May 14, 2020 3:30 PM

Pursuant to Emergency Directive 006, section 1, there will be no physical location for this meeting.

Conference Call Line: 775-687-0999 or 702-486-5260
Please call 775-684-0222 for collaboration code
PUBLIC MEETING NOTICE AND AGENDA

Date and Time: May 14, 2020, 3:30 PM

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 3:30 pm.

https://www.youtube.com/channel/UCF8zpKli9VhMDNVg_GsEYuQ/live

Conference Call Line 775-687-0999 or 702-486-5260
Please call 775-684-0222 for collaboration code

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. Request for a Recommendation, pursuant to NRS 353.288(6), to the Interim Finance Committee to Transfer Funds from the Account to Stabilize the Operation of State Government to the General Fund (For possible action)

4. Approval of Proposed Leases (for possible action)

5. 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.)
6. 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
Date: May 10, 2020
To: Board of Examiners
From: Susan Brown, Director
Governor’s Finance Office
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

Agenda Item Write-up:

Pursuant to NRS 353.288 (6), the Governor’s Finance Office requests the Board’s recommendation to the Interim Finance Committee to transfer funds from the Account to Stabilize the Operation of State Government to the General Fund due to the State’s current fiscal situation related to the COVID-19 pandemic.

Additional Information:

The COVID-19 pandemic has disrupted commerce and will negatively impact the amount of revenue that is received by the State of Nevada and its school districts. The Governor has declared a fiscal emergency, and it is anticipated that the Interim Finance Committee will declare a fiscal emergency at its May 13, 2020 meeting. There is estimated to be a shortfall of State General Fund revenue for both fiscal years 2020 and 2021. It is necessary to utilize the resources available in the stabilization account to partially offset the projected revenue shortfall.

Statutory Authority:
BOE approval required pursuant to NRS 353.288.
<table>
<thead>
<tr>
<th>BOE #</th>
<th>LESSEE</th>
<th>LESSOR</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Department of Employment, Training and Rehabilitation</td>
<td>North Carson Street, LLC</td>
<td>$97,944</td>
</tr>
<tr>
<td></td>
<td>This lease is house additional employees related to COVID-19.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Term of Lease: 05/18/2020 - 05/17/2021</td>
<td>Located in</td>
<td></td>
</tr>
</tbody>
</table>
**STATEWIDE LEASE INFORMATION**

1. **Agency:**
   
   Department of Employment, Training and Rehabilitation  
   500 East Third Street  
   Carson City, Nevada 89713  
   Brandon Taylor  
   T: 775.684.3901  E: betaylor@detr.nv.gov

2. **Name of Lessor:**
   
   North Carson Street, LLC

3. **Address of Lessor:**
   
   c/o John Uhart Commercial Real Estate Services  
   301 West Washington Street, Suite 1  
   Carson City, Nevada 89703

4. **Property contact:**
   
   John Uhart  
   T: 775.684.1896  F: 775.684.4896  E: jfuhart@ccim.net

5. **Address of Lease property:**
   
   1923 North Carson Street, Suites 102 and 104  
   Carson City, Nevada 89701

   a. **Square Footage:**
      
      ☐ Rentable  ☐ Usable  5,830

   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 | Actual cost per square foot |
      |----------------|--------------------------|---------------|------------|-------------------------------|-------------------------------|---------------------------|
      | $ 8,162.00     | 12                       | $97,944.00    | May 18, 2020 - May 17, 2021 | $0.00                        | $0.00                        | $1.40                     |

   c. **Total Lease Consideration:**
      
      12  $ 97,944.00

   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:**
      
      One (1) Year

   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:**
      
      4772

6. **This lease constitutes:**

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

   a. **Estimated Expenses:**
      
      Moving: $0.00  Furnishings: $0.00  Data/Phones: $0.00
STATEWIDE LEASE INFORMATION

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

Yes____ No _____ Dec Unit ________________

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

Authorized Agency Signature 5/7/20

For Public Works Information:

7. State of Nevada Business License Information:

   a. Nevada Business ID Number: NV20041274649
   b. The Contractor is registered with the Nevada Secretary of State's Office as a: LLC ☐ INC ☐ CORP ☐ LIP ☐
   c. Is the Contractor Exempt from obtaining a Business License: ☐ YES ☐ NO
      *If yes, please explain in exceptions section.
   d. Is the Contractor's Name the same as the Legal Entity Name? ☐ YES ☐ NO
      *If no, please explain in exceptions section
   e. Does the Contractor have a current Nevada State Business License (SBL)? ☐ YES ☐ 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? ☐ YES ☐ NO
   g. State of Nevada Vendor number: T27010077
   h. Is this an Arms Length Transaction ☐ YES ☐ 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 ☐ YES ☐ NO
   b. I/we have considered other state leased or owned space available for use by this agency ☐ YES ☐ NO

Authorized Signature 5/7/20

Public Works Division

For Board of Examiners ☐ YES ☐ NO