** Address: **3600 Kietzke Lane**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89510-2970**

If "No" please explain: Not Applicable Contact/Phone: **Donald Intihar 775-829-3344**

Vendor No.: **T80272580**

NV Business ID: **NV19771001026**

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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 %
X Highway Funds	100.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/26/2018**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **04/30/2020**Contract term: **3 years and 341 days**4. Type of contract: **Contract**Contract description: **Excess Vehicle Hauls**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing excess NHP fleet vehicle hauls from locations throughout the State of Nevada. This amendment extends the termination date from April 30, 2020 to March 1, 2022 and increases the maximum amount from \$16,000 to \$31,200 due the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$16,000.00	\$16,000.00	\$16,000.00	Yes - Info
2. Amount of current amendment (#1):	\$15,200.00	\$15,200.00	\$31,200.00	Yes - Info
3. New maximum contract amount:	\$31,200.00			
and/or the termination date of the original contract has changed to:	03/01/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

Excess Vehicles, which have either met their useful life or have been damaged, need to be transported back to the major metropolitan areas from rural areas across the State.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
 There are no State employees that can move these vehicles, nor does the State have the equipment to do so.
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):
 Quality Towing
 Jones West Ford
 Fast Auto Transport
- b. Solicitation Waiver: **Not Applicable**
- c. Why was this contractor chosen in preference to other?
 Vendor was the lowest bidder.
- d. Last bid date: 02/19/2018 Anticipated re-bid date: 01/06/2020
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 is currently under contract with Nevada Highway Patrol. Services provided 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:
20. Contract Status:
 Contract Approvals:
- | Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | kdefe1 | 02/27/2020 15:34:46 PM |
| Division Approval | lgallow1 | 03/02/2020 07:52:34 AM |
| Department Approval | gmott | 03/03/2020 13:45:53 PM |
| Contract Manager Approval | gmott | 03/03/2020 13:46:01 PM |
| Budget Analyst Approval | jrodrig9 | 03/09/2020 16:01:25 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: **22913**Agency Name: **DPS-HIGHWAY PATROL**Agency Code: **651**Appropriation Unit: **4713-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **RENO FORKLIFT, dba. Reno Scales and Forklift**Contractor Name: **RENO FORKLIFT, dba. Reno Scales and Forklift**Address: **171 Coney Island Drive**City/State/Zip: **Sparks, NV 89431**Contact/Phone: **Sam Walker 7759828827**Vendor No.: **TT29041170A**NV Business ID: **NV19791006438**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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	30.00 %	Bonds	0.00 %
X Highway Funds	70.00 %	Other funding	0.00 %

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/02/2024**Contract term: **4 years and 1 day**4. Type of contract: **Contract**Contract description: **Scale Certification**

5. Purpose of contract:

This is a new contract to provide ongoing certification, repair, and calibration on semi-portable, portable and Weigh-In-Motion scales utilized by the Nevada Highway Patrol Commercial Unit.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00**

Payment for services will be made at the rate of \$93.00 per hour labor cost

Other basis for payment: Costs of parts, materials, and shipping as needed for repairs. Payment upon completion of services and receipt of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

Scales used by Nevada Highway Patrol need to be maintained, repaired, and re-calibrated for annual inspections by the Nevada Bureau of Weights and Measures.

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

There are no State employees qualified to perform 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):

Sierra Scales
Test Wave
Reno Forklift

b. Solicitation Waiver: **Not Applicable**

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

Reno Forklift was the only vendor that responded to this bid.

d. Last bid date: 11/04/2019 Anticipated re-bid date: 11/01/2023

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:

Contractor is currently under contract with Nevada Highway Patrol. Services provided 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:

Roxana Gifford, NHP Contract Manager Ph: 7756844467

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdefe1	02/18/2020 11:14:58 AM
Division Approval	jdibasil	02/18/2020 15:40:35 PM
Department Approval	cboegle	02/19/2020 16:09:14 PM
Contract Manager Approval	cboegle	02/19/2020 16:09:24 PM
Budget Analyst Approval	nkephart	02/28/2020 14:44:28 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: **22941**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: **517/336-2530**Vendor No.: **T29025797**NV Business ID: **NV20101743480**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 %

Agency Reference #: **658**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2020**Anticipated BOE meeting date **04/2020**Retroactive? **Yes**

If "Yes", please explain

Due to staffing issues at The Office of Traffic Safety, more time is needed to facilitate an RFP. The department is working with purchasing on the RFP. We anticipate that the new contract would be on the July 2020 B.O.E. agenda.3. Termination Date: **09/30/2020**Contract term: **241 days**4. Type of contract: **Contract**Contract description: **Maintain & Support**

5. Purpose of contract:

This is a new contract that continues 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: **\$48,976.00****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 maintenance

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: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 200205

Approval Date: 02/13/2020

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

This program is currently hosted, supported and maintained by the vendor.

d. Last bid date: Anticipated re-bid date: 03/16/2020

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:

Yes, with the Office of Traffic Safety since 2011. The 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:

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	02/26/2020 16:21:14 PM
Division Approval	lgallow1	02/26/2020 16:21:17 PM
Department Approval	cboegle	02/26/2020 17:30:39 PM
Contract Manager Approval	cboegle	02/26/2020 17:30:42 PM
EITS Approval	tgalluzi	03/09/2020 14:15:25 PM
Budget Analyst Approval	jrodrig9	03/09/2020 15:47:33 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#: **20020502**

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: DPS		
	Contact Name and Title	Phone Number	Email Address
	Charise Whitt, Deputy Administrator	775-684-7473	cwhitt@dps.state.nv.us

1b	Vendor Information:	
	Identify Vendor:	Agate Software, Inc.
	Contact Name:	Justin Stojich
	Complete Address:	2214 University Park Drive, Suite 102, Okemos, MI 48864
	Telephone Number:	517-336-2530
	Email Address:	jstojich@agatesoftware.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	XXX
	Professional Service Exemption:	

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

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	February 1, 2020	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	100%
	Grant Funds:	
	Other (Explain):	

Rec'd 02/11/2020

Purchasing Use Only:

Approval #:

200805 @

1g Total Estimated Value of this Service Contract, Amendment or Purchase:
\$61,762.00

2 Provide a description of work/services to be performed or commodity/good to be purchased:
The Nevada Department of Public Safety - Office of Traffic Safety Division promotes reducing crashes and fatalities on Nevada roadways, by providing federal grant funds to Nevada 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.

3 What are the unique features/qualifications required for this service or good that are not available from any other vendor:
This system has been in place since 2010 and supports all phases of the grants management cycle including application, awarding, authorization, reporting, fiscal and close outs. It was anticipated that the State RFP for Grants Management software would be able to be utilized by OTS. After reviewing the RFP, once it was released, OTS advised that State contract would not work for OTS. We then continued with the extension process for the Agate contract, to allow the Agency the time to go out for RFP. The Agate contract was approved for an eight-month extension (#299 attached) on December 19, 2019. Unfortunately, the GFO would not accept the Amendment for the January B.O.E., as it was late. The contract has since expired on 1/31/2020. We are requesting an eight month time frame for the sole source, for a retro-active contract to enable us to continue with the RFP that is expected to be released by March 9, 2020.

4 Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
This contract is to continue support and maintenance of an existing Intelligrants system. This system supports all phases of the grants management cycle including application, awarding, authorization, reporting, fiscal and close outs. Due to staffing issues at the Office of Traffic Safety, more time is needed to facilitate a contract. It is the intent to conduct a request for proposal (RFP) for future service within the eight-month extended time frame. The Department is in the beginning stages of the RFP. We will be working with Heather Moon in an effort to have the RFP released by March 9, 2020. The anticipated award date would be April 30, 2020, allowing the month of May for contract negotiations. We anticipate that the new contract would be on the July 2020 B.O.E. Agenda.

Were alternative services or commodities evaluated? Check One.

Yes:

XX

No:

a. *If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.*

5 *The State RFP was reviewed by OTS. The RFP is not specific enough to know what the actual grant management system (GMS) will look like. OTS is concerned that with only budgeting \$ 200,000 for the first year of implementation, we won't get all the functions they need.*

Purchasing Use Only:	
Approval #:	2002050

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 <u>ALL</u> previous waivers <u>MUST</u> accompany this request.				Yes:	XX	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 #)			
	2/8/2011	7/31/2015	\$574,096.00	Web-based electronic grants management system to support application, awarding, authorization, reporting, fiscal and close-out	Waiver #100213			
	2/1/2016	1/31/2020	\$281,096.00	Same as above	Same as above			
			\$					
		\$						
		\$						

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	The Office of Traffic Safety will be unable to review, approve and pay sub-recipient grant financial claims and progress reports, resulting in over thirty vendors not being paid on-time. Sub-recipients would be required to submit copies of all documents, progress reports and financial claims manually. Staff would be required to spend extra time to manually process payments, reports and manually file the documents. The historical documentation in the management system may also be unusable.

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?
	PillanTech, Mircoedge and SAP were evaluated in the original search. The RFP will offer a current review of qualified vendors.

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:	XX	No:	
	a. If yes, please provide details regarding future obligations or needs.				
	This contract is to continue support and maintenance of an existing Intelligrants system. This system supports all phases of the grants management cycle including application, awarding, authorization, reporting, fiscal and close outs.				

Purchasing Use Only:

Approval #:

200703 (C)

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.

Office of Traffic Safety

Agency Representative Initiating Request

Amy Davey

Amy Davey, Administrator, Highway Safety Coordinator, Office of Traffic Safety

2/11/2020

Date

Curtis Palmer

Curtis Palmer, ASO IV, Senior Fiscal Officer, Department of Public Safety

Curtis Palmer, ASO IV, Senior Fiscal Officer, Department of Public Safety

Print Name of Agency Head Authorizing Request

2/11/2020

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:

Kevin D. Doty

Administrator, Purchasing Division or Designee

2/13/2020

Date

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: February 26, 2020

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

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

FROM: Amy Davey, Administrator *A.D.*

RE: Retroactive Contract Request

.....

Attached is a software services contract extension between the Department of Public Safety (DPS), Office of Traffic Safety (OTS) and Agate Software, Inc. for which we are requesting retroactive approval.

Due to staffing issues at The Office of Traffic Safety, additional time is required to complete a full Request For Proposal (RFP) for service with a new contract period. The Agency has worked with EITS to complete and submit a TIN for their approval, and we are working closely with Purchasing in anticipation of releasing a full RFP by March 9, 2020. The projected award date would be April 30, 2020 and we anticipate the new contract would be on the July 2020 Board of Examiners agenda.

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

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: **22782**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4460-09**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ALARMCO INC**Contractor Name: **ALARMCO INC**Address: **2007 LAS VEGAS BLVD S**City/State/Zip: **LAS VEGAS, NV 89104-2555**Contact/Phone: **CINDY ONEILL 702/382-5000**Vendor No.: **T12898700**NV Business ID: **NV19641000258**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 % Sportsmen**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 20-41

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2019**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

A retroactive contract is requested due to the change in contract management personnel and an oversight of the installed burglar and long range radio in September 2019 at the newly acquired Las Vegas office located at 3373 Pepper Lane.3. Termination Date: **08/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Alarm and Fire**

5. Purpose of contract:

This is a new contract for ongoing services of burglar and fire alarm maintenance at the southern Nevada offices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$16,100.00**

Payment for services will be made at the rate of \$345.00 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

The contract provides security system monitoring for the Department's Las Vegas offices (2) and Laughlin office. The Laughlin office also requires fire alarm maintenance. This contract protects the security and safety of the State of Nevada, Department of Wildlife's fixed assets and property as well as state employees.

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 expertise in the area of providing, installing, maintaining and monitoring alarm or fire equipment.

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):

ADT
Alarmco, Inc.
Sting Alarm

b. Solicitation Waiver: **Not Applicable**

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

Worked with vendor previously and work was satisfactory.

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:

Kathleen Taigades, Admin. Asst. Ph: 702-668-3545

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	02/18/2020 11:24:21 AM
Division Approval	eobrien	02/21/2020 10:12:16 AM
Department Approval	eobrien	02/21/2020 10:12:20 AM
Contract Manager Approval	zalbert	03/02/2020 09:33:48 AM
Budget Analyst Approval	mlynn	03/23/2020 15:13:57 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: **22685**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4460-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CAD INC DBA**Contractor Name: **CAD INC DBA**Address: **CAD PEST CONTROL SERVICES
3545 AIRWAY DRIVE**City/State/Zip: **RENO, NV 89511**Contact/Phone: **775-853-1672**Vendor No.: **T27040407A**NV Business ID: **NV19581000106**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 **75.00 % Sportsmen****X** Federal Funds **25.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 20-34

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/23/2020**

Anticipated BOE meeting date 05/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 100 days**4. Type of contract: **Contract**Contract description: **Pest Control**

5. Purpose of contract:

This is a new contract to provide ongoing pest control services at the northern Nevada offices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$18,455.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Insect and rodent infestations

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

State employees are not able to do this work because it is specialized and do not have the skills.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):

**CAD Pest Control
Reno Sierra Pest Control
G&R Pest Control**b. Solicitation Waiver: **Not Applicable**

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

Lowest bidder and best value

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:

Nick Collins , Construction Project Coordinator Ph: 775-688-1581

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	01/24/2020 11:28:02 AM
Division Approval	eobrien	02/22/2020 14:50:37 PM
Department Approval	eobrien	02/22/2020 14:53:15 PM
Contract Manager Approval	zalbert	03/10/2020 16:07:19 PM
Budget Analyst Approval	mlynn	03/23/2020 16:56:12 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: **22805**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4460-95**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Henderson Pest Control, LLC

Contractor Name: **Henderson Pest Control, LLC**Address: **817 Sun Bridge Lane**City/State/Zip: **Henderson , NV 89002**

Contact/Phone: Jason Kibby 702-755-2280

Vendor No.:

NV Business ID: NV20171806677

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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 **33.00 %** **X** Fees **34.00 % Sportsmen****X** Federal Funds **33.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 20-42

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/20/2020**

Anticipated BOE meeting date 03/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **4 years and 131 days**4. Type of contract: **Contract**Contract description: **Pest Control LV & LM**

5. Purpose of contract:

This is a new contract to provide ongoing pest control services at the Lake Mead Hatchery and the southern offices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,725.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

There is an insect and rodent infestation.

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

This is specialized work state employees are not skilled to perform.

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):

Henderson Pest Control
Dr. Death Pest Control
Stefani's Pest Controlb. Solicitation Waiver: **Not Applicable**

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

Lowest cost

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:

Nick Collins, Construction Monitor Ph: 775-688-1583

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	01/24/2020 11:30:35 AM
Division Approval	eobrien	01/30/2020 16:04:09 PM
Department Approval	eobrien	01/30/2020 16:04:12 PM
Contract Manager Approval	zalbert	01/31/2020 08:03:11 AM
Budget Analyst Approval	mlynn	02/20/2020 15:35:12 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: **22727**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: **WESTERN CAROLINA UNIVERSITY**Contractor Name: **WESTERN CAROLINA UNIVERSITY**Address: **1 UNIVERSITY WAY**City/State/Zip: **CULLOWHEE, NC 28723**Contact/Phone: **828/227-3174**Vendor No.: **T32005044**NV Business ID: **government entity**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 %	X	Fees	100.00 % HABITAT CONSERVATION AND UPLAND GAME STAMP
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Federal Funds	0.00 %	Bonds	0.00 %
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Highway Funds	0.00 %	Other funding	0.00 %
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Agency Reference #: **20-37**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/26/2020**Anticipated BOE meeting date **03/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2021**Contract term: **1 year and 309 days**4. Type of contract: **Interlocal Agreement**Contract description: **Great Basin Riparian**

5. Purpose of contract:

This is a new intralocal agreement to provide project management, data analyses and manuscript preparation services for the development of strategic multi-scale framework for assessing resource values and threats to Great Basin riparian and meadow ecosystems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This work is crucial to NDOW efforts in restoration and enhancement of critical habitat for wildlife across the State. The tools developed through this work will assist NDOW habitat management primarily with post-wildfire restoration and rehabilitation activities.

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

NDOW staff do not have the expertise or capacity to conduct this research and tool development.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?

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:

Jasmine Kleiber , Wildlife Staff Specialist Ph: 775-688-1581

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	01/06/2020 08:42:05 AM
Division Approval	eobrien	01/28/2020 14:04:14 PM
Department Approval	eobrien	01/28/2020 14:04:17 PM
Contract Manager Approval	zalbert	02/26/2020 14:32:34 PM
Budget Analyst Approval	mlynn	02/26/2020 14:42:09 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: **22946**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Anthony Spatucci DBA Day Go Adventures
 Contractor Name: **Anthony Spatucci DBA Day Go Adventures**
 Address: **PO Box 2014**
 City/State/Zip: **Stateline, NV 89449**
 Contact/Phone: Anthony Spatucci 775-450-4757
 Vendor No.:
 NV Business ID: NV20151204949

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 %
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 **03/13/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2020**Contract term: **232 days**4. Type of contract: **Contract**Contract description: **Water sports rentals**

5. Purpose of contract:

This is a new revenue contract to provide kayaks for rent and guided tours at the Cave Rock location of Lake Tahoe Nevada State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The vendor requested to rent kayaks at Cave Rock.

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

NA

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?

Non competitive

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 was under contract with Cave Rock last year with satisfactory compliance.

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:

Allen Wooldrige, Park Supervisor Ph: 775-831-0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	02/27/2020 13:36:49 PM
Division Approval	sdecrona	02/27/2020 13:36:52 PM
Department Approval	sdecrona	02/27/2020 13:36:54 PM
Contract Manager Approval	sdecrona	02/27/2020 13:36:56 PM
Budget Analyst Approval	mtum1	03/13/2020 18:51:04 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: **22788**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GIEBITZ, RICHARD H DBA LAHONTAN PEAK TOWERS LLC**Contractor Name: **GIEBITZ, RICHARD H DBA LAHONTAN PEAK TOWERS LLC**Address: **LAHONTAN PEAK TOWER, LLC
4182 MAGNOLIA RD**City/State/Zip: **FALLON, NV 89406-7884**Contact/Phone: **RICHARD GIEBITZ 775/867-5596**Vendor No.: **T29003673**NV Business ID: **NV20051684271**To what State Fiscal Year(s) will the contract be charged? **2020-2025**

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 **01/01/2020**Anticipated BOE meeting date **04/2020**Retroactive? **Yes**

If "Yes", please explain

This is being completed retroactively because NDSP and State Lands were involved in the renewal of the previous agreement and the type of conveyance was in question. The land the tower is located on actually belongs to the Bureau of Reclamation so it was determined State Lands did not need to be involved in the contract process.

3. Termination Date: **12/31/2024**Contract term: **5 years and 1 day**4. Type of contract: **Other (include description): operating lease**Contract description: **Communication Tower**

5. Purpose of contract:

This is a new lease agreement to operated and maintain a radio repeater at the Lahontan Peak Tower radio site. This service is required to operate and maintain the radio repeater to improve communication service and reduce interference for radio transmission among State Park personnel and Lahontan State Recreation Area.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,000.00**

Payment for services will be made at the rate of \$350.00 per month

Other basis for payment: paid upon invoice, quarterly

II. JUSTIFICATION

7. What conditions require that this work be done?

To provide better communication at LSRA.

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

State Parks doesn't have a communications tower.

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):

Crown Castle Tower

American Tower

b. Solicitation Waiver: **Not Applicable**

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

The only bidder.

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:

They have been a vendor for the past 10 years with satisfactory outcome with Lahontan State Recreation Area.

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:

Josh Rhein, LE & Training Specialist Ph: 775-684-2774

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	01/13/2020 08:14:29 AM
Division Approval	sdecrona	01/13/2020 08:14:32 AM
Department Approval	sdecrona	01/13/2020 08:14:35 AM
Contract Manager Approval	sdecrona	02/21/2020 09:06:27 AM
Budget Analyst Approval	nhovden	03/17/2020 13:36:12 PM

STEVE SISOLAK
Governor

BRADLEY CROWELL
Director

Department of Conservation and
Natural Resources

ROBERT MERGELL
Administrator

STATE OF NEVADA



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DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF STATE PARKS

February 6, 2020

MEMORANDUM

TO: Mathew Tuma, Executive Branch Budget Officer
Governor's Finance Office

FROM: Jennifer Idema, Administrative Service Officer,
Shirley DeCrona, Management Analyst
Division of State Parks

SUBJECT: Retroactive Lease Agreement for CETS# 22788 for Lease of Lahontan
Peak Tower at Lahontan State Recreation Area

The Nevada Division of State Parks (NDSP) respectfully requests approval for the retroactive lease agreement between the NDSP and Lahontan Peak Towers for Lahontan State Recreation Area. The retroactive date is January 1, 2020.

This service is required to operate radio communication via the radio repeater and reduce interference for radio transmission among State Parks personnel at Lahontan Recreation Area. The cost is \$350 a month for a 5 year lease agreement for a not to exceed \$21,000.

This is being completed retroactively because NDSP and State Lands were involved in the renewal of the previous agreement and the type of conveyance was in question. The land the tower is located on actually belongs to the Bureau of Reclamation so it was determined State Lands did not need to be involved in the contract process. After more research it was determined a lease agreement was the proper form to use instead of the agreement that was done in prior years.

The companies American Tower and Crown Castle Tower were contacted and did not submit a bid. This will be paid out of 416204.

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: **22901**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4605-17**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Las Vegas Septic Services, LLC

Contractor Name: **Las Vegas Septic Services, LLC**Address: **4225 Leon Avenue**City/State/Zip: **Las Vegas , NV 89130**

Contact/Phone: William Haygood 702-600-9495

Vendor No.:

NV Business ID: NV20161590557

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 %	X	Fees	100.00 % Utility Surcharge
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 **03/10/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2023**Contract term: **2 years and 355 days**4. Type of contract: **Contract**Contract description: **Septic Pumping**

5. Purpose of contract:

This is a new contract to provide septic pumping services at Spring Mountain Ranch State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Other basis for payment: Not to exceed \$15,000 per fiscal year

II. JUSTIFICATION

7. What conditions require that this work be done?

The septic tanks require regular maintenance and waste removal.

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

No equipment and 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):

Las Vegas Septic Services
H2O Environmental
Joes Sanitation
b. Solicitation Waiver: **Not Applicable**

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

Lowest qualified bidder.

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:

Jonathan Brunjes, Regional Manager Ph: 702-486-5125

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	02/13/2020 12:13:22 PM
Division Approval	sdecrona	02/13/2020 12:13:25 PM
Department Approval	sdecrona	02/13/2020 12:13:26 PM
Contract Manager Approval	sdecrona	02/13/2020 12:13:29 PM
Budget Analyst Approval	mtum1	03/10/2020 17:27:50 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: **22702**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4605-20**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Marshall's Septic Care, LLC

Contractor Name: **Marshall's Septic Care, LLC**Address: **PO Box 403**City/State/Zip: **Fallon , NV 89406**

Contact/Phone: Chad Marshall 775-428-1208

Vendor No.:

NV Business ID: NV20131068662

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 %	X	Fees	100.00 % Utility Surcharge
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 **02/21/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2021**Contract term: **1 year and 314 days**4. Type of contract: **Contract**Contract description: **Septic pumping**

5. Purpose of contract:

This is a new contract to provide septic pumping services at Dayton and Washoe Lake State Parks.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$46,400.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The toilets and septic tanks require pumping and maintenance.

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

The Division does not have the equipment or 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):

Waters Vacuum Truck
Bonanza
Shamrockb. Solicitation Waiver: **Not Applicable**

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

Lowest qualified bidder.

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:

They have been under contract with Western Region Parks since 2016 with satisfactory compliance.

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:

Scott Payne, Facility Manager Ph: 775-867-4429

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	12/18/2019 15:15:19 PM
Division Approval	sdecrona	12/18/2019 15:15:23 PM
Department Approval	sdecrona	12/18/2019 15:15:26 PM
Contract Manager Approval	sdecrona	02/06/2020 10:37:15 AM
Budget Analyst Approval	mtum1	02/21/2020 12:40:16 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: **17422**Amendment Number: **3**Agency Name: **DCNR - DIVISION OF WATER RESOURCES**Legal Entity Name: **BOARD OF REGENTS -NSHE ON BEHALF DRI**Agency Code: **705**Contractor Name: **BOARD OF REGENTS -NSHE ON BEHALF DRI**Appropriation Unit: **4503 - All Categories**Address: **DRI CONTROLLERS OFFICE**Is budget authority available?: **Yes****2215 RAGGIO PKWY**City/State/Zip: **RENO, NV 89512-1095**

If "No" please explain: Not Applicable

Contact/Phone: **DIANE SAMUEL, DIRECTOR OF SPONSORED PROJECTS 702-862-5593**Vendor No.: **D35000802**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2016-2021**

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 % BASIN FUNDS

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/12/2016**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **02/28/2021**Contract term: **4 years and 323 days**4. Type of contract: **Interlocal Agreement**Contract description: **DRI Humboldt Study**

5. Purpose of contract:

This is the third amendment to the original interlocal agreement which provides for the development of a groundwater flow model for the Upper Humboldt Basin to simulate withdrawal-included change in inflow to or outflow from the near-surface aquifer. This amendment increases the maximum amount from \$396,487 to \$434,551 and amends the scope of work for additional capture map simulations for 1- and 5-year periods; high performance computing to evaluate the impacts of the parameter uncertainty on predicted capture fractions and ensure consistency in modeling strategies across all Humboldt River models.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$396,487.00	\$396,487.00	\$396,487.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#3):	\$38,064.00	\$38,064.00	\$38,064.00	Yes - Info
3. New maximum contract amount:	\$434,551.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Groundwater pumping by junior water right holders may be conflicting with the rights of senior surface water right holders. This model will determine the extent of any conflict that may exist and is needed for future water management in the Humboldt River Basin.

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

These studies require a very high level of expertise and resources that the State does not have.

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?

This vendor was chosen because it recently completed a model in this area and that model will be revised to better simulate the shallow aquifer system and its interactions with the Humboldt River. Because they have already completed much of the foundational work, the Division will save money on the cost of the program. 45.2% indirect cost rate.

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

45.2%

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 Division of Water Resources had a contract with the Desert Research Institute from June 12, 2015 through November 30, 2015, and the service was 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	bre00	03/09/2020 10:32:41 AM
Division Approval	bre00	03/09/2020 10:32:45 AM
Department Approval	kwilliam	03/10/2020 17:25:51 PM
Contract Manager Approval	bre00	03/12/2020 10:52:45 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: **22980**Agency Name: **DCNR - DIVISION OF WATER RESOURCES**Agency Code: **705**Appropriation Unit: **4503 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-DESERT RESEARCH INSTITUTE**Contractor Name: **BOARD OF REGENTS-DESERT RESEARCH INSTITUTE**Address: **DRI CONTROLLERS OFFICE
2215 RAGGIO PKWY**City/State/Zip: **RENO, NV 89512-1095**Contact/Phone: **YVONNE RUMBAUGH, BUSINESS MANAGER 775/673-7366**Vendor No.: **D35000802**NV Business ID: **GOVERNMENT ENTITY**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 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % BASIN FUNDS

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/19/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2021**Contract term: **346 days**4. Type of contract: **Interlocal Agreement**Contract description: **Lower Humboldt Basin**

5. Purpose of contract:

This is a new interlocal agreement to complete capture maps and uncertainty analysis for the Lower Humboldt River basin. The maps will be developed from numerical groundwater model that quantifies potential streamflow capture caused by groundwater pumping.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,936.00**

Other basis for payment: Quarterly, Time and Material

II. JUSTIFICATION

7. What conditions require that this work be done?

Groundwater pumping by junior water right holders may be conflicting with the rights of senior water right holders. This model will determine the extent of any conflict that may exist and is needed for future water management in the Humboldt River Basin.

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

These studies and analysis require a high level of expertise and resources that the State does not have.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:

The Division has executed many agreements with the Desert Research Institute that have resulted in many products widely used by government agencies and the public. The results 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 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:

Adam Sulliver, Deputy Administrator Ph: 775-684-2867

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bre00	03/06/2020 15:48:43 PM
Division Approval	bre00	03/06/2020 15:48:47 PM
Department Approval	kwilliam	03/10/2020 17:22:32 PM
Contract Manager Approval	bre00	03/12/2020 10:52:02 AM
Budget Analyst Approval	nhovden	03/19/2020 16:15:29 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: **22959**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-30**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Carson Nugget, Inc.**Contractor Name: **Carson Nugget, Inc.**Address: **507 N. Carson St.**City/State/Zip: **Carson City, NV 89701**Contact/Phone: **Trish Trenoweth 775-882-1626**Vendor No.: **T11155500**NV Business ID: **NV19631001581**To what State Fiscal Year(s) will the contract be charged? **2020**

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 #: **NDF020-003**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/16/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/21/2020**Contract term: **5 days**4. Type of contract: **Contract**Contract description: **Staff Lodging**

5. Purpose of contract:

This is a new contract to provide hotel lodging for out-of-area division employees attending the annual pre-fire season All Hands Meeting March 16-20, 2020.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,437.60**

Other basis for payment: \$55.99 per room, per night

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Forestry will be conducting its pre-fire season All Hands Meeting March 16-20, 2020 in Carson City with employees from around the state attending. Solicitation efforts returned a room rate of \$55.99 per room, per night resulting in realized savings by paying the hotel directly versus reimbursing employees based on the approved GSA rate of \$96 plus tax and fees for lodging in Carson City.

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

Neither state employees or state agencies 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):

Carson Nugget, Inc.
Wyndham Hotel
Gold Dust West

b. Solicitation Waiver: **Not Applicable**

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

The Carson Nugget, Inc. provided the lowest bid.

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:

Rangel, Daniel, Training Coordinator Ph: 775-849-2500 ext 238

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgree6	03/09/2020 09:57:52 AM
Division Approval	dprather	03/10/2020 10:34:50 AM
Department Approval	dprather	03/10/2020 10:35:17 AM
Contract Manager Approval	jcoope8	03/11/2020 15:07:09 PM
Budget Analyst Approval	mtum1	03/12/2020 11:14:55 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: **22868**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B002 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Aaron Tveter Ltd.

Contractor Name: **Aaron Tveter Ltd.**Address: **3041 W Horizon Ridge Pkwy #170**City/State/Zip: **Henderson, NV 89052**

Contact/Phone: Aaron Tveter Ltd. 7026487900

Vendor No.:

NV Business ID: NV20071566754

To what State Fiscal Year(s) will the contract be charged? **2020-2025**

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 % APPLICATION AND LICENSURE
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 **01/01/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **Yes**

If "Yes", please explain

In order to comply with the requirement to have contracts in place for all services. The Board is requesting a retroactive approval based on when services have been provided.

3. Termination Date: **12/31/2024**Contract term: **5 years and 1 day**4. Type of contract: **Contract**Contract description: **Financial Services**

5. Purpose of contract:

This is a new contract to provide financial services to the Nevada State Board of Architecture.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$42,000.00**

Payment for services will be made at the rate of \$700.00 per MONTH

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required to maintain financial records of its operations. The Board is requesting approval of the contractor in order to provide the services needed.

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

The Board has limited staff resources and is seeking the expertise of a Certified Public Accountant to provide the financial 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?

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	vwind1	02/04/2020 16:47:37 PM
Division Approval	vwind1	02/04/2020 16:47:41 PM
Department Approval	vwind1	02/04/2020 16:47:45 PM
Contract Manager Approval	vwind1	02/04/2020 16:47:50 PM
Budget Analyst Approval	hfield	02/27/2020 15:52:43 PM

Nevada State Board of Architecture, Interior Design and Residential Design

Memorandum

Date: February 5, 2020
To: Susan Brown, Clerk of the Board of Examiners
From: Monica Harrison, Executive Director
RE: Request for Approval of Retroactive Date of July 1, 2019

RECEIVED

FEB 18 2020

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

The Nevada State Board of Architecture, Interior Design and Residential Design (NSBAIDRD) respectfully request approval for the retroactive contract between the NSBAIDRD and Aaron Tveter, CPA, so that Mr. Tveter can continue to provide ongoing financial services to our agency.

NSBAIDRD is requesting a retroactive effective date of July 1, 2019 as we would like to fully comply with the state contracting requirements. Furthermore, Mr. Tveter has been providing financial services for our agency for almost 30 years. Under Mr. Tveter's new contract, monthly fees were reduced by \$300 a month.

Thank you for your consideration in this matter.

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: **22967**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B006 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JILL I. GREINER**Contractor Name: **JILL I. GREINER**Address: **2915 SAGITTARIUS DRIVE**City/State/Zip: **RENO, NV 89509**Contact/Phone: **Jill I. Greiner 775-742-2814**Vendor No.: **T29010968A**NV Business ID: **NV20191614044**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 %	X	Fees	100.00 % LICENSING
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 **04/14/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/13/2022**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Admin Law Judge**

5. Purpose of contract:

This is a new contract to provide a hearing officer to resolve contested matters involving the Board of Cosmetology pursuant to NRS 644A and NAC 644A.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

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 board requires a contractor with administrative law judge experience to hear contested matters.

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

The board currently has a backlog of cases that require timely resolution. This contract will help expedite those decisions without overburdening the Hearings Division. An administrative law judge possesses specialized professional credentials.

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):

**Jill I. Greiner
James A. Kohl
Carolyn A. Worrell**

b. Solicitation Waiver: **Not Applicable**

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

Prior experience and knowledge of subject matter, experience with cases of similar nature. The other vendors declined.

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 State Contractors Board, 12-10-2019. The quality of service provided to the Contractors Board 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 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	89104	03/05/2020 11:10:21 AM
Division Approval	89104	03/05/2020 11:10:24 AM
Department Approval	89104	03/05/2020 11:10:26 AM
Contract Manager Approval	89104	03/05/2020 11:10:28 AM
Budget Analyst Approval	hfield	03/09/2020 09:43:40 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: **22951**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B015 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CASEY NEILON INC**Contractor Name: **CASEY NEILON INC**Address: **503 N DIVISION ST**City/State/Zip: **CARSON CITY, NV 89703-4104**Contact/Phone: **Nicola Neilon, CPA, CGMA 775/283-5555**Vendor No.: **T29010569**NV Business ID: **NV20061293367**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 %	X	Fees	100.00 % LICENSING
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 **03/10/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **296 days**4. Type of contract: **Contract**Contract description: **Casey Neilon**

5. Purpose of contract:

This is a new contract to provide an independent financial audit.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$17,000.00**

Payment for services will be made at the rate of \$17,000.00 per audit

Other basis for payment: Invoiced at completion of Audit

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required by the Legislature to have an independent financial audit on a yearly basis.

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

The audit is required to be independent in nature, therefore it must not be performed by employees of the Board or other State agencies.

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):

Eide Bailly LLP
J.A. Solari and Partners, LLC
Piercy Bowler Taylor & Kern
Barnard Vogler & Co

b. Solicitation Waiver: **Not Applicable**

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

Price and recommendations

d. Last bid date: 02/11/2020 Anticipated re-bid date: 10/12/2020

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?

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	5522	02/28/2020 13:21:22 PM
Division Approval	5522	02/28/2020 13:21:24 PM
Department Approval	5522	02/28/2020 13:21:27 PM
Contract Manager Approval	5522	02/28/2020 13:21:29 PM
Budget Analyst Approval	hfield	03/10/2020 12:18:14 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: **22935**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B015 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **TRUCKEE MEADOWS OFFICE CLEANING, INC.**Contractor Name: **TRUCKEE MEADOWS OFFICE CLEANING, INC.**Address: **P.O. Box 3358**City/State/Zip: **Reno, NV 89505-3358**Contact/Phone: **David E. Jackson 775-324-1044**

Vendor No.:

NV Business ID: **NV20011441061**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 %	X	Fees	100.00 % LICENSING
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 **03/10/2020**Anticipated BOE meeting date **04/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **296 days**4. Type of contract: **Contract**Contract description: **TMOG**

5. Purpose of contract:

This is a new contract to provide janitorial services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,728.00**

Payment for services will be made at the rate of \$1,144.00 per month

Other basis for payment: Supplies billed in addition to monthly amount

II. JUSTIFICATION

7. What conditions require that this work be done?

Weekly janitorial services are required for the building where the Board conducts business in Reno.

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

Current employees lack the skill and training to properly clean and maintain the interior of the building.

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):

**Truckee Meadows Office Cleaning
Xtraclean Janitorial Services
Labeeg Building Services**
b. Solicitation Waiver: **Not Applicable**

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

Price

d. Last bid date: 01/17/2020 Anticipated re-bid date: 10/01/2020

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?

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	5522	02/24/2020 16:29:20 PM
Division Approval	5522	02/24/2020 16:29:23 PM
Department Approval	5522	02/24/2020 16:29:26 PM
Contract Manager Approval	5522	02/24/2020 16:29:28 PM
Budget Analyst Approval	hfield	03/10/2020 08:43:13 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: **22681**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Kathleen Laxalt
Agency Code:	BDC	Contractor Name:	Kathleen Laxalt
Appropriation Unit:	B028 - All Categories	Address:	P.O. Box 19058
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89511
If "No" please explain:	Not Applicable	Contact/Phone:	Kathleen Laxalt 775-762-1864
		Vendor No.:	
		NV Business ID:	NV20101366023

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 %	X	Fees	100.00 % LICENSING
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 **02/26/2020**

Anticipated BOE meeting date 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/01/2022**Contract term: **1 year and 341 days**4. Type of contract: **Contract**Contract description: **Legislative Services**

5. Purpose of contract:

This is a new contract to provide ongoing government affairs and lobbyist services for the Veterinary Medical Examiners through the 2021 legislative session.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$36,000.00**

Payment for services will be made at the rate of \$1,000.00 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board requires expertise, advice, and services regarding representation before and dealing with individual legislators, legislative committees, and other legislative related matters.

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

The Board consists of two employees, and neither of the employees have the expertise, knowledge, or skills to perform this function.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):

Michael Hillerby
Kathleen Laxalt
Keith Lee

b. Solicitation Waiver: **Not Applicable**

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

Availability and expertise.

d. Last bid date: 12/05/2019 Anticipated re-bid date: 12/15/2022

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 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)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jstrand1	12/17/2019 10:08:15 AM
Division Approval	jstrand1	12/17/2019 10:08:18 AM
Department Approval	jstrand1	02/21/2020 08:57:59 AM
Contract Manager Approval	jstrand1	02/21/2020 08:58:02 AM
Budget Analyst Approval	hfield	02/26/2020 13:26:49 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: **22915**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Platt Law Group
Agency Code:	BDC	Contractor Name:	Platt Law Group
Appropriation Unit:	B032 - All Categories	Address:	11025 Bondshire Drive
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89511
If "No" please explain:	Not Applicable	Contact/Phone:	Colleen Platt, Esq. 775-848-2810
		Vendor No.:	
		NV Business ID:	NV20151428689

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 % Agency Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/26/2020**

Anticipated BOE meeting date 03/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **1 year and 216 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide ongoing legal services to the State Board of Examiners for Alcohol, Drug, and Gambling Counselors.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Payment for services will be made at the rate of \$100.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board periodically finds it necessary to engage an Independent Contractor for the purpose of accomplishing work of the Board under statutory authority. NRS 333.700 authorizes hiring of independent legal counsel.

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

There is no legal expertise within the Board. Legal services provided by the contractor pertain to a specific area of knowledge. There is also a need for continuity 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 Applicableb. 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?

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:
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	jstrand1	02/19/2020 09:50:43 AM
Division Approval	jstrand1	02/19/2020 09:50:45 AM
Department Approval	jstrand1	02/19/2020 09:50:48 AM
Contract Manager Approval	jstrand1	02/19/2020 09:50:51 AM
Budget Analyst Approval	hfield	02/26/2020 17:01:21 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: **22916**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Thentia Global Systems US inc.
Agency Code:	BDC	Contractor Name:	Thentia Global Systems US inc.
Appropriation Unit:	B032 - All Categories	Address:	8 The Green Suite A
Is budget authority available?:	Yes	City/State/Zip	Dover, CT 19907
If "No" please explain:	Not Applicable	Contact/Phone:	647-361-5710
		Vendor No.:	
		NV Business ID:	NV20191571257

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 % Agency Funds

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 04/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **2 years and 296 days**4. Type of contract: **Contract**Contract description: **Licensing Software**

5. Purpose of contract:

This is a new contract to provide licensing software to the State Board of Examiners for Alcohol, Drug, and Gambling Counselors.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Payment for services will be made at the rate of \$0.65 per licensee per month

II. JUSTIFICATION

7. What conditions require that this work be done?

The need for licensing data base and to allow licensees ability to renew on line.

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 ability to build and maintain advanced licensing software.

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):

**Thentia
Certemy
GL Solutions**b. Solicitation Waiver: **Not Applicable**

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

This vendor was chosen due to its cost effectiveness and the quality of the product offered.

d. Last bid date: 12/05/2019 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:

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	jstrand1	02/19/2020 09:53:45 AM
Division Approval	jstrand1	02/19/2020 09:53:49 AM
Department Approval	jstrand1	02/19/2020 09:53:53 AM
Contract Manager Approval	jstrand1	03/10/2020 10:29:28 AM
Budget Analyst Approval	hfield	03/10/2020 14:02:56 PM