

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

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: June 14, 2022, 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

This meeting may be viewed on YouTube.
The link will not go live until 10:00 am.

<https://www.youtube.com/watch?v=BqKDNq9ilwY>

Phone Conference Line: 775-321-6111 or 702-329-3435
Phone Conference ID: 329 254 239#

AGENDA

- 1. Call to Order / Roll Call**
- 2. Public Comment** The first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on the agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 329 254 239#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.
- 3. Approval of the May 10, 2022 Meeting 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:
Department of Public Safety – Nevada Highway Patrol Division	2	\$126,337
Total	2	\$126,337

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

A. 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 Lleta Brown to provide technical assistance to registered apprenticeship programs for the Department of Business and Industry through Master Service Agreement #23928 with HAT Limited Partnership, dba Manpower.

B. 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 William Steves to act as an audit subject matter expert for the requirement gathering and request for proposal phase of Project MYNT for the Department of Taxation through Master Service Agreement #23928 with HAT Limited Partnership, dba Manpower.

C. 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 Michelle Dobbs to assist with fiscal operations and to provide back-up as a Finance Section Chief during State Emergency Operations Center activations for the Division of Emergency Management through Master Service Agreement #23927 with Marathon Staffing Group, Inc.

D. 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 Christian LaPrairie to perform training on body worn cameras and equipment for various agencies through Axon Enterprise, Inc.

E. 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 David Wooldridge to work as a Project Manager for the Multi Application Geographic Information Center project for the Nevada Department of Transportation through Master Service Agreement #21167 with Guidesoft, Inc. dba Knowledge Services.

F. Department of Transportation

Pursuant to NRS 333.705, subsection 1, the Nevada Department of Transportation requests authority to contract with former employee Dave Schwartz to provide contract administration services on contract 3907, I-80 Button Point highway project, in Humboldt County.

6. 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 Conservation & Natural Resources – Division of Water Resources

Pursuant to NRS 353.268, the Division requests the Board's recommendation to the Interim Finance Committee an allocation of \$102,029 from the Interim Finance Committee Contingency Account to cover costs associated with the repair and maintenance of the South Fork Dam.

B. Department of Conservation & Natural Resources – Division of Forestry

Pursuant to NRS 353.268, the Division requests the Board's recommendation to the Interim Finance Committee for an allocation of \$5,935,293 from the Interim Finance Committee Contingency Account to cover costs associated with the emergency response expenses within the Nevada Division of Forestry fire suppression account.

C. Department of Indigent Defense Services

Pursuant to NRS 353.268, the Department requests the Board's recommendation to the Interim Finance Committee for an allocation of \$136,268 from the Interim Finance Contingency Account to reimburse Douglas, Lincoln, Nye, Carson City, Elko, Humboldt, and Pershing counties for costs associated with case related expenses for indigent defense services.

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

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

Claimant: Jazmin Melgar
Claim No: TC20094
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

Claimant: Douglas Melgar
Claim No: TC20095
Settlement Amount: \$91,152.18
Date of Loss: November 9, 2013

Claimant: Estate of Helen Liu
Claim No: TC20096
Settlement Amount: \$25,489.27
Date of Loss: November 9, 2013

Claimant: Hui Liu
Claim No: TC20097
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

Claimant: Lianfen Xu
Claim No: TC20098
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

8. Approval of Proposed Joinders (For possible action)

A. Department of Education

Pursuant to NRS 333.475, the Department requests approval to enter into a Joinder Contract to utilize the Nevada Association of School Administrators contract with EDU2000 to provide a program for students to transition from pre-algebra to algebra 1.

B. Department of Employment, Training and Rehabilitation – Employment Security Division

Pursuant to NRS 333.475, the Department requests approval to enter into a Joinder Contract to utilize the Department of Health and Human Services, Division of Welfare and Supportive Services contract with CSG Government Solutions to provide project management services.

9. [Approval of Proposed Leases](#) (For possible action)
10. [Approval of Proposed Contracts](#) (For possible action)
11. [Approval of Proposed Master Service Agreements](#) (For possible action)
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 \$100,000. Per direction from the September 14, 2021 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$99,999). Attached is a list of all applicable approvals for contracts and amendments approved from April 20, 2022 through May 23, 2022.

13. Information Item Reports

A. Department of Conservation and Natural Resources – Division of State Lands – Fiscal Year 2022, 3rd Quarter

Pursuant to NRS 321.5954, subsection 4, the State Land Registrar is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. This submittal reports program activities for the 3rd quarter of fiscal year 2022.

B. Statewide Quarterly Overtime Report – Fiscal Year 2022, 3rd 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 3rd Quarter Overtime Report and analysis for fiscal year 2022.

C. Governor's Finance Office – Budget Division

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds, and IFC Restricted Contingency Funds as of April 30, 2022.

Below is the available balance for each account prior to any projected outstanding claims.

Tort Claim Fund	\$ 3,598,122.35
Statutory Contingency Account	\$ 11,553,837.97
Stale Claims Account	\$ 2,124,292.39
Emergency Account	\$ 354,763.00
Disaster Relief Account	\$ 8,011,031.70
IFC Unrestricted Contingency Fund General Fund	\$ 18,847,547.78
IFC Unrestricted Contingency Highway Fund	\$ 1,638,068.35
IFC Restricted Contingency Fund General Fund	\$ 8,150,769.00
IFC Restricted Contingency Highway Fund	\$ 334,796.00

- 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 this public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 329 254 239#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

15. Adjournment

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. A person may submit comments to be attached to the minutes of the meeting in writing three business days before the meeting date, in addition to testifying or in lieu of testifying. Written comments are limited to 2 pages. Written comments may be submitted electronically by email at daluzzi@finance.nv.gov. 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 at 209 E. Musser Street, Suite 200, Carson City, NV 89701 or by contacting Dale Ann Luzzi at (775) 684-0223 or by email at daluzzi@finance.nv.gov.

Agenda Posted at the Following Locations:

1. Blasdel Building, 209 E. Musser Street, Carson City, NV 89701
2. Capitol Building, 101 North Carson Street, Carson City, NV 89701
3. Legislative Building, 401 N. Carson Street, Carson City, NV 89701
4. Nevada State Library & Archives, 100 North Stewart Street, Carson City, NV 89701
5. Grant Sawyer Building, Capitol Police, 555 E. Washington, Las Vegas, NV 89101

Posted on the Internet: <http://budget.nv.gov/Meetings/Meetings-new/> and <https://notice.nv.gov>

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STATE OF NEVADA BOARD OF EXAMINERS

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

Date and Time: May 10, 2022, 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 – On the phone
Attorney General Aaron Ford – On the phone

STAFF PRESENT:

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

MEETING MINUTES

1. Call to Order / Roll Call

Governor: Good morning, everybody. I would like to call to order today's meeting of the State Board of Examiners for Tuesday, May 10, 2022. Could I ask the Clerk to take the roll, please?

Board Secretary: Governor Sisolak.

Governor: Here.

Board Secretary: Secretary of State Cegavske.

Secretary of State: Here.

Board Secretary: Attorney General Ford.

Attorney General: Here.

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

- 2. Public Comment** The first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on the agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111. When prompted to provide the meeting ID, please enter 316 240 28#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

Governor: Moving on to item number two, *Public Comment*. This is the first time set aside for public comment. Anyone wishing to address the Board on any item on today's agenda, please step forward, identify yourself for the record and comments will be limited to three minutes. Do we have anybody in Las Vegas for public comment? No. Do we have anybody from Carson City for public comment?

Clerk of the Board: Governor, we do have a public comment here in Carson City this morning.

Public Comment: Attachment A

Governor: Do we have any written or telephonic comments? No. I'm going to close the public comment.

3. Approval of the April 12, 2022 Meeting Minutes (For possible action)

Governor: Moving on to item number three, *Approval of the April 12, 2022 Meeting Minutes*. Do I have a motion?

Secretary of State: I move for approval.

Governor: We have a motion by Secretary Cegavske. Is there any discussion? Hearing 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 Tourism and Cultural Affairs – Division of Museums and History – Nevada State Museum Trust	1	\$2,928
Total	1	\$2,928

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

Clerk of the Board: Good morning. There is one request to purchase a vehicle under this agenda item. This request is from the Department of Tourism and Cultural Affairs, Division of Museums and History, Nevada State Museum Trust fund to purchase a replacement vehicle for an amount not to exceed \$2,928. This purchase will be made from the State Purchasing Division. The vehicle being replaced has met the age and/or mileage requirements in the State Administrative Manual and funds are available for this purchase.

Are there any questions on this item?

Governor: Do we have any questions on the vehicle purchase, item number four?

Secretary of State: No questions. I move for approval, Governor.

Governor: We have a motion for approval from Secretary Cegavske. Is there any discussion on the 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 Employee (For possible action)

A. 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 Kelly Bodine to assist in processing a complex caseload of disability cases for the Department of Employment, Training and Rehabilitation through Master Service Agreement #23928 with HAT Limited Partnership, dba Manpower.

B. 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 Annette Ballew to assist with training a new incumbent Program Officer in architecture operations and project delivery methods for the Nevada Department of Transportation through Master Service Agreement #23927 with Marathon Staffing Group, Inc.

C. State Controller's Office

Pursuant to NRS 333.705, subsection 1, the State Controller's Office requests authority to contract with former employee Tony Pilant to provide the required support and maintenance to the Advantage Financial system and associated applications.

Governor: Item number five, *Authorization to Contract with a Current and/or Former State Employee*.

Clerk of the Board: This item contains three requests to contract with former employees pursuant to Nevada Revised Statute (NRS) 333.705. The first item is from the Department of Administration, Purchasing Division to contract with a former employee to assist in processing a complex caseload of disability cases for the Department of Employment, Training and Rehabilitation through Master Service Agreement number 23928 with HAT Limited Partnership, dba Manpower. The duration of this contract is expected to be one year or through June 2023.

The second item is also from the Department of Administration, Purchasing Division to contract with a former employee to assist with training a new employee in architecture operations and project delivery methods for the Nevada Department of Transportation through Master Service Agreement number 23927 with Marathon Staffing Group, Inc. This individual will work part-time through June 2022.

The third item is from the State Controller's Office to contract with a former employee to provide necessary support and maintenance for the state's Advantage Financial system and associated applications. This individual will work part-time through June 2024.

Are there any questions on any of these items?

Governor: Does anyone have any questions on item number five, authorizing contracts for the former employees? Do I have a motion?

Attorney General: I move approval.

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

6. 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 – Real Estate Division –
Real Estate Administration**

Pursuant to NRS 353.268, the Department requests the Board's recommendation to the Interim Finance Committee for an allocation of \$103,611 from the Interim Finance Committee Contingency Account to cover projected costs for fiscal year 2022 related to reduced timeshare application fees.

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

Clerk of the Board: There is one item under agenda item six for a positive recommendation to the Interim Finance Committee (IFC) pursuant to NRS 353.268 for an allocation from the IFC Contingency Account. The current balance in this account is approximately \$18.4 million. This request is from the Department of Business and Industry, Real Estate Division, Administration for an allocation of \$103,611 from the IFC Contingency Account to cover projected expenditures for the remainder of fiscal year 2022. Are there any questions on this item?

Governor: Do we have any questions on item number six, requesting a recommendation to IFC for Contingency Account expenditures?

Secretary of State: No questions.

Governor: Do I have a motion?

Attorney General: I move approval.

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

7. Approval of Proposed Leases (For possible action)

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

Clerk of the Board: There are four leases under agenda item seven today for approval by the Board. Are there any questions on any of these items?

Governor: No, I just wanted to point out that I appreciate the briefing that you gave me, Director but we are following these rent increases, right, to make sure that they are suitable as it relates to local jurisdictions and going rates?

Clerk of the Board: Yes, that is correct.

Governor: Any discussion or any question on item number seven? Do we have a motion on item number seven?

Attorney General: None. I move approval.

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

8. Approval of Proposed Contracts (For possible action)

Governor: Item number eight, *Approval of Proposed Contracts*.

Clerk of the Board: There are 37 contracts under agenda item eight today for approval by the Board. Are there any questions on these items?

Governor: I do not have any questions. Again, I appreciate your briefing on these items. Do we have any questions on item number eight?

Secretary of State: No, but Governor, I would like to thank your staff as well for the briefings. Thank you for the responses as well.

Governor: Thank you. Do I have a motion on item number eight?

Attorney General: I move approval, Mr. Governor.

Governor: We have a motion for approval from General Ford. Is there any discussion? Seeing none. All in favor, signify by saying aye. Are any opposed? The motion passes.

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

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

Clerk of the Board: There are 82 Master Service Agreements under agenda item nine for approval by the Board. Are there any questions on any of these items?

Governor: Do we have any questions on item number nine, Master Service Agreements? Hearing and seeing none. Do I have a motion on item number nine?

Attorney General: I move approval.

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

10. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$100,000. Per direction from the September 14, 2021 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$99,999). Attached is a list of all applicable approvals for contracts and amendments approved from March 23, 2022 through April 19, 2022.

Governor: Item number 10 is an information item. Do we have any questions on item number 10?

Clerk of the Board: I would just note that there are 83 items under agenda item 10. These are informational, contracts over \$10,000 and under the \$100,000 threshold that were approved by the Clerk of the Board between March 23, 2022 and April 19, 2022.

Governor: Do we have any questions on any of these items? Moving forward.

11. Information Item Reports

Department of Motor Vehicles – Complete Streets Program

Pursuant to NRS 482.1825, subsection 2, the Department of Motor Vehicles shall certify to the State Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents and that the money has been distributed as provided in statute. This is the second quarter of fiscal year 2022 report for the period beginning January 1, 2022 and ending March 31, 2022.

Governor: Item number 11, *Information Item Reports*.

Clerk of the Board: Under item number 11 is an informational report from the Department of Motor Vehicles on the voluntary contributions collected by counties pursuant to NRS 482.480 known as the Complete Streets program. This report is for the quarter ending March 31, 2022. During this quarter, the department collected \$103,584 which is compared to \$106,779 in the same period last year and \$97,268 collected in the previous quarter. Of the amount collected, approximately 78.62% was from Clark County, just over 15% from Washoe County and 3%, each, from Carson City and Douglas County. Are there any questions on this item?

Governor: Do we have any questions on this item, item number 11 for Complete Streets.

Attorney General: None here.

12. Public Comment This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment via telephone, dial 775-321-6111. When prompted to provide the meeting ID, please enter 316 240 28#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

Governor: That moves us to item number 12, *Public Comment*. This is the second time set aside for public comment. Anyone wishing to address the Board on any item under this Board's jurisdiction, please step forward, identify yourself for the record and comments will be limited to three minutes. Do we have anybody in Las Vegas for the second public comment section? Do we have anybody in Carson City?

Clerk of the Board: We do have one.

Public Comment: Attachment B

Governor: Do we have any telephonic public comment?

Clerk of the Board: We do not.

Governor: Seeing and hearing none.

13. Adjournment

Governor: We are adjourned. Thanks, everybody.

ATTACHMENT A

Andrew Laughlin: I'd like to thank you for the opportunity to speak today. My name is Andrew. My water sports company, Outdoor Immersion Inc., which does business at Sand Harbor Rentals, has held your water sports concession at Sand Harbor for the past decade. We've been your original concessionaire for water sports at Sand Harbor since that contract was first offered. And in our time operating in the park, we've gotten tens of thousands of people paddling on the lake and earned the State of Nevada over \$1.5 million in concession fees. We did all this with an excellent safety record, excellent online reviews from the public and zero lawsuits, which is amazing considering the sheer volume of people that we took on kayaking adventures. I'm here today because during the recent RFP 70CNRS1887 process, my bid to retain this concession was taken out of the running due to a clerical error on the part of the state. After building this business from a startup that generated \$40,000 annually for the State of Nevada, to an established and respected business that earns the state \$300,000 annually, my proposal for this RFP wasn't even allowed to compete.

The required thousand-dollar bond check that I sent was lost or miscategorized in the offices and as a result my proposal was marked 'no bid' and taken out of the running. Despite multiple e-mails to Nancy Feser, the purchasing department employee in charge of the RFP in which I expressed my hope winning the RFP, I was not informed that there was any issue with my check or the bid submission until after the RFP process was over and a new company was announced as a concessionaire. Now I should note these emails to Nancy were sent long before the selection committee even met to decide the winner so, there was ample time for them to know that I was very, very interested. I didn't even get a phone call after a decade of reliable service and revenue earned for the state of Nevada. When I was later informed that this bond check was missing, I submitted the USPS tracking number and proved that it had been sent and the purchasing department was able to locate my missing check in their office but I was then informed that the purchasing department and the selection committee were unwilling to consider the proposal and bid that I submitted or revisit the RFP process because there was no guarantee that my proposal would have won.

Additionally, they told me, since my proposal was marked 'no bid,' that I would be ineligible to submit an appeal to the RFP outcome. And they pivot from their original statement that it was my missing check was the issue and said, I was the one that marked the proposal 'no bid.' This absolutely false and it's totally illogical that I would submit a 130-page proposal, letters of reference, a bond check, massive amounts of private financial information, and follow-up emails to the RFP administrator expressing my interest in winning all without the intention of bidding on this contract that's been my livelihood for the past 10 years. The business I've started from the ground up has been taken away from me due to a clerical error. My employees that have been with me for years have no jobs. Over \$250,000 of equipment is still in storage. I'm not a sore loser on this RFP process. I wasn't even given the chance to compete for the business that I built or even given a phone call or e-mail to let me know that there was an issue with the proposal that I'd spent months working on. My proposal was marked successfully submitted in the Nevada e-pro portal. I'd sent e-mails to the RFP administrator expressing my interest in winning the contract and it appeared to me that everything was in order. I'm asking the board to reconsider the selection committee's decision on this RFP and allow me to compete for the business that I built.

I have all the equipment, the employees, the marketing, and the website infrastructure ready to roll for this summer and I have a long history of operating a high-volume concession with an excellent safety record, whereas, the company that won, is a new company, that's never done that, to my knowledge. My bid for this RFP, and my previous bid for the concession contract that I've just completed, both, gave the State of Nevada a higher percentage of sales than the new company who was awarded the contract so, I would make the state more money. I've proven my reliability doing that. I believe, it's in your power to confirm or deny this RFP result today and until this RFP process can be redone with all eligible concessionaire candidates, please let me operate my business, maintain my livelihood and continue serving in the State of Nevada.

ATTACHMENT B

Andrew Laughlin: Guess there's no discussion on what I said before. That's it?

Governor: I got the letter and read the letter, as I'm sure my Board colleagues did, but there was no discussion on the item.

Andrew Laughlin: Okay.

Governor: Thank you, sir.

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 13, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Jim Rodriguez, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

A handwritten signature in black ink, appearing to read "Jim Rodriguez".

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 – NEVADA HIGHWAY PATROL DIVISION

Agenda Item Write-up:

Pursuant to NRS 334.010, the Nevada Highway Patrol (NHP) requests approval to purchase two replacement vehicles for an amount not to exceed \$126,336.50.

Additional Information:

The agency is requesting to replace two crashed vehicles. Funding for the purchase of the vehicles is provided by insurance recoveries, which currently holds a balance of \$601,314.

The agency is requesting to replace two gasoline-powered vehicles: one standard gasoline-powered Dodge Chargers and one Sport Utility Vehicle (SUV) with two electric Ford Mach E GT SUVs configured for law enforcement. The current quoted price of the electric vehicles requested is \$63,168 each.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: _____

A handwritten signature in black ink, appearing to read "Jim Rodriguez".

ACTION ITEM: _____

Steve Sisolak
Governor



Nevada Department of
Public Safety
Dedication Pride Service

George Togliatti
Director

Sheri Brueggemann
Deputy Director

Patrick J. Conmay
Colonel

**Nevada Highway Patrol
Headquarters**

555 Wright Way
Carson City, Nevada 89711
Telephone (775) 687-5300 / Fax (775) 684-4379

DATE: May 9th, 2022

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

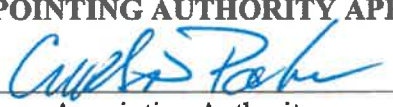


THROUGH: Curtis Palmer, Senior Fiscal Officer
Department of Public Safety, Director's Office *CP*

FROM: Kristi Defer, Administrative Service Officer 3
Denny Gortari, Administrative Service Officer 2

SUBJECT: Board of Examiners Request for Vehicle Purchase Approval – From
Crash Fund

The Department of Public Safety (DPS), State Police, Nevada Highway Patrol Division (NHP) is requesting approval from the Board of Examiners (BOE) to purchase replacements for two crashed vehicles from Budget Account 4713, Category 34, Crash Fund, in the amount of \$126,336.50. This category is funded from insurance recoveries. The cash balance forward from insurance recoveries in Fiscal Year 2021 was \$331,107; current recoveries are \$270,332.25; and current CAT 34 expenditures were \$125 providing \$601,314 for these purchases. The Department of Public Safety is requesting this item be placed on the June 14th, 2022, Board of Examiners' agenda.

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

Agency Name: DPS/State Police/NHP	Budget Account #: 4713
Contact Name: Kristi Defer, ASO III	Telephone Number: 775-684-4903
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: <u>2</u> Amount of the request: \$126,336.50 Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Mission of the requested vehicle(s): Law Enforcement Vehicles	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: Base and Work Program C56680 Insurance Recoveries 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"/> <u> </u> 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. No. Section not applicable as these are law enforcement vehicles.	
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: 2018 Odometer Reading: 47,318 Type of Vehicle: Utility <hr/> Vehicle #2 Model Year: 2016 Odometer Reading: 21,017 Type of Vehicle: Sedan <hr/> <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. No - Totaled vehicles. Subject vehicles struck NHP vehicles in both instances totaling the patrol vehicles noted. <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. N/A
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;">  _____ Title </div> <div style="text-align: center;">  _____ Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase </div> <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>	

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.:	2022 MACH E GT		
Dealer Name:	Corwin Ford		
Delivery Location:	357 Hammill Lane, Reno NV.89511		
Vehicle Colors:	Exterior: Iced Blue Silver	Interior: Black	X <input type="checkbox"/> Cloth <input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE 2022 MACH E GT with 91kw/high voltage battery, single speed transmission.	2	\$ 63,140.00	\$ 126,280.00
SPECIFY OPTIONS: (description)			
(included) power windows, power locks, blind spot monitor, rear camera, iced blue silver exterior, black interior, push button start, Cruise Control, 20" inch wheels, 8 - way power seats, heated seats, LED projection headlamps.	2	Incl.	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)	2	Incl.	\$
Total purchase price with options			\$ 126,280.00
DMV Title and DRS Fee's	2	\$28.25	\$56.50
GRAND TOTAL:			\$126,336.50

Registered Owner:	DPS/State Police/Nevada Highway Patrol 555 Wright Way Carson City, NV 89711
Legal Owner:	DPS/State Police/Nevada Highway Patrol 555 Wright Way Carson City, NV 89711
County Vehicle Based In:	1 Washoe County, 1 Clark County
Name & Phone of Person to contact when vehicle is ready for delivery:	Denny Gortari Fleet Administrator/ASO II NHP 775-684-4825



Invoice # 05/24/2022

Corwin | Ford
RENO

Sales • Service • Used Cars & Trucks

3600 KIETZKE LANE
RENO, NV 89502

P.O. BOX 12970
RENO, NV 89510

775-829-3206 Direct

Customer #NEVADA HIGHWAY PATROL

Sold to:

Address:

City, State &
Zip Code

VIN	Year	Make	Model
	2022	Ford	MACH E GT
Salesperson	Deal #		PO #
Dennis Tagliarino			

2022 MACH E GT (2 UNITS)

INCLUDES: 91kw/h standard range high voltage battery, single speed transmission, power windows, power locks, blind spot monitor, rear camera, Iced blue silver exterior, black interior, push button start, Cruise Control, 20" inch wheels, 8 -way power seats, heated seats, LED Projection headlamps.

Total Cost WITH TITLE FEES \$126,336.50

***Thank you for your
business!***

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 11, 2022

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

From: Dustin Speed, Executive Branch Budget Officer *DS*
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.

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 Lleta Brown to provide technical assistance to registered apprenticeship programs for the Department of Business and Industry through Master Service Agreement #23928 with HAT Limited Partnership, dba Manpower.

Additional Information:

Ms. Brown retired from the Department of Business and Industry on December 31, 2021 and is receiving pension benefits. Her skills and experience are needed to assist in compliance reviews of registered apprenticeship programs. The department intends to contract with Ms. Brown upon approval until June 30, 2023 on a part-time basis for approximately 20-30 hours per week.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: LA
ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

May 11, 2022

MEMORANDUM

To: Dustin Speed

From: Annette Morfin, Purchasing Officer

Subject: CETS Contract 23928 – HAT LTD Partnership dba Manpower
RFP 99SWC-S1406 – Temporary Employment Services

Please find attached a copy of the "Authorization to Contract with a Former Employee" for Lleta Brown who Manpower wants to hire. Lleta recently left state service and is collecting PERS.

Manpower is aware they will not be able to hire Lleta until June BOE approval. This is an extension off of the current request that was approved at the April BOE.

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

STEVE SISOLAK
Governor

STATE OF NEVADA




TERRY J. REYNOLDS
Director

DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF THE DIRECTOR

Date: May 11, 2022

To: Anette Morfin, Purchasing Officer
Department of Administration, Purchasing Division

From: Terry Reynolds, Director 
Nevada Department of Business and Industry

Subject: Authorization to Contract with a Former Employee

On behalf of the Nevada Department of Business and Industry, I respectfully request approval to contract with a former employee, Lleta Brown, through Manpower.

Assembly Bill (AB) 459, effective July 1, 2021, and passed during the 81st Regular Session of the Nevada Legislature (2021), amends certain provisions of Nevada Revised Statutes (NRS) section 610 and transfers the responsibility and accountability for the Nevada State Apprenticeship Council (NSAC), State Apprenticeship Director, and registered apprenticeship programs in the State of Nevada to the Office of the Labor Commissioner (OLC). Section 10.5 of AB 459 states: 1. The Office of the Labor Commissioner shall act as the State Apprenticeship Agency as defined in 29 C.F.R. § 29.2 and has responsibility and accountability for apprenticeship in this State.

Lleta Brown will provide technical assistance to registered apprenticeship programs and programs seeking to become registered apprenticeship programs and guidance and instructions on how to complete and maintain the required records and forms for registered apprenticeship programs. Ms. Brown will work with the Labor Commissioner and State Apprenticeship Director to develop a schedule for compliance reviews of registered apprenticeship programs (NAC 610.935) and complete compliance reviews and issue a report of findings to be presented to the Nevada State Apprenticeship Council as needed.

If you have any questions, please feel free to contact Dale Hansen at 775-684-7073 or at jdhanzen@business.nv.gov.

Thank you.



**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:	Lleta Brown			
Former Employee ID Number:	09443			
Former Job Title:	Deputy Labor Commissioner			
Former Employee Agency:	Office of the Labor Commissioner – Department of Business and Industry			
Former Class and Grade:	Class:	U3503	Grade:	Unclassified
Former Employment Dates:	From:	1989	To:	December 31, 2021
Requesting Agency:	Office of the Labor Commissioner – Department of Business and Industry			
Vendor:	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	<p>Summarize scope of contract work.</p> <p>The position will provide technical assistance to registered apprenticeship programs and programs seeking to become registered apprenticeship programs and guidance and instructions on how to complete and maintain the required records and forms for registered apprenticeship programs. In addition, the position will perform compliance reviews of existing registered apprenticeship programs.</p> <p>Assembly Bill (AB) 459, effective July 1, 2021, and passed during the 81st Regular Session of the Nevada Legislature (2021), amends certain provisions of Nevada Revised Statutes (NRS) section 610 and transfers the responsibility and accountability for the Nevada State Apprenticeship Council (NSAC), State Apprenticeship Director, and registered apprenticeship programs in the State of Nevada to the Office of the Labor Commissioner (OLC). Section 10.5 of AB 459 states: 1. The Office of the Labor Commissioner shall act as the State Apprenticeship Agency as defined in 29 C.F.R. § 29.2 and has responsibility and accountability for apprenticeship in this State. Nevada Administrative Code (NAC) section 610 sets forth additional regulations for the NSAC, State Apprenticeship Director, and registered apprenticeship programs.</p> <p>The Governor’s Office of Workforce Innovation (GOWINN) previously had the NSAC, and it does not appear to have conducted any compliance reviews during the period covering 2017-2021 as required by Nevada Administrative Code (NAC) section 610.935.</p>


	<p>Nevada Administrative Code (NAC) 610.935 Reviews for compliance. (NRS 610.090, 610.180)</p> <ol style="list-style-type: none"> 1. The Council will conduct a systematic review of programs of apprenticeship on a regular basis in order to determine the extent to which sponsors are complying with NAC 610.550 to 610.990, inclusive. 2. The Council will conduct reviews for compliance if circumstances, including the receipt of complaints not referred to a private body for review, warrant a review, and will take appropriate action regarding programs which are not in compliance with the requirements of this plan. 3. Reviews for compliance will consist of comprehensive analysis and evaluation of each aspect of the program of apprenticeship, including on-site investigations and audits. <p>This position will work with the Labor Commissioner and State Apprenticeship Director to develop a schedule for compliance reviews of registered apprenticeship programs and complete compliance reviews and issue a report of findings to be presented to the Nevada State Apprenticeship Council as needed.</p>
B	<p>Document former job description.</p> <p>The Deputy Labor Commissioner managed the Las Vegas office of the Office of the Labor Commissioner and supervised staff, conducted investigations and audits and pre-hearings and hearings, and assisted the Labor Commissioner in preparing reports and data for wage claims and complaints, public works projects, prevailing wage surveys, private employment agencies, and general complaints.</p>
C	<p>Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?</p> <p>Yes. Ms. Brown has experience providing technical assistance to registered apprenticeship programs and those seeking to become registered apprenticeship programs and has conducted compliance reviews of registered apprenticeship programs. Ms. Brown will train and provide instructions to the State Apprenticeship Director and Chief Assistant on how to conduct compliance reviews of registered apprenticeship programs. Ms. Brown will work with the State Apprenticeship Director and Chief Assistant and assist registered programs on compliance issues and provide technical assistance to those seeking to become registered apprenticeship programs.</p>
D	<p>Explain why existing State employees within your agency cannot perform this function.</p> <p>The Office of the Labor Commissioner has limited staff and must utilize existing staff to perform other enforcement requirements. The Office of the Labor Commissioner is responsible for the enforcement of the following statutes and regulations.</p> <p> NRS 607 – Office of the Labor Commissioner NRS 608 – Compensation, Wages and Hours NRS 609 – Employment of Minors NRS 610 – State Apprenticeship Council NRS 611 – Private Employment Agencies NRS 613 – Employment Practices* NRS 614 – Organized Labor and Labor Disputes NRS 338 – Public Works NRS 617B–Professional Employer Organizations NAC 607 – Rules of Practice NAC 608 – Compensation, Wages and Hours NAC 609 – Employment of Minors NAC 610 – State Apprenticeship Council NAC 611 – Private Employment Agencies NAC 613 – Employment Practices NAC 338 – Public Works </p>
E	<p>Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.</p> <p>N/A.</p>
F	<p>List contractors' hourly rate.</p>

	\$39.94
G	List the range of comparable State employee rates.
	\$24.56 to \$36.48 Program Officer III - Grade 35
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.
I	Document justification for hiring contractor.
	The former employee (Ms. Brown) possesses the required expertise and experience to provide technical assistance to registered apprenticeship programs and those seeking to become registered apprenticeship programs. Ms. Brown has experience performing compliance reviews of registered apprenticeship programs. No compliance reviews appear to have been conducted during the period covering 2017-2021 while the NSAC was under GOWINN. These compliance reviews need to be completed and Ms. Brown is the best available option to perform this duty. Existing staff have other enforcement responsibilities, and Ms. Brown will train and provide guidance to the State Apprenticeship Director and Chief Assistant on how to perform compliance reviews going forward.
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)
	Upon approval by the Board of Examiners through June 30, 2023.
L	Will the former employee be working full time or part time? If part time, how many hours?
	Part-time – 20 to 30 hours per week.
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No.

Comments – Provide any additional comments:

There are sufficient funds to cover this request through fiscal year 2023.

Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request Date 5/11/22



Purchasing Administrator Signature (if a Statewide Contract) Date 5/11/22



Budget Analyst Signature Date 5/11/22

Clerk of the Board of Examiners Signature Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 11, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Dustin Speed, Executive Branch Budget Officer *DS*
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.

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 William Steves to act as an audit subject matter expert for the requirement gathering and request for proposal phase of Project MYNT for the Department of Taxation through Master Service Agreement #23928 with HAT Limited Partnership, dba Manpower.

Additional Information:

Mr. Steves retired from the Department of Taxation on December 1, 2020 and is receiving pension benefits. His skills and experience are needed to assist in evaluating vendor responses for Project MYNT. The department intends to contract with Mr. Steves from June 15, 2022 through June 30, 2023 on a full-time basis.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: <u>LA</u>
ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

May 9, 2022

MEMORANDUM

To: Dustin Speed

From: Annette Morfin, Purchasing Officer

Subject: CETS Contract 23928 – HAT LTD Partnership dba Manpower
RFP 99SWC-S1406 – Temporary Employment Services

Please find attached a copy of the "Authorization to Contract with a Former Employee" for William J. Steves who Manpower wants to hire. William recently left state service and is collecting PERS.

Manpower is aware they will not be able to hire William until June BOE approval.

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



STEVE SISOLAK
Governor
JAMES DEVOLLO
Chair, Nevada Tax Commission
SHELLIE HUGHES
Executive Director

STATE OF NEVADA
DEPARTMENT OF TAXATION

Web Site: <https://tax.nv.gov>

1550 College Parkway, Suite 115
Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

LAS VEGAS OFFICE
700 E. Warm Springs, 2nd Floor
Las Vegas, NV 89119
Phone: (702) 486-2300
Fax: (702) 486-2373

RENO OFFICE
4800 Kietzke Lane
Building L, Suite 235
Reno, Nevada 89502
Phone: (775) 687-9999
Fax: (775) 688-1303

Date: May 9, 2022
To: Kevin Doty, Administrator
From: Joy Grimmer, Administrative Services Officer
Department of Taxation
Subject: Authorization to Contract with a Former Employee

A handwritten signature in blue ink, appearing to be "JG", located next to the "From:" field.

The Department of Taxation is requesting to contract with former state employee, William J. Steves, through the use of Manpower Temporary Services. This request is made in accordance with the State Administrative Manual Chapter 0323. In his previous position, Mr. Steves was responsible for duties at all levels in the Audit section. Some of these duties included performing audits, supervising and training audit and compliance staff, and performing systems integration and functional testing of multiple systems and databases. When the Department changed computer systems in 2005, Mr. Steves was designated as a Tax Administration System (TAS) expert end user, due to his extensive knowledge of the Audit processes and tax laws and administrative regulations, which required him to perform user acceptance testing for TAS (the new system), create and submit system discrepancy reports, and provide comprehensive end user training. He was also the main contact person for any questions or training for TAS, Revenue Premiere, and Tax Master, and provided expertise to ensure these systems and databases were functioning properly for the audit staff and that they included necessary changes when tax laws and regulations were updated.

Through this contract, Mr. Steves will act as an Audit subject matter expert for the Requirements Gathering and Request for Proposal phase of Project MYNT, which includes writing and releasing the RFP and evaluating vendor responses. The expertise and specialized knowledge that Mr. Steves possesses will be utilized and documented as part of Project MYNT, and it will be invaluable in keeping the timeline for the project without creating any disruptions to the Department's daily audit functions.

Please contact me if additional information or clarification is needed. My phone number is 775-684-2136, or I can be contacted by email at grimmerj@tax.state.nv.us.

Thank you,

Joy Grimmer, Administrative Services Officer
Nevada Department of Taxation



**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:	William J. Steves			
Former Employee ID Number:	020838			
Former Job Title:	Tax Manager			
Former Employee Agency:	Department of Taxation			
Former Class and Grade:	Class:	07.223	Grade:	41
Former Employment Dates:	From:	March 22, 2000	To:	December 1, 2020
Requesting Agency:	Department of Taxation			
Vendor:	Manpower Temporary Services			

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. Act as audit subject matter expert for the Requirements Gathering and Request for Proposal phase of Project MYNT, which includes writing and releasing the RFP and evaluating vendor responses.
B	Document former job description. Mr. Steves held multiple positions with the Department of Taxation over a 20-year span. He started with the Department as an Auditor II in 2000, then held the Auditor III (Audit Supervisor), and Management Analyst III positions before retiring from the Tax Manager position in 2020. During his tenure with the Department, Mr. Steves was responsible for duties at all levels in the Audit section. Some of these duties included performing audits, supervising and training audit and compliance staff, and performing systems integration and functional testing of multiple systems and databases. When the Department changed computer systems in 2005, Mr. Steves was designated as a Tax Administration System (TAS) expert end user, due to his extensive knowledge of the Audit processes and tax laws and administrative regulations, which required him to perform user acceptance testing for TAS (the new system), create and submit system discrepancy reports, and provide comprehensive end user training. He was also the main contact person for any questions or training for TAS, Revenue Premiere, and Tax Master, and provided

	expertise to ensure these systems and databases were functioning properly for the audit staff and that they included necessary changes when tax laws and regulations were updated.
C	<p>Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?</p> <p>Yes, the former employee is being hired because of their extensive, specialized knowledge of the Department's Audit processes, and computer systems, such as Revenue Premier. Yes, it is anticipated that documentation on the Department's processes and computer systems would be developed as part of the contracted hours.</p>
D	<p>Explain why existing State employees within your agency cannot perform this function.</p> <p>Due to staff shortages, the Department does not have enough available audit staff with the amount and level of specialized knowledge that Mr. Steves possesses. Also, the Department's current audit staff would not be able to dedicate the time necessary for Project MYNT to be successful, as it would take too much away from their regular job duties.</p>
E	<p>Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.</p> <p>Not applicable.</p>
F	<p>List contractors' hourly rate.</p> <p>\$34.90 per hour.</p>
G	<p>List the range of comparable State employee rates.</p> <p>The hourly wage for an Auditor II, grade 34, on the employee/employer paid retirement, ranges from \$23.54 per hour for a step 1 to \$34.90 per hour for a step 10.</p>
H	<p>Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result?</p> <p>The contractor's hourly rate does not exceed the range for an Auditor II. The contract has not been limited as a result.</p>
I	<p>Document justification for hiring contractor.</p> <p>Due to recent turnover and staff shortages, the Department has lost a great deal of specialized knowledge and subject matter experts, like Mr. Steves. With the upcoming modernization of the Department's computer system, Project MYNT, the Department needs subject matter experts with specialized knowledge in certain areas. Audit is one of those areas. It is one of the most challenging functions within the Department to train for, and it takes years of experience to become proficient enough as a Tax Auditor to be considered a subject matter expert. In the planning phase of Project MYNT, it was determined that hiring Mr. Steves to document and analyze the Audit processes for the Department would be more efficient than hiring a new employee without his specialized knowledge, as it would not be feasible to bring the new person up to speed within the timeframe provided by the project.</p> <p>Mr. Steves has extensive knowledge of the Department of Taxation. He filled many audit and supervisory roles during his 20-year tenure with Taxation. The chance to bring Mr. Steves back to the Department presents the unique opportunity of allowing him to act as the subject matter expert to the requirements gathering and RFP writing phase of Project MYNT. This will result in less interruption to the normal duties of the audit staff, as they will be able to keep performing their regular duties without disruption.</p>
J	<p>Will the employee be collecting PERS at any time during the contract?</p> <p>Yes.</p>
K	<p>What is the duration of the contract with the former employee? (Include start and end date)</p> <p>June 15, 2022 through June 30, 2023.</p>

L	Will the former employee be working full time or part time? If part time, how many hours?
	Full time.
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No.

Comments – Provide any additional comments:
--

Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request

05/09/2022

Date



Purchasing Administrator Signature (if a Statewide Contract)

5/9/22

Date



Budget Analyst Signature

5/11/22

Date

Clerk of the Board of Examiners Signature

Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 10, 2022

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

From: Dustin Speed, Executive Branch Budget Officer
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.

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 Michelle Dobbs to assist with fiscal operations and to provide back-up as a Finance Section Chief during State Emergency Operations Center activations for the Division of Emergency Management through Master Service Agreement #23927 with Marathon Staffing Group, Inc.

Additional Information:

Ms. Dobbs retired from the Division of Emergency Management on July 31, 2022 and is receiving pension benefits. Her skills and experience, as well as her certification as a credentialed Finance Section Chief, are necessary to allow for continuity of operations when other certified personnel are unavailable. The division intends to contract with Ms. Dobbs from August 1, 2022 until July 31, 2024 on a part-time basis for approximately 25 hours per week.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: LA

ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

May 10, 2022

MEMORANDUM

To: Dustin Speed

From: Annette Morfin, Purchasing Officer

Subject: CETS Contract 23927 – Marathon Staffing Group Inc.
RFP 99SWC-S1406 – Temporary Employment Services

Please find attached a copy of the "Authorization to Contract with a Former Employee" for Michelle Dobbs who Marathon wants to hire. Michelle recently left state service and is collecting PERS.

Marathon is aware they will not be able to hire Michelle until June BOE approval.


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



MEMORANDUM

DATE: 5/9/22

TO: Annette Morfin, Purchasing Officer
Department of Administration, Purchasing Division

FROM: Jon Bakkedahl, Deputy Administrator 
Division of Emergency Management Homeland Security

SUBJECT: Authorization to Contract with Former Employee – Michelle Dobbs

Pursuant to NRS 333.705, subsection 1, the Division of Emergency Management Homeland Security requests authority to contract with former employee Michelle Dobbs to ensure the continuity of essential duties for the division. This contract is through Master Service Agreement #23927 Marathon Staffing Group Inc.

In her role as Accountant Technician III, Ms. Dobbs was responsible for overseeing all aspects of the accounts payable, purchasing and travel activities for the Division. Ms. Dobbs was responsible for pulling & monitor all payroll reports from the HR Data Warehouse. She was also solely responsible for performing all the draws of federal funding from multiple federal systems: The Payment and Reporting System, The Payment Management System, & The Automated Standard Application for Payment system.

Ms. Dobbs is a certified & credentialed Finance Section Chief. She is one of only 2 in the agency that can currently fill this role when the State Emergency Operations Center (SEOC) is activated. She co-developed the fiscal procedures currently utilized during activations.

Her high level of institutional knowledge regarding normal agency fiscal operation as well as fiscal operations during activation will allow for continuity of operations when other certified personnel are unavailable. Ms. Dobbs will bring specific operational experience to ongoing staff development during day-to-day operations as well as critical support during SEOC activations.

Please contact me if you have any concerns at 775-687-0302 or j.bakkedahl@dem.nv.gov.



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

Authorization to Contract with a Former Employee

Employee Information				
Former Employee Name:	Michelle Dobbs			
Former Employee ID Number:	35556			
Former Job Title:	Accountant Technician III			
Former Employee Agency:	Division of Emergency Management Homeland Security			
Former Class and Grade:	Class:	07.140	Grade:	34-10
Former Employment Dates:	From:	1/14/2013	To:	07/31/2022
Requesting Agency:	Division of Emergency Management Homeland Security			
Vendor:	Marathon Staffing			

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	<p>Summarize scope of contract work.</p> <p>Contractor has a high level of institutional knowledge regarding normal agency fiscal operations. Contractor was ½ of the design/development team for the processes & procedures utilized by the fiscal section during activation of the State Emergency Operations Center (SEOC) and has been certified in and performed the role of Finance Chief and/or Deputy Finance Chief for many years. Contractors' knowledge and experience during normal operations as well as SEOC activations will allow continuity of operations when other certified personnel are unavailable.</p>
B	<p>Document former job description.</p> <p>Supervisor of travel, purchasing and accounts payable. Performed: fiscal & grant management: review all transactions for accuracy according to agency fiscal coding processes; research/resolve any issues; maintain a high level of knowledge of each grant the agency receives and coordinate expenditures and receivables and interact with various federal cash management systems to ensure efficient operational cash management; review/revise/develop accounting policies/procedures/internal controls/ participate in annual strategic plan update, research/review project worksheets for disaster reimbursement, process all requests for federal reimbursement. Finance Section Chief (one of only 2 certified to fill this role within the agency) during activation of the State Emergency Operations Center. The Finance Chief is one of 4 section chiefs (Planning, Operations, Logistics & Finance) who are responsible for directing the activities of respective sections as well as approving all requests for resources. The Chief's serve as <u>primary</u> advisors to the SEOC Manager and therefore require certification.</p>

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. Contractors' institutional knowledge of the agency is both operational as well as experiential in that while current staff's skills are being developed, contractor will bring specific and operational experience to ongoing staff development during day-to-day operations as well as during SEOC activations. Contracting with this former employee will allow the Agency to avoid having to bring in a new contractor with no experience or institutional knowledge. The contractor's knowledge of agency day-to-day functions and workload will allow the agency to maintain timely operations while new staff are learning and getting up to speed on duties. The agency workload is heavy and needs more fiscal personnel. Currently the workload consists of dealing with statewide recovery on multiple disasters as well as maintaining day-to-day blue-sky operations.
D	Explain why existing State employees within your agency cannot perform this function.
	Current DEM staff are supporting the agency day-to-day workload functions, however, were they to take on the tasks regularly it would necessitate them working out of class. The new staff will need time to get up to speed on agency's day-to-day blue-sky functions as well as recovery from the multiple disasters and any potential new disasters. Contractor will train new staff as well as current staff to fully perform ongoing emergency, disaster, and recovery functions.
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.
	No relation
F	List contractors' hourly rate.
	\$34.90 (plus Marathon admin fee of \$24.9% = \$43.59)
G	List the range of comparable State employee rates.
	Accountant Technician III Grade 34: \$23.54 to \$34.90
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?
	Contractor rate does not exceed and the contract term has not been limited
I	Document justification for hiring contractor.
	The contractor was the sole responsible party for some of the duties listed in the scope of work. These duties have federal and state requirements to maintain. The knowledge and experience will be transferred to new staff during ongoing development and training. The agency workload is heavy dealing with statewide recovery on multiple disasters as well as maintaining day-to-day blue-sky operations. Contractor's knowledge will enable agency to maintain blue sky operations while dealing with multiple ongoing and any potential new disasters while training of new staff is being performed in an already understaffed section.
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)
	08/01/2022 thru 07/31/2024
L	Will the former employee be working full time or part time? If part time, how many hours?
	Part time; not to exceed 25 hours per week.
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).

	no
--	----

Comments – Provide any additional comments:

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Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request



Date



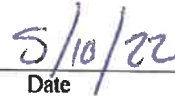
Purchasing Administrator Signature (if a Statewide Contract)



Date



Budget Analyst Signature



Date

Clerk of the Board of Examiners Signature

Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 27, 2022

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

From: Lynnette Aaron, Executive Branch Budget Officer **LA**
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.

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 Christian LaPrairie to perform training on body worn cameras and equipment for various agencies through Axon Enterprise, Inc.

Additional Information:

Mr. LaPrairie retired from the Department of Public Safety, Nevada Highway Patrol on January 7, 2022 and is receiving pension benefits. His skills and experience as a sworn officer are necessary to provide training on the operations of body worn cameras and equipment. The department utilizes Axon Enterprise, Inc. through a National Association of State Procurement Officials contract for public safety video systems to purchase tasers, body cameras, in-car cameras, and associated software. Since Mr. LaPrairie works for Axon Enterprise, Inc., he may be assigned to perform trainings on their equipment for the state.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: LA

ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

March 8, 2022

MEMORANDUM

To: Dustin Speed

From: Heather Moon, Purchasing Officer 2

Subject: 99SWC-NV20-3690 – Public Safety Video Systems – Axon Enterprise, Inc.

Please find attached a copy of the "Authorization to Contract with a Former Employee" for Christian LaPrairie. Christian recently left state service and is collecting PERS.

If you have any questions, please contact me at 684-0179 or hmoon@admin.nv.gov

RECEIVED
MAR 30 2022
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Steve Sisolak
Governor



Nevada Department of
Public Safety
Dedication Pride Service

George Togliatti
Director

Sheri Brueggemann
Deputy Director

Patrick J. Conmay
Colonel

**Nevada State Police
Headquarters**

555 Wright Way
Carson City, Nevada 89711
Telephone (775) 687-5300 / Fax (775) 684-4379

DATE: March 3, 2022

TO: Heather Moon, Purchasing Officer 2
Nevada State Purchasing

THROUGH: John Dekoekkoek, Contracts Manager, Department of Public Safety

FROM: Kristi Defer, Administrative Services Officer 3, Nevada State Police,
Highway Patrol

SUBJECT: Request to Contract with a Former Employee

Pursuant to NRS 333.705, subsection 1, the Department of Public Safety, State Police requests authority to continue to utilize an existing State of Nevada contract with a vendor who has recently employed a former State of Nevada employee who is collecting PERS.

Further explanations and justifications are provided in the attached application for the Authorization to Contract with a Former Employee and additional testimony may be provided at the Board of Examiners meeting. Please do not hesitate to contact with any questions or concerns regarding this request. Thank you.



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:	Christian "Chris" LaPrairie		
Former Employee ID Number:	009917		
Former Job Title:	Lieutenant		
Former Employee Agency:	Nevada Department of Public Safety, State Police, Highway Patrol		
Former Class and Grade:	Class:	13.204	Grade: 44
Former Employment Dates:	From:	8/3/1998	Through: 1/7/2022
Requesting Agency:	Nevada Department of Public Safety, State Police		
Vendor:	Axon		

Please mark which of the following applies and complete Sections 'A' through 'M' below:	
	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
X	Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
A	Summarize scope of contract work. The employee travels the county training agencies on the operations of their Body Worn Cameras and equipment ("Train the Trainer" trainings).
B	Document former job description. Prior to his retirement, employee was a Lieutenant with the Highway Patrol.
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? While the former employee was hired by Axon due to his knowledge and experience of working as a sworn officer for many years, the Axon commodity contract through NASPO (National Association of State Procurement Officials) was effective prior to his employment with the company. His employment will not influence or alter the contract.
D	Explain why existing State employees within your agency cannot perform this function.

	While the former employee will be working at the company, they will not be doing any direct work that will be charged to the Department.
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. There is no relationship that would violate NAC 284.750.
F	List contractors' hourly rate. The Department currently utilizes Axon through the NASPO commodity contract for equipment and associated software. The Department will not be paying or be charged an hourly rate for the former employees' services. The Department has been advised the employee is working on a salaried basis.
G	List the range of comparable State employee rates. N/A-The costs/rates for the former employee will not be charged to the Department.
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? As stated above, the contract is a commodity contract accessed through NASPO. The Department will only be utilizing the contract to purchase equipment and associated software and will not be paying the former employee under this contract.
I	Document justification for hiring contractor. The Department currently utilizes Axon through the NASPO Public Safety Video Systems contract for: Tasers, Body Cameras, and In-Car Cameras and the associated software for these devices.
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) The Department does not have a contract with the former State employee. As stated above, the Department utilized Axon through the NASPO contract.
L	Will the former employee be working full time or part time? If part time, how many hours? The former State employee currently works full time for Axon.
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:	
The former employee will not be doing any direct work for the Department and the costs for his work will not be charged to the Department. The Axon NASPO commodity contract existed prior to the former employee being employed with Axon and his employment with that company will not impact or influence that contract. In the interest of full transparency and to be fully compliant with NRS 333.705, the Department is disclosing this information and requests permission to continue utilizing the Axon NASPO contract.	

Approval for Authorization to Contract with a Former Employee:



Signature of Agency Head Authorizing Request

3-4-2022

Date



Purchasing Administrator Signature (if a Statewide Contract)

3/8/22

Date



Budget Analyst Signature

5/31/22

Date

Clerk of the Board of Examiners Signature

Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 3, 2022

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

From: Dustin Speed, Executive Branch Budget Officer *DS*
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.

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 David Wooldridge to work as a Project Manager for the Multi Application Geographic Information Center project for the Nevada Department of Transportation through Master Service Agreement #21167 with Guidesoft, Inc. dba Knowledge Services.

Additional Information:

Mr. Wooldridge retired from the Nevada Department of Transportation on May 4, 2022 and is receiving pension benefits. His skills and experience are necessary to help the department meet engineering demands current staff cannot meet. The department intends to contract with Mr. Wooldridge from July 5, 2022 until December 31, 2026 on a full-time basis.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: LA

ACTION ITEM: _____



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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

Date: 5/3/2022

MEMORANDUM

RECEIVED

MAY 03 2022

To: Dustin Speed, Lynette Aaron

From: Ryan Vradenburg, Purchasing Officer 2

Subject: MSA 99SWC-NV19-2461 Guidesoft, Inc. DBA Knowledge Services.

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Please find the attached copy of the "Authorization to Contract with a Former Employee" for David Wooldridge, whom the Nevada Department of Transportation (NDOT) is intending to hire as a Project Manager who is now employed by Knowledge Services. NDOT is aware that they may not hire David Wooldridge until BOE approval.

David Wooldridge has left state services as of May 4, 2022 and is within the two-year window and will be collecting PERS.

Thank you,
Ryan Vradenburg
Purchasing Officer II
rvradenburg@admin.nv.gov
775-684-0197



1263 South Stewart Street
Carson City, Nevada 89712
Phone: (775) 888-7440
Fax: (775) 888-7201

MEMORANDUM

April 28, 2022

To: State of Nevada Board of Examiners
From: Kristina Swallow, Director
Subject: Authorization to Contract with a Former Employee – David Wooldridge

SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with retired state employee, David Wooldridge. Mr. Wooldridge retired from state service on May 4, 2022. He is currently employed by Knowledge Services, who is proposing to utilize Mr. Wooldridge as a Project Manager to work on the Multi Application Geographic Information Center project (MAGIC), scheduled to complete by the end of December 30, 2026. Mr. Wooldridge has worked with Knowledge Services contractors during his tenure with the Department but was not involved in the procurement process for any of the current agreements.

BACKGROUND

In 2019, NDOT engaged in a project entitled Multi-Application Geographic Information Center (MAGIC) with ESRI on identifying a methodology and approach to improve NDOT processes and technology. Mr. Wooldridge gained a detailed understanding of the data environment and the 93 potential applications identified to help streamline the department's workflow and the recommendations for a Request for Proposal as part of the engagement.

In July of 2021, NDOT Project Management office began the discovery phase for the 93 applications and completing a scope of work (SOW) to solicit a Request for Proposal (RFP) to engage service providers. This RFP is scheduled for solicitation by mid-May 2022. Hiring a project manager to manage this multi-year project is imperative to the success of the project.

RECOMMENDATION

We respectfully request your consideration for approval of Knowledge Services to engage Mr. Wooldridge to fill the role as Project Manager as needed on the Project Management Office staffing team to augment the MAGIC project.

DocuSigned by:

Cole Mortensen

For Kristina Swallow, P.E., Director



**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:	David Wooldridge			
Former Employee ID Number:	10613			
Former Job Title:	Chief Information Technology			
Former Employee Agency:	Nevada Department of Transportation			
Former Class and Grade:	Class:	Chief IT Manager	Grade:	45-10
Former Employment Dates:	From:	February 1 st , 1994	To:	May 4, 2022
Requesting Agency:	Nevada Department of Transportation			
Vendor:	Knowledge Services			

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

	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
X	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 the contracted services.
	Summarize scope of contract work.
A	Consultant will work on a large enterprise-wide system to solicit, select and implement a department wide Geographic Information System (GIS) data warehouse and applicable software solutions to act as a single source of truth and system for all NDOT GIS data users and consumers. The consultant will be responsible for project management on the software and system development, ensuring the project is delivered within scope, schedule and budget, writing technical and project documentation of the software and systems as well as performing project management activities on any related interfaces.
	Document former job description.
B	Incumbent directed and managed IT functions for a department or division with direct responsibility for an annual IT operation and maintenance budget and development projects' funds. Planned and implemented IT initiatives, where the responsibility for failure falls on the incumbent, with a critical level of financial risk, critical level of legal or physical risk, and at least high positive or negative consequences to State government and citizens.

C	<p>Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?</p> <p>Yes, employee is being hired for his knowledge of overall Federal, State, and local agency requirements, policies, and procedures. He is very familiar with the needs of NDOT regarding consultant services and will help meet NDOT's needs for engineering demands that current staff cannot supply. All information related to NDOT is public information with no confidential/specialized processes.</p>
D	<p>Explain why existing State employees within your agency cannot perform this function.</p> <p>NDOT frequently contracts work and solicits requests for proposals to the consultant community due to limited resources at the Department.</p>
E	<p>Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.</p> <p>None, no relationships exist.</p>
F	<p>List contractors' hourly rate.</p> <p>\$105.60 per hour</p>
G	<p>List the range of comparable State employee rates.</p> <p>\$30.53-\$45.82 (Grade 39 + 1 @ EE/ER rate)</p>
H	<p>Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result?</p> <p>Proposed contract rate is comparable to the average private consultant rate for Mr. Wooldridge's qualifications and experience. There is no specific contract term for Mr. Wooldridge's employment with Knowledge Services.</p>
I	<p>Document justification for hiring contractor.</p> <p>Due to the number of enterprise projects currently in motion and our limited number of full-time staff available, the department is at the point that knowledgeable and experienced contract staff is the only way to get the projects rolling within scope, budget, and within timeframe.</p>
J	<p>Will the employee be collecting PERS at any time during the contract?</p> <p>Yes, due to retirement from NDOT.</p>
K	<p>What is the duration of the contract with the former employee? (Include start and end date)</p> <p>Start Date: July 5th, 2022 End Date: December 30th, 2026 (project end date)</p>
L	<p>Will the former employee be working full time or part time? If part time, how many hours?</p> <p>Full time</p>
M	<p>Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</p> <p>No</p>

Comments – Provide any additional comments:

Approval for Authorization to Contract with a Former Employee:

DocuSigned by:

Cole Mortensen

04/29/2022

Signature of Agency Head Authorizing Request

Date

Kevin D. Doty

5/3/22

Purchasing Administrator Signature (if a Statewide Contract)

Date

Debra Spalding

5/3/22

Budget Analyst Signature

Date

Clerk of the Board of Examiners Signature

Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 13, 2022

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

From: Jim Rodriguez, Executive Branch Budget Officer 
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.

DEPARTMENT OF TRANSPORTATION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Nevada Department of Transportation requests authority to contract with former employee Dave Schwartz to provide contract administration services on contract 3907, I-80 Button Point highway project, in Humboldt County.

Additional Information:

Mr. Schwartz retired from the Nevada Department of Transportation on April 16, 2021 and is receiving pension benefits. Mr. Schwartz was hired by HDR Engineering on May 2, 2022, who provided the department with contract administration services on various projects. Mr. Schwartz spent over twenty years with the department serving in District III as a Resident Engineer and most recently as Assistant District Engineer for District III in Winnemucca. HDR plans to utilize Mr. Schwartz's expertise to assist in managing contract agreements for HDR on the I-80 Button Point project.

The department intends to contract with Mr. Schwartz from June 14, 2022 until June 23, 2023 on a full-time basis with seasonal layoffs.

Statutory Authority:
NRS 333.705 (1)

REVIEWED: 
ACTION ITEM: _____



1263 South Stewart Street
Carson City, Nevada 89712
Phone: (775) 888-7440
Fax: (775) 888-7201

MEMORANDUM

May 6, 2022

To: Jim Rodriguez, Governor's Finance Office
From: Kristina Swallow, Director
Subject: Authorization to Contract with a Former Employee – Dave Schwartz

SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with retired state employee, Mr. Dave Schwartz. Mr. Schwartz retired from state service on April 21, 2021. HDR Engineering, Inc. has hired Mr. Schwartz to fill as HDR's Office Manager on Agreement P004-22-040, Contract 3907.

BACKGROUND

Contract 3907 is on I-80 in Humboldt County east of the Winnemucca Interchange to the Golconda Interchange on I-80. HDR was selected to augment Crew 920 with the administration of the contract. This project is scheduled for up to one hundred twenty (120) working days, including possible winter delays.

The goal of this Agreement is to assist the DEPARTMENT administering the contract per Federal Highways Administration (FHWA) standards. Through a Request for Proposal (RFP) process, HDR Engineering, Inc. was selected to perform the required services for the I-80 Button Point Project. Mr. Schwartz recently began his employment with HDR Engineering, Inc. on May 2, 2022. Upon his start, HDR Engineering, Inc. has requested to use Mr. Schwartz's expertise to assist in managing the agreement for HDR. Mr. Schwartz spent over twenty (20) years with NDOT serving in District III as a Resident Engineer and most recently as the Assistant District Engineer for District III in Winnemucca. Dave Schwartz brings tremendous value and expertise related to NDOT procedures to this project.

At no time during Mr. Schwartz's State service was he involved in the RFP procurement and selection of the HDR Engineering, Inc. for the required services for Button Point.

RECOMMENDATION

We respectfully request your consideration for approval for NDOT to allow the addition of Mr. Schwartz to the HDR Engineering Inc. team to manage the agreement with HDR associated with the I-80 Button Point, Agreement P004-22-040, Contract 3907.

DocuSigned by:

Kristina Swallow



**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:	David Schwartz			
Former Employee ID Number:	10198			
Former Job Title:	Administrator I, Professional Engineer			
Former Employee Agency:	Nevada Department of Transportation			
Former Class and Grade:	Class:	6.223	Grade:	45
Former Employment Dates:	From:	August 1, 1990	To:	April 16, 2021
Requesting Agency:	Department of Transportation			
Vendor:	HDR Engineering, Inc.			

Please mark which of the following applies and complete Sections 'A' through 'M' below:	
	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
X	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	<p>Summarize scope of contract work.</p> <p>Mr. Schwartz will work for HDR as the Nevada DOT Highway Construction Crew Project Office Manager monitoring NDOT's contractor to assure compliance with the project plans, specifications, and safety requirements.</p>
B	<p>Document former job description.</p> <p>Assistant District Engineer: administering the construction and maintenance programs in rural Nevada, Winnemucca Sub-District.</p>
C	<p>Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?</p> <p>Yes, Mr. Schwartz has been working in Winnemucca since the late 1990's and worked as a Resident Engineer for numerous years in this area. Mr Schwartz is very familiar with NDOT Construction Documentation and policy. No, there is no clause in the contract for transfer of specialized knowledge of contracting agency.</p>

D	Explain why existing State employees within your agency cannot perform this function.
	Manpower shortage due to the increasing size of the NDOT work program and shortage of inspectors statewide.
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 – no relationship exists.
F	List contractors' hourly rate.
	\$52/hour
G	List the range of comparable State employee rates.
	Administrator I, Professional Engineer, Grade 45, Step 10 at \$50.27 per hour
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
I	Document justification for hiring contractor.
	Limited quality staff available.
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)
	June 14, 2022 through June 23, 2023.
L	Will the former employee be working full time or part time? If part time, how many hours?
	Full-time with seasonal layoffs
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:

DocuSigned by:
Kristina Swallow 05/06/2022
C43B12FC2C1E4FB... Head Authorizing Request Date

Purchasing Administrator Signature (if a Statewide Contract) Date

 5-27-22
Budget Analyst Signature Date

Clerk of the Board of Examiners Signature Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 16, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Lynnette Aaron, Executive Branch Budget Officer
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 Examiner's meeting.

**DEPARTMENT OF CONSERVATION & NATURAL RESOURCES –
DIVISION OF WATER RESOURCES**

Agenda Item Write-up:

Pursuant to NRS 353.268, the Division requests the Board's recommendation to the Interim Finance Committee an allocation of \$102,029 from the Interim Finance Committee Contingency Account to cover costs associated with the repair and maintenance of the South Fork Dam.

Additional Information:

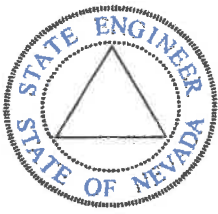
These additional funds will supplement the allocation received as part of AB465 in the 2021 Legislative session to address the safety and stability of the South Fork Dam. The repair of the South Fork Dam is needed to protect public safety and ensure the continued stability of this state owned dam. This project is currently under construction and will be completed the Fall of 2022.

Corresponding work program C59135 has been submitted to support this request.

Statutory Authority:
NRS 353.268

REVIEWED: LA

ACTION ITEM: _____



Nevada Division of
WATER RESOURCES

STATE OF NEVADA
Department of Conservation and Natural Resources


Steve Sisolak, *Governor*
Bradley Crowell, *Director*
Adam Sullivan, P.E., *State Engineer*

May 17, 2022

Memorandum

To: Susan Brown, Director
Governor's Finance Office

Through: Richard Jacobs, Executive Branch Budget Officer
Governor's Finance Office

From: Bradley Crowell, Director 
Department of Conservation and Natural Resources

Re: IFC Contingency Fund Request of \$102,029 – B/A 4171, Work Program C59135

The Division of Water Resources (Division) is requesting an allocation from the Interim Finance Committee (IFC) Contingency Fund for additional funds needed to complete the construction project at South Fork Dam. Due to increased construction costs and a shortfall in available funding, a portion of the repair project was removed from the contract in order for the Division to start construction to repair South Fork Dam.

The Division is requesting an allocation of \$102,029 to amend the contract to include the full project scope as outlined in the original bid documents. This amount will supplement the allocation the Division received as part of AB465 in the 2021 session to address the safety and stability of South Fork Dam. If these funds are approved, the total construction cost of this repair will be approximately \$1,699,999. This does not include any additional funds for unforeseen conditions that the contractor may encounter during the project, so the Division may need to request a subsequent IFC Contingency Fund allocation for unanticipated costs.

The repair of South Fork Dam is needed to protect public safety and ensure the continued stability of this state-owned high hazard dam. The project is currently under construction and will be completed this fall. We respectfully request submission of this request for the June Board of Examiners and Interim Finance Committee meetings. Corresponding work program C59135 has been submitted to support this request.

cc: Adam Sullivan, State Engineer, DCNR, NDWR
Christopher Thorson, Deputy Administrator, DCNR, NDWR

State of Nevada Work Program

WP Number: C59135

FY 2023

☐ Add Original Work Program

☒ XXX Modify Work Program

BUDGET DIVISION USE ONLY

DATE

APPROVED ON BEHALF OF
THE GOVERNOR BY

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
05/16/22	101	705	4171	DCNR - WATER RESOURCES

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	102,029	0	102,029
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		102,029		102,029
Total Budgetary & Revenue GLs					102,029		

Expenditures

CAT	Amount	CAT	Amount
15	102,029		
Sub Total Category Expenditures			102,029

Remarks

This work program requests an allocation from the Interim Finance Committee Contingency Fund to cover expenditures associated with the repair and maintenance of the South Fork dam.

Total Budgetary General Ledgers and Category Expenditures (AP)

102,029

kwilliam

Authorized Signature

05/16/22

Date

Controller's Office Approval

Does not require Interim Finance approval since This work program supports an Action Item request for appropriation from the Interim Finance Committee Contingency Fund.

Steve Sisolak
Governor




Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: June 7, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Richard Jacobs, Executive Branch Budget Officer 
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 CONSERVATION & NATURAL RESOURCES –
DIVISION OF FORESTRY**

Agenda Item Write-up:

Pursuant to NRS 353.268, the Division requests the Board's recommendation to the Interim Finance Committee for an allocation of \$5,935,293 from the Interim Finance Committee Contingency Account to cover costs associated with the emergency response expenses within the Nevada Division of Forestry fire suppression account.

Additional Information:

The Executive and Legislative branches of government have recognized the unpredictability of costs associated with emergency response activities, including wildland fire, flooding and other natural resource emergencies. The Division, in collaboration with the United States Forest Service, Bureau of Land Management, State and local cooperators, continues to work through the adjudication process for payments of costs incurred during previous extreme fire seasons.

This request will cover known actual expenses for fire, flood and other natural resource emergencies for state fiscal year 2022.

Statutory Authority:
NRS 353.268

REVIEWED: 

ACTION ITEM: _____

BRADLEY CROWELL, Director
Department of Conservation
And Natural Resources

STEVE SISOLAK
Governor

KACEY KC
State Forester Firewarden




STATE OF NEVADA
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
NEVADA DIVISION OF FORESTRY
2478 Fairview Drive
Carson City, Nevada 89701
Phone (775) 684-2500 Fax (775) 684-2570

June 7, 2022

MEMORANDUM

To: Susan Brown, Director
Governor's Finance Office

Through: Richard Jacobs
Executive Branch Budget Officer

From: Bradley Crowell, Director
Department of Conservation and Natural Resources 

Subject: IFC Contingency Fund Request of \$5,935,293 – B/A 4196, Work Program C59387

The Nevada Division of Forestry (NDF) is requesting an allocation from the Interim Finance Committee (IFC) Contingency Fund to cover emergency response expenses within the NDF Forest Fire Suppression account (B/A 4196). NDF is requesting \$5,935,293 to pay actual invoices ready for payment in Fiscal Year 2022.

The Executive and Legislative branches of government have recognized the unpredictability of costs associated with emergency response activities, including wildland fire, flooding, and other natural resource emergencies. The Division, in collaboration with the United States Forest Service, Bureau of Land Management, and State and Local cooperators, continues to work through the adjudication process for fire bills created during the previous extreme fire seasons.

This request will cover known actual expenses for fire, flood, and other natural resource emergencies for State Fiscal Year 2022.

cc: Kacey KC, State Forester Firewarden, DCNR, NDF
Dara Ludi, ASOIII, DCNR, NDF
Justin Luna, Program Analyst, LCB Fiscal Division

State of Nevada Work Program

WP Number: C59387

FY 2022

☐ Add Original Work Program

☒ **XXX** Modify Work Program

BUDGET DIVISION USE ONLY

DATE

APPROVED ON BEHALF OF

THE GOVERNOR BY

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
06/07/22	101	706	4196	DCNR - FORESTRY - FIRE SUPPRESSION

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	5,935,293	7,520,828	13,456,121
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		5,935,293		13,456,121
Total Budgetary & Revenue GLs					5,935,293		

Expenditures

CAT	Amount	CAT	Amount
10	5,935,293		
Sub Total Category Expenditures			5,935,293

Remarks

This work program requests Interim Finance Committee (IFC) Contingency Funds to cover the current Realized Funding deficit and pay actual outstanding fire bills.

Total Budgetary General Ledgers and Category Expenditures (AP)

5,935,293

pmisch

Authorized Signature

06/08/22

Date

Controller's Office Approval

Does not require Interim Finance approval since This work program supports an Action Item request for appropriation from the Interim Finance Committee Contingency Fund.

NV DCNR - Division of Forestry
Forest Fire Suppress / Emerg Response
B/A 4196
SFY22

CASH REC

	General Fund	FEMA Fire Assistance	Equipment Reimbursement	Prior Year Reimbursement	Rebate	Forest Fire Reimbursement	Other Reimbursement	Transfer From Interim Finance	Transfer From DEM	YTD ACTUAL	REVISED AUTHORITY	BSR
	2501	3576	4201	4203	4218	4219	4351	4654	4746	TOTAL	TOTAL	
REVENUE												
2501 General Fund Appropriation	4,439,179.00									4,439,179.00	4,439,179.00	4,439,179
2511 Balance Forward From Prior Year			425,000.00	370,153.00						795,153.00	795,153.00	795,153
3576 FEMA Fire Assistance		422,952.01								422,952.01	422,952.01	1,655,804
4201 Reimbursement			10,532.54							10,532.54	10,532.54	(945,427.46)
4203 Prior Year Reimbursement				876,880.40						876,880.40	876,880.40	3,112,827
4218 Rebate					771.05					771.05	771.05	0.05
4219 Forest Fire Reimbursement						29,175.71				29,175.71	29,175.71	1,055,471
4351 Other Reimbursement							14,684.15			14,684.15	14,684.15	9,841
4654 Trans From Interim Finance								7,520,828.00		7,520,828.00	7,520,828.00	4,843.15
4746 Trans From Emergency Mgmt									14,905.93	14,905.93	14,905.93	7,520,828
REVENUE TOTAL	4,439,179.00	422,952.01	435,532.54	1,247,033.40	771.05	29,175.71	14,684.15	7,520,828.00	14,905.93	14,125,061.79	14,125,061.79	17,305
EXPENDITURES												
01 Personnel Services	1,563,784.64									1,563,784.64	1,563,784.64	1,892,733
10 Fire Suppression Costs	662,179.23	422,952.01				9,524.21	14,684.15	9,344,805.83		10,444,149.43	10,444,149.43	10,946,281
15 Transfer to BU in 4185				380,081.26						380,081.26	380,081.26	475,386
18 Trfr - Fire Reimb for Veh Repairs			181,329.27							181,329.27	181,329.27	425,000
19 FEMA Fire Assistance Grants				866,852.14						-	-	425,000
02 Prior Year Claims	2,223,215.13		254,203.27		771.05			1,226,551.00	14,905.93	4,585,598.52	4,585,598.52	121,715
04 Reserve for IBU Future Year Funding										-	-	4,884,094
06 Reserve for Fleet Expenditures										-	-	(297,495.48)
07 Purchasing Assessment										-	-	371,490
08 Cost Allocation										-	-	425,000
EXPENDITURE TOTAL	4,439,179.00	422,952.01	435,532.54	1,247,033.40	771.05	29,175.71	14,684.15	10,571,360.83	14,905.93	17,175,594.82	17,175,594.82	7,154
Difference								(3,050,532.83)		(3,050,532.83)	(3,050,532.83)	(1,788.50)
								(3,050,532.83)		(3,050,532.83)	(3,050,532.83)	(2,387,544.38)

Realized Funding (3,050,532.83)
On Hold in Advantage (2,884,759.80) CAT 10
Shortfall (5,935,292.63)

Steve Sisolak
Governor




Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: June 8, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Melanie Young, Budget Administrator
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 an allocation of \$136,268 from the Interim Finance Contingency Account to reimburse Douglas, Lincoln, Nye, Carson City, Elko, Humboldt, and Pershing counties for costs associated with case related expenses for indigent defense services.

Additional Information:

The Department of Indigent Defense Services implemented regulations relating to indigent defense and the maximum contribution formula, which were approved at the October 22, 2021 Legislative Commission meeting. This request will reimburse costs for indigent defense case related expenses such as investigators, experts, interpreter fees, court reporter transcriptions, mental health evaluations, and social workers as provided for in the Financial Status Reports submitted by these counties. These costs were incurred during the time period of October 1, 2021 through March 30, 2022.

Statutory Authority:

BOE approval required pursuant to NRS 353.268.

REVIEWED: 



STATE OF NEVADA
DEPARTMENT OF INDIGENT DEFENSE SERVICES

896 W. Nye, Suite 202 | Carson City, NV 89703
(775) 687-8490 | www.dids.nv.gov

Memorandum

DATE: June 7, 2022

TO: Melanie B. Young, Budget Administrator, Governor's Finance Office
Susan Brown, Director, Governor's Finance Office

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

SUBJECT: Request for Contingency Funds to Reimburse *Davis* and non-*Davis* Counties

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 reimburse certain non-*Davis* and *Davis* counties pursuant to the maximum contribution formula of the Board on Indigent Defense Services.

In the *Davis* "Stipulated Consent Judgment," the State of Nevada agreed that effective representation shall include among other things, timely review of discovery, sufficient case investigation in order to determine the relative strengths and weaknesses of the state's case; and retention of qualified experts whenever necessary to provide effective representation. *Davis v. State*, "Stipulated Consent Judgment," p. 3, l. 16-23 (Aug 11, 2020). The Judgment bound the Board to eliminate economic disincentives to effective representation by requiring that contracts for public defense services shall provide a mechanism, which does not require judicial approval, for expert, investigative and other litigation support services. *Id.*, p. 11, l. 19-22.

The Board on Indigent Defense Services (BIDS) adopted regulations in response to the stipulated consent judgement and AB81(2019). The regulations require each county to create a Plan for the Provision of Indigent Defense Services and submit the Plan and the Budget for the Plan to the BIDS October Board Meeting. In addition, BIDS adopted regulations setting forth the maximum amount that each county will pay for the provision of indigent defense services. See NRS 180.320(3). The maximum contribution formula, contained in Section 16 of the BIDS Regulations, provides, in part, that the maximum contribution for case related expenses may be \$0 so long as the county, in its plan for the provision of indigent defense services, provides for a process to authorize case-related expenses for indigent defense attorneys that excludes the

judiciary. The purpose of this subsection was to comply with the *Davis* “Stipulated Consent Judgment” by ensuring that indigent defense providers have access to investigators and experts that are necessary to provide effective representation without going through the judiciary.

At the October 6, 2021, BIDS Meeting, the Board approved the Elko, Humboldt, Pershing, Douglas, Lincoln and Nye County Plans and made a motion for the department to go to BOE and IFC for Contingency Funding for the County Plans, as reimbursements were needed. The Carson City Plan, with a similar motion, was approved at the November 17, 2021 BIDS Meeting.

In their plans for the provision of indigent defense services, all counties have provided for a case-related expense approval process which excludes the judiciary, thus complying with Section 16(3) and Section 25.

The counties have reported the following case-related expenses for which they are seeking reimbursement:

Non-Davis Counties

- Carson City: \$38,142
- Elko: \$49,059
- Humboldt: \$4,778
- Pershing: \$197

Davis Counties

- Douglas County: \$19,529
- Lincoln County: \$6,163
- Nye County: \$18,400

We respectfully request submission of this request in the amount of \$136,268 to the next Board of Examiners and Interim Finance Committee meetings. Work program 58945 will be submitted for this request.

State of Nevada Work Program

WP Number: C58945

FY 2022

<input type="checkbox"/> Add Original Work Program	<input type="checkbox"/> XXX Modify Work Program	BUDGET DIVISION USE ONLY
		DATE _____
		APPROVED ON BEHALF OF _____
		THE GOVERNOR BY _____

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
04/25/22	101	111	1008	DEPARTMENT OF INDIGENT DEFENSE SERVICES

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	136,268	88,370	224,638
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		136,268		224,638
Total Budgetary & Revenue GLs					136,268		

Expenditures			
CAT	Amount	CAT	Amount
33	44,092		
34	92,176		

Total Budgetary General Ledgers and Category Expenditures (AP)	136,268	
		<div style="border-bottom: 1px solid black; display: inline-block; width: 150px;">mryba</div> Authorized Signature
		<div style="border-bottom: 1px solid black; display: inline-block; width: 100px;">06/08/22</div> Date
		<div style="border-bottom: 1px solid black; display: inline-block; width: 150px;"></div> Controller's Office Approval

Does not require Interim Finance approval since IFC Action Item from non restricted contingency funds

Steve Sisolak
Governor

Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator



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: February 17, 2022

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

From: Jennifer Hamilton, Executive Branch Budget Officer
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.

OFFICE OF THE ATTORNEY GENERAL

Agenda Item Write-up:

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

Claimant: Jazmin Melgar
Claim No: TC20094
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

Claimant: Douglas Melgar
Claim No: TC20095
Settlement Amount: \$91,152.18
Date of Loss: November 9, 2013

Claimant: Estate of Helen Liu
Claim No: TC20096
Settlement Amount: \$25,489.27
Date of Loss: November 9, 2013

Claimant: Hui Liu
Claim No: TC20097
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

Claimant: Lianfen Xu
Claim No: TC20098
Settlement Amount: \$95,000
Date of Loss: November 9, 2013

These claims will be paid directly to counsel:

H&P Law
8950 W. Tropicana Ave Ste 1
Las Vegas NV 89147

Additional Information:

A settlement agreement and release of all claims has been entered for the total amount of \$401,641.45 as defined in each claim outlined above.

Statutory Authority:

SAM 2905 and NRS 41.036

<p>REVIEWED: _____</p> <p>ACTION ITEM: _____</p>
--

AARON D. FORD
Attorney General

KYLE E.N. GEORGE
First Assistant Attorney General

CHRISTINE JONES BRADY
Second Assistant Attorney General



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL
100 North Carson Street
Carson City, Nevada 89701

JESSICA L. ADAIR
Chief of Staff

LESLIE NINO PIRO
General Counsel

HEIDI PARRY STERN
Solicitor General

MEMORANDUM

To: Jennifer Hamilton, Executive Branch Budget Officer
From: Nancy Katafias, State Tort Claims Manager
Subject: Tort Claim Submittal for the June 14, 2022, BOE Agenda
Date: May 9, 2022

Please find attached 5 claims for submittal and approval for the June 14, 2022, BOE agenda. Upon BOE approval, these claims will be paid out of budget 1348/category 15.

Plaintiff: Jazmin Melgar
Claim No.: TC 20094
Payment: \$95,000.00

Plaintiff: Douglas Melgar
Claim No.: TC 20095
Payment: \$91,152.18

Plaintiff: Estate of Helen Liu
Claim No.: TC 20096
Payment: \$25,489.27

Plaintiff: Hui Liu
Claim No.: TC 20097
Payment: \$95,000.00

Plaintiff: Lianfen Xu
Claim No.: TC 20098
Payment: \$95,000.00

Payable to Counsel:
H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

TORT CLAIM RECOMMENDATION

DATE: April 22, 2022
CLAIMANT: Jazmin Melgar
CLAIM NUMBER: TC20094
DATE OF LOSS: November 9, 2018
AGENCY: NDOT

DISCUSSION

In the lawsuit filed against the State of Nevada/Department of Transportation, through counsel, it is alleged Helen Liu and Jazmin Melgar were crossing Blue Diamond Road at its intersection with Cimarron Road. There were no marked sidewalks or traffic signals. They were both struck by a vehicle and Helen Liu (14 years old) died due to her injuries and Jazmin Melgar (13 years old) was injured. Counsel has alleged that lighting and signage was not adequate, and the State breeched its duty to maintain a safe roadway.

Prior to this tragic incident, the NDOT had studied the intersection and concluded a traffic signal was not feasible. Following this incident, the NDOT installed a signal and marked crosswalk.

Claims have been submitted by Jazmin Melgar for personal injuries, Douglas Melgar for special damages related to medical expenses incurred by his daughter, the Estate of Helen Liu for final medical expenses and funeral costs, Hui Liu for the death of his daughter, and Lianfen Xu for the death of her daughter.

In July 2021, The NDOT Motion for Summary Judgment which argued defenses of sovereign and discretionary immunity was not granted and a two-week jury trial for this case was set to begin on Monday April 18, 2022, in Las Vegas.

In July 2017, Offers of Judgment were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Estate of Helen Liu	\$99,999.99
Hui Liu, father of Helen Liu	\$99,999.99
Lianfen Xu, mother of Helen Liu	\$99,999.99

In April 2018 and January 2019, Offers of Judgement were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Jazmin Melgar	\$99,999.99
Douglas Melgar	\$79,885.18

Because these Offers of Judgement were not accepted, counsel for the plaintiffs contended that they would be entitled to attorney's fees, costs, and interest if they received larger damage amounts by a jury.

The claim against the driver of the vehicle that struck the two girls was settled at policy limits. The claim against Clark County is still in litigation.

To avoid the costs of trial and potential adverse judgements against the NDOT, settlement was reached just prior to trial.

RECOMMENDATION

It is recommended that the claim for Jazmin Melgar be paid in the amount of \$95,000.00.

RECOMMENDATION: PAY

G/L 7350

H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

Approved:

Nancy Katafias

April 22, 2022

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Leslie Nino Piro

May 4, 2022

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

TORT CLAIM RECOMMENDATION

DATE: April 22, 2022
CLAIMANT: Douglas Melgar
CLAIM NUMBER: TC20095
DATE OF LOSS: November 9, 2013
AGENCY: NDOT

DISCUSSION

In the lawsuit filed against the State of Nevada/Department of Transportation, through counsel, it is alleged Helen Liu and Jazmin Melgar were crossing Blue Diamond Road at its intersection with Cimarron Road. There were no marked sidewalks or traffic signals. They were both struck by a vehicle and Helen Liu (14 years old) died due to her injuries and Jazmin Melgar (13 years old) was injured. Counsel has alleged that lighting and signage was not adequate, and the State breeched its duty to maintain a safe roadway.

Prior to this tragic incident, the NDOT had studied the intersection and concluded a traffic signal was not feasible. Following this incident, the NDOT installed a signal and marked crosswalk.

Claims have been submitted by Jazmin Melgar for personal injuries, Douglas Melgar for special damages related to medical expenses incurred by his daughter, the Estate of Helen Liu for final medical expenses and funeral costs, Hui Liu for the death of his daughter, and Lianfen Xu for the death of her daughter.

In July 2021, The NDOT Motion for Summary Judgment which argued defenses of sovereign and discretionary immunity was not granted and a two-week jury trial for this case was set to begin on Monday April 18, 2022, in Las Vegas.

In July 2017, Offers of Judgment were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Estate of Helen Liu	\$99,999.99
Hui Liu, father of Helen Liu	\$99,999.99
Lianfen Xu, mother of Helen Liu	\$99,999.99

In April 2018 and January 2019, Offers of Judgement were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Jazmin Melgar	\$99,999.99
Douglas Melgar	\$79,885.18

Because these Offers of Judgement were not accepted, counsel for the plaintiffs contended that they would be entitled to attorney's fees, costs, and interest if they received larger damage amounts by a jury.

The claim against the driver of the vehicle that struck the two girls was settled at policy limits. The claim against Clark County is still in litigation.

To avoid the costs of trial and potential adverse judgements against the NDOT, settlement was reached just prior to trial.

RECOMMENDATION

It is recommended that the claim for Douglas Melgar be paid in the amount of \$91,152.18.

RECOMMENDATION: PAY

G/L 7350

H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

Approved:

Nancy Katafias

April 22, 2022

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Leslie Nino Piro

May 4, 2022

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

TORT CLAIM RECOMMENDATION

DATE: April 22, 2022
CLAIMANT: The Estate of Helen Liu
CLAIM NUMBER: TC20096
DATE OF LOSS: November 9, 2013
AGENCY: NDOT

DISCUSSION

In the lawsuit filed against the State of Nevada/Department of Transportation, through counsel, it is alleged Helen Liu and Jazmin Melgar were crossing Blue Diamond Road at its intersection with Cimarron Road. There were no marked sidewalks or traffic signals. They were both struck by a vehicle and Helen Liu (14 years old) died due to her injuries and Jazmin Melgar (13 years old) was injured. Counsel has alleged that lighting and signage was not adequate, and the State breached its duty to maintain a safe roadway.

Prior to this tragic incident, the NDOT had studied the intersection and concluded a traffic signal was not feasible. Following this incident, the NDOT installed a signal and marked crosswalk.

Claims have been submitted by Jazmin Melgar for personal injuries, Douglas Melgar for special damages related to medical expenses incurred by his daughter, the Estate of Helen Liu for final medical expenses and funeral costs, Hui Liu for the death of his daughter, and Lianfen Xu for the death of her daughter.

In July 2021, The NDOT Motion for Summary Judgment which argued defenses of sovereign and discretionary immunity was not granted and a two-week jury trial for this case was set to begin on Monday April 18, 2022, in Las Vegas.

In July 2017, Offers of Judgment were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Estate of Helen Liu	\$99,999.99
Hui Liu, father of Helen Liu	\$99,999.99
Lianfen Xu, mother of Helen Liu	\$99,999.99

In April 2018 and January 2019, Offers of Judgement were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Jazmin Melgar	\$99,999.99
Douglas Melgar	\$79,885.18

Because these Offers of Judgement were not accepted, counsel for the plaintiffs contended that they would be entitled to attorney's fees, costs, and interest if they received larger damage amounts by a jury.

The claim against the driver of the vehicle that struck the two girls was settled at policy limits. The claim against Clark County is still in litigation.

To avoid the costs of trial and potential adverse judgements against the NDOT, settlement was reached just prior to trial.

RECOMMENDATION

It is recommended that the claim for the Estate of Helen Liu be paid in the amount of \$25,489.27.

RECOMMENDATION: PAY

G/L 7350

H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

Approved:

Nancy Katafias

April 22, 2022

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Leslie Nino Piro

May 4, 2022

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

TORT CLAIM RECOMMENDATION

DATE: April 22, 2022
CLAIMANT: Hui Liu
CLAIM NUMBER: TC20097
DATE OF LOSS: November 9, 2013
AGENCY: NDOT

DISCUSSION

In the lawsuit filed against the State of Nevada/Department of Transportation, through counsel, it is alleged Helen Liu and Jazmin Melgar were crossing Blue Diamond Road at its intersection with Cimarron Road. There were no marked sidewalks or traffic signals. They were both struck by a vehicle and Helen Liu (14 years old) died due to her injuries and Jazmin Melgar (13 years old) was injured. Counsel has alleged that lighting and signage was not adequate, and the State breeched its duty to maintain a safe roadway.

Prior to this tragic incident, the NDOT had studied the intersection and concluded a traffic signal was not feasible. Following this incident, the NDOT installed a signal and marked crosswalk.

Claims have been submitted by Jazmin Melgar for personal injuries, Douglas Melgar for special damages related to medical expenses incurred by his daughter, the Estate of Helen Liu for final medical expenses and funeral costs, Hui Liu for the death of his daughter, and Lianfen Xu for the death of her daughter.

In July 2021, The NDOT Motion for Summary Judgment which argued defenses of sovereign and discretionary immunity was not granted and a two-week jury trial for this case was set to begin on Monday April 18, 2022, in Las Vegas.

In July 2017, Offers of Judgment were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Estate of Helen Liu	\$99,999.99
Hui Liu, father of Helen Liu	\$99,999.99
Lianfen Xu, mother of Helen Liu	\$99,999.99

In April 2018 and January 2019, Offers of Judgement were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Jazmin Melgar	\$99,999.99
Douglas Melgar	\$79,885.18

Because these Offers of Judgement were not accepted, counsel for the plaintiffs contended that they would be entitled to attorney's fees, costs, and interest if they received larger damage amounts by a jury.

The claim against the driver of the vehicle that struck the two girls was settled at policy limits. The claim against Clark County is still in litigation.

To avoid the costs of trial and potential adverse judgements against the NDOT, settlement was reached just prior to trial.

RECOMMENDATION

It is recommended that the claim for the Hui Liu be paid in the amount of \$95,000.00

RECOMMENDATION: PAY

G/L 7350

H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

Approved:

Nancy Katafias

April 22, 2022

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Leslie Nino Piro

May 4, 2022

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

TORT CLAIM RECOMMENDATION

DATE: April 22, 2022
CLAIMANT: Lianfen Xu
CLAIM NUMBER: TC20098
DATE OF LOSS: November 9, 2013
AGENCY: NDOT

DISCUSSION

In the lawsuit filed against the State of Nevada/Department of Transportation, through counsel, it is alleged Helen Liu and Jazmin Melgar were crossing Blue Diamond Road at its intersection with Cimarron Road. There were no marked sidewalks or traffic signals. They were both struck by a vehicle and Helen Liu (14 years old) died due to her injuries and Jazmin Melgar (13 years old) was injured. Counsel has alleged that lighting and signage was not adequate, and the State breeched its duty to maintain a safe roadway.

Prior to this tragic incident, the NDOT had studied the intersection and concluded a traffic signal was not feasible. Following this incident, the NDOT installed a signal and marked crosswalk.

Claims have been submitted by Jazmin Melgar for personal injuries, Douglas Melgar for special damages related to medical expenses incurred by his daughter, the Estate of Helen Liu for final medical expenses and funeral costs, Hui Liu for the death of his daughter, and Lianfen Xu for the death of her daughter.

In July 2021, The NDOT Motion for Summary Judgment which argued defenses of sovereign and discretionary immunity was not granted and a two-week jury trial for this case was set to begin on Monday April 18, 2022, in Las Vegas.

In July 2017, Offers of Judgment were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Estate of Helen Liu	\$99,999.99
Hui Liu, father of Helen Liu	\$99,999.99
Lianfen Xu, mother of Helen Liu	\$99,999.99

In April 2018 and January 2019, Offers of Judgement were issued as follows and were inclusive of fees and costs; these Offers of Judgement were not accepted:

Jazmin Melgar	\$99,999.99
Douglas Melgar	\$79,885.18

Because these Offers of Judgement were not accepted, counsel for the plaintiffs contended that they would be entitled to attorney's fees, costs, and interest if they received larger damage amounts by a jury.

The claim against the driver of the vehicle that struck the two girls was settled at policy limits. The claim against Clark County is still in litigation.

To avoid the costs of trial and potential adverse judgements against the NDOT, settlement was reached just prior to trial.

RECOMMENDATION

It is recommended that the claim for the Lianfen Xu be paid in the amount of \$95,000.00

RECOMMENDATION: PAY

G/L 7350

H&P Law
8950 W Tropicana Ave Ste 1
Las Vegas NV 89147

Approved:

Nancy Katafias

April 22, 2022

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Leslie Nino Piro

May 4, 2022

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

1 **SETTLEMENT AGREEMENT AND RELEASE OF ALL CLAIMS**

2 This Settlement Agreement and Release of All Claims ("Settlement Agreement") is made and
3 entered into by and between Plaintiffs: (1) HUI LIU, individually and as natural parent and guardian of
4 HELEN LIU; (2) LIANFEN XU, individually and as natural parent and guardian of HELEN LIU;
5 (3) BINGHU REN, as the personal representative of the ESTATE OF HELEN LIU; (4) JAZMIN
6 MELGAR; and (5) DOUGLAS MELGAR ("PLAINTIFFS"); and THE STATE OF NEVADA, ON
7 RELATION OF ITS DEPARTMENT OF TRANSPORTATION ("DEFENDANT STATE").

8 WHEREAS, on or about August 11, 2015, Plaintiffs filed a Complaint within the Eighth Judicial
9 District Court of the State of Nevada, in and for Clark County, Nevada, initiating Case No. A-15-72294-
10 C, entitled: "*HUI LIU, individually and as natural parent and guardian of HELEN LIU; LIANFEN XU,*
11 *individually and as natural parent and guardian of HELEN LIU; BINGHU REN, as the personal*
12 *representative of the ESTATE OF HELEN LIU; JAZMIN MELGAR, a minor, by and through her natural*
13 *parent and guardian, DOUGLAS MELGAR; and DOUGLAS MELGAR, Plaintiffs vs. STATE OF*
14 *NEVADA; COUNTY OF CLARK; DOES I THROUGH XX; and ROE CORPORATIONS I through XX,*
15 *inclusive, Defendants*"; and

16 WHEREAS, on or about April 26, 2016, the PLAINTIFFS filed their Amended Complaint,
17 entitled: "*HUI LIU, individually and as natural parent and guardian of HELEN LIU; LIANFEN XU,*
18 *individually and as natural parent and guardian of HELEN LIU; BINGHU REN, as the personal*
19 *representative of the ESTATE OF HELEN LIU; JAZMIN MELGAR, a minor, by and through her natural*
20 *parent and guardian, DOUGLAS MELGAR; and DOUGLAS MELGAR, Plaintiffs vs. STATE OF*
21 *NEVADA, on relation of its DEPARTMENT OF TRANSPORTATION; COUNTY OF CLARK; DOES I*
22 *THROUGH XX; and ROE CORPORATIONS I through XX, inclusive, Defendants*"; and

23 WHEREAS, on or about September 7, 2018, the PLAINTIFFS filed their Second Amended
24 Complaint, entitled: "*HUI LIU, individually and as natural parent and guardian of HELEN LIU;*
25 *LIANFEN XU, individually and as natural parent and guardian of HELEN LIU; BINGHU REN, as the*
26 *personal representative of the ESTATE OF HELEN LIU; JAZMIN MELGAR; and DOUGLAS MELGAR,*
27 *Plaintiffs vs. STATE OF NEVADA, on relation of its DEPARTMENT OF TRANSPORTATION; COUNTY*
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1 *OF CLARK; DOES I THROUGH XX; and ROE CORPORATIONS I through XX, inclusive, Defendants"*
2 *("Subject Litigation"); and*

3 WHEREAS, the Subject Litigation grounded in allegations of negligence, and wrongful death
4 brought by the PLAINTIFFS against DEFENDANT STATE, and DEFENDANT CLARK COUNTY,
5 arises from a vehicular/pedestrian accident occurring on the night of November 9, 2013, at or near the
6 intersection of Blue Diamond Road, and Cimarron Road, located in Clark County, Nevada, at which time,
7 pedestrians Decedent HELEN LIU and Plaintiff JAZMIN MELGAR were struck by a vehicle, while they
8 attempted to cross Blue Diamond Road ("Subject Accident"); and

9 WHEREAS, the PLAINTIFFS and DEFENDANT STATE desire to resolve and settle all existing
10 and potential disputes between them, that have and could have been raised in the Subject Litigation,
11 without an admission of liability made by DEFENDANT STATE.

12 NOW, THEREFORE, in consideration of the mutual covenants and other good and valuable
13 consideration as set forth herein, the PLAINTIFFS and DEFENDANT STATE agree as follows:

14 **I. SETTLEMENT PAYMENT AND RELEASE OF CLAIMS:**

15 For and in consideration of:

16 1. DEFENDANT STATE'S payment to PLAINTIFF HUI LIU, *individually and as*
17 *natural parent and guardian of HELEN LIU, the sum of NINETY-FIVE THOUSAND AND 00/100*
18 *DOLLARS (\$95,000.00) made payable to H&P LAW; and*

19 2. DEFENDANT STATE'S payment to PLAINTIFF LIANFEN XU, *individually*
20 *and as natural parent and guardian of HELEN LIU, the sum of NINETY-FIVE THOUSAND AND 00/100*
21 *DOLLARS (\$95,000.00) made payable to H&P LAW; and*

22 3. DEFENDANT STATE'S payment to PLAINTIFF JAZMIN MELGAR, *the sum*
23 *of NINETY-FIVE THOUSAND AND 00/100 DOLLARS (\$95,000.00) made payable to H&P LAW; and*

24 4. DEFENDANT STATE'S payment to PLAINTIFF BINGHU REN, as the personal
25 representative of the ESTATE OF HELEN LIU, the sum of *TWENTY-FIVE THOUSAND, FOUR*
26 *HUNDRED EIGHTY-NINE DOLLARS AND TWENTY-SEVEN CENTS (\$25, 489.27); and*

27 5. DEFENDANT STATE'S payment to PLAINTIFF DOUGLAS MELGAR, the
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1 sum of *NINETY-ONE THOUSAND, ONE HUNDRED AND FIFTY- TWO DOLLARS AND EIGHTEEN*
2 *CENTS (\$91,152.18); and*

3 6. The parties' signatures as well as those of their authorized representatives to this
4 Settlement Agreement and Release of All Claims, and the Court's issuance of an order granting
5 DEFENDANT STATE's Motion for Good Faith Settlement, and finding that the settlement entered into
6 between DEFENDANT STATE and the PLAINTIFFS has been reached in good faith, and pursuant to
7 NRS 17.245 (1) (b), discharging DEFENDANT STATE from all liability for contribution and
8 indemnification to any other tortfeasor in this matter, and ordering that any and all claims for
9 contribution and indemnification issued by any tortfeasor pertaining to this matter, are forever barred.

10 The PLAINTIFFS hereby fully and forever release, acquit and discharge DEFENDANT STATE,
11 together with its administrators, agencies, agents, assignees, attorneys, contractors, departments,
12 directors, divisions, employees, employers, executors, heirs, insurers, officers, principals, representatives,
13 servants, subrogees, subsidiaries, successors, spouses, former spouses, and future spouses, of and from
14 any and all attorney's fees, causes of action, claims, costs, damages, expenses, indemnities, liabilities,
15 liens, including but not limited to medical liens, Medicare liens, Medicaid liens, attorney's liens, towing
16 liens, storage liens, and liens and obligations of every kind and nature, in law, equity or otherwise, filed
17 or otherwise, presently known and unknown, suspected and unsuspected, disclosed and undisclosed,
18 which PLAINTIFFS now have or may hereafter acquire by reason of any injuries, losses, and damages,
19 actual and consequential, arising out of or in any way related to the subject accident, occurrence, casualty,
20 event and/or series of events arising from the vehicular/pedestrian accident, alleged and which could have
21 been alleged by the PLAINTIFFS within the Subject Litigation, and relating to the vehicular/pedestrian
22 accident alleged by PLAINTIFFS to have occurred on or about November 9, 2013, in Clark County,
23 Nevada; and

24 PLAINTIFFS expressly understand and recognize that their injuries, damages, and losses may not
25 be fully known, and may be more numerous and more serious than now expected. PLAINTIFFS
26 specifically recognize and accept the risk of the possible existence of any presently unknown and
27 unanticipated injuries and damages resulting from the subject vehicular/pedestrian accident, and which
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1 may be discovered after the execution of this Settlement Agreement and Release of All Claims, and/or
2 the possibility that a known injury and damage may be or become more serious than now expected.

3 The aforementioned parties understand and acknowledge that the payment and receipt of the
4 aforementioned settlement proceeds shall constitute a full and complete satisfaction of all of the parties'
5 alleged, existing and potential disputes and claims that the aforementioned parties have and could have
6 raised against one another relative to the Subject Litigation and Subject Accident and concerning all
7 matters relating to their subject matters.

8 Further, PLAINTIFFS and DEFENDANT STATE hereby fully and forever release, acquit and
9 discharge one another, as well as their administrators, agencies, agents, assignees, attorneys, contractors,
10 departments, directors, divisions, employees, employers, executors, heirs, insurers, officers, principals,
11 representatives, servants, subrogees, subsidiaries, successors, spouses, former spouses, and future
12 spouses, of and from any and all attorney's fees, causes of action, claims, costs, damages, expenses,
13 indemnities, liabilities, liens, including but not limited to medical liens, Medicare liens, Medicaid liens,
14 attorney's liens, towing liens, storage liens, and obligations of every kind and nature, in law, equity or
15 otherwise, filed or otherwise, presently known and unknown, suspected and unsuspected, disclosed and
16 undisclosed, which they now have or may hereafter acquire by reason of any injuries, losses, and
17 damages, actual and consequential, arising out of or in any way related to the Subject Accident,
18 occurrence, casualty, event and/or series of events arising from the vehicular accident alleged by
19 PLAINTIFFS to have occurred on or about November 9, 2013, in Clark County, Nevada.

20 **II. DISMISSAL OF PLAINTIFFS' ACTION AGAINST DEFENDANT STATE, WITH**
21 **PREJUDICE, AND DISMISSAL OF DEFENDANT STATE'S COUNTER-CLAIM**
AGAINST PLAINTIFF LIANFEN XU, WITH PREJUDICE:

22 This Settlement Agreement and Release of All Claims is expressly contingent upon the dismissal
23 with prejudice of the Subject Action, as to DEFENDANT STATE, and is expressly contingent upon the
24 Court's issuance of an Order finding the settlement to be in good faith, and finding that the settlement
25 entered into between DEFENDANT STATE and the PLAINTIFFS has been reached in good faith, and
26 pursuant to NRS 17.245 (1)(b), discharging DEFENDANT STATE from all liability for contribution and
27 indemnification to any other tortfeasor in this matter, and ordering that any and all claims for contribution
28

1 and indemnification issued by any tortfeasor pertaining to this matter, are forever barred, and finding that
2 that each party hereto shall bear their own costs and attorney's fees.

3 **III. NO ADMISSIONS:**

4 It is understood and agreed by the parties hereto that this Settlement Agreement and Release of
5 All Claims represents a compromise and settlement of various matters, and that the promises of payment
6 made in consideration of this Settlement Agreement and Release of All Claims shall not be construed to
7 be an admission of any liability or obligation by any party hereto.

8 **IV. TAXES:**

9 DEFENDANT STATE shall not withhold any amounts for taxes or social security or other
10 deductions from the Settlement Payments made pursuant to this Settlement Agreement and Release of
11 All Claims. PLAINTIFFS shall consult with their own certified public accountants and/or tax attorneys
12 and shall be responsible for all taxes, if any, which may be due on the Settlement Payments.

13 **V. OTHER BENEFITS:**

14 Except as specifically set forth in this Settlement Agreement and Release of All Claims,
15 PLAINTIFFS shall be entitled to no other benefits or other remuneration or compensation in the
16 settlement of their claims against DEFENDANT STATE, arising from and related to the matters that
17 have and could have been raised in the Subject Litigation, and concerning all matters relating to their
18 subject matters, and relating to any and all disputes between the parties to this Settlement Agreement and
19 Release of all Claims.

20 **VI. LIENS:**

21 It is expressly understood and agreed that PLAINTIFFS shall be solely responsible for the
22 satisfaction and payment of any and all liens which presently exist or may exist in the future as a result
23 of the matters referred to in the Subject Litigation, including but not limited to liens for medical treatment,
24 Medicare liens, Medicaid liens, attorney's liens, and storage liens arising out of the subject accident which
25 constitutes the subject matter of the Subject Litigation. PLAINTIFFS covenant and agree to defend,
26 indemnify, and hold harmless, each party, person, and entity released pursuant to the terms of this
27 Settlement Agreement and Release of All Claims, including but not limited to DEFENDANT STATE,
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1 relative to any and all claims relating to liens which have been and may be brought against the parties,
2 persons, and entities released herein.

3 **VII. HOLD HARMLESS AND INDEMNIFICATION:**

4 PLAINTIFFS recognize that other persons and entities may possess certain rights to
5 reimbursement or payment from the proceeds of this settlement. PLAINTIFFS covenant and agree to
6 protect, hold harmless, defend and indemnify DEFENDANT STATE, and all other persons and entities
7 herein released of and from any losses, liabilities, claims, expenses, demands, and causes of action of any
8 kind or character, including claims for attorney's fees, court costs, and liens of any nature, including but
9 not limited to medical liens, Medicare liens, Medicaid liens, attorney's liens, and storage liens, arising
10 from or through the assertions made by any strangers hereto of a claim or claims connected with the
11 subject matter of the Subject Litigation and this Settlement Agreement and Release of All Claims, and or
12 connected with and incurred through any breach by PLAINTIFFS of their obligations, warranties and
13 representations herein contained.

14 PLAINTIFFS further recognize that other persons and entities may possess certain rights to
15 reimbursement and/or payments from the proceeds of this settlement, and therefore, PLAINTIFFS
16 covenant and agree to indemnify, defend, and hold harmless, DEFENDANT STATE, and all other
17 persons and entities herein released, of and from any and all efforts at reimbursement including direct,
18 independent and private causes of action, subrogation claims, intervention claims, unperfected claims,
19 liens, offsets against any monies sought, including attorney's fees and costs incurred as a result thereof,
20 by any persons and entities claiming a right to reimbursement and payment from the proceeds of this
21 settlement, including but not limited to any and all claims seeking penalties provided for by law for failure
22 to honor any obligations related to the settlement payments effected by this Settlement Agreement and
23 Release of All Claims.

24 **VIII. ATTORNEY'S FEES AND COSTS:**

25 Each party to this Settlement Agreement and Release of All Claims shall pay their own attorney's
26 fees and costs arising out of or in any way related to and/or connected with the Subject Litigation, and
27 Subject Accident.
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1 **IX. ASSIGNMENT:**

2 PLAINTIFFS represent that they have not previously assigned any claims, demands, actions
3 and/or causes of action arising out of or in any way related to the Subject Litigation.

4 **X. APPLICABLE LAW:**

5 This Settlement Agreement and Release of All Claims shall be deemed to have been entered into
6 and shall be construed and enforced in accordance with the laws of the State of Nevada, as applied to
7 contracts made and to be performed entirely within Nevada. The parties hereto consent to the exclusive
8 jurisdiction of the Eighth Judicial District Court of the State of Nevada, in and for Clark County, Nevada
9 for the enforcement of this Agreement.

10 **XI. TERMS:**

11 Whenever the singular is used in this Settlement Agreement and Release of All Claims, it includes
12 the plural. Whenever the feminine gender is used, it includes the male and neuter gender. Whenever the
13 male is used, it includes the female and neuter gender. Whenever the neuter gender is used, it includes
14 the male and female genders. Whenever the word "Complaint" is used, it includes any and all amended
15 complaints and amendments to complaints. Whenever the word "lien" is used, it includes any and all
16 liens of any type and kind, including but not limited to those provided by law and by contract.

17 **XII. SUCCESSORS AND ASSIGNS:**

18 This Settlement Agreement and Release of All Claims shall inure to the benefit of each party and
19 to their affiliates, agencies, agents, assigns, attorneys, contractors, departments, divisions, heirs, officers,
20 directors, employees, independent representatives, parent corporations, partners, personal
21 representatives, servants, shareholders, spouses, former spouses, future spouses, subsidiary corporations,
22 and successors.

23 **XIII. SEVERABILITY:**

24 The illegality or invalidity of any provision or portion of this Settlement Agreement and Release
25 of All Claims shall not affect the validity of the remainder of the Settlement Agreement, and this
26 Settlement Agreement shall be construed as if such provision did not exist. The unenforceability of such
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1 provision shall not be held to render any other provision or provisions of this Settlement Agreement
2 unenforceable.

3 **XIV. BREACH OF SETTLEMENT AGREEMENT AND RELEASE OF ALL CLAIMS:**

4 The parties hereto further understand and agree that in the event of any breach of this Settlement
5 Agreement and Release of All Claims, the prevailing party in any action to enforce this Settlement
6 Agreement shall be entitled to an award of reasonable attorney's fees and costs.

7 **XV. ENTIRETY OF AGREEMENT:**

8 The parties hereto have carefully read this Settlement Agreement and Release of All Claims in its
9 entirety before signing the same, and it is understood by the parties hereto that this Settlement Agreement
10 constitutes the entire agreement of the parties hereto and such is intended as a complete and exclusive
11 statement of the promises, representations, negotiations, discussions, and other agreements that may have
12 been made in connection with the subject matter hereof. This Settlement Agreement contains the entire
13 agreement between the parties hereto and all the terms and provisions of this Settlement Agreement are
14 contractual and are not merely recitals. This Settlement Agreement is signed and executed voluntarily
15 and without reliance upon any statements or representations not specifically set forth therein. No
16 modification or amendment to this Settlement Agreement shall be binding upon the parties unless the
17 same is in writing and signed by the respective parties hereto, and their counsel.

18 **XVI. AUTHORITY TO EXECUTE:**

19 The parties hereto represent that they have the authority to execute this Settlement Agreement and
20 Release of All Claims on behalf of the persons and entities on whose behalf they are signing. The parties
21 hereto further represent that the signatures on this Settlement Agreement are the genuine, usual and
22 customary signatures of the persons executing this Settlement Agreement, and are fully binding on such
23 persons and entities, and each person signing is legally and mentally competent to sign this Settlement
24 Agreement, and is fully authorized by law to bind himself, herself, itself, or the principal on whose behalf
25 they are signing. The parties hereto may execute this Settlement Agreement in counterparts.

26 ///
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28

1 WHEREFORE, THE FOLLOWING PERSONS AND ENTITIES FREELY AND
2 VOLUNTARILY SIGN THIS SETTLEMENT AGREEMENT AND RELEASE OF ALL CLAIMS ON
3 THE DATES INDICATED BELOW:

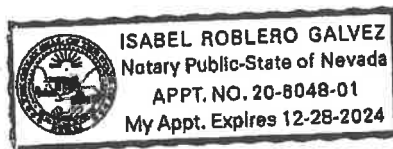
4 DATED this 29th day of April, 2022.

5 HUI LIU, individually, and as a natural parent and guardian
6 of HELEN LIU

7
8 By: Hui Liu
9 HUI LIU

10 STATE OF Nevada)
11 COUNTY OF Clark) ss.

12 On this 29th day of April, 2022, before me the undersigned, a Notary
13 Public in and for said County and State, appeared HUI LIU, known to me, or proven to me by reliable
14 evidence, to be the person who executed the above and foregoing instrument, and who acknowledged to
15 me that this instrument is freely and voluntarily executed for the purposes therein mentioned.



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Isabel Roblero
NOTARY PUBLIC

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DATED this 3 day of May, 2022.

LIANFEN XU, individually, and as a natural parent and guardian of HELEN LIU

By: Lianfen Xu
LIANFEN XU

1 DATED this 3rd day of May, 2022.

2
3 BINGHU REN, as the personal representative of the
4 ESTATE OF HELEN LIU

5
6 By: [Signature]
7 BINGHU REN

8 STATE OF Nevada }
9 COUNTY OF Clark } ss.

10 On this 3rd day of May, 2022, before me the undersigned, a Notary
11 Public in and for said County and State, appeared BINGHU REN, known to me, or proven to me by
12 reliable evidence, to be the person who executed the above and foregoing instrument, and who
13 acknowledged to me that this instrument is freely and voluntarily executed for the purposes therein
14 mentioned.

15 [Signature]
16 NOTARY PUBLIC



1 DATED this 29th day of April, 2022.

2
3 JAZMIN MELGAR

4
5 By: [Signature]

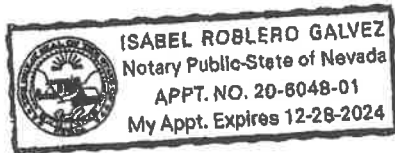
6 JAZMIN MELGAR

7 STATE OF NEVADA

8 COUNTY OF clay

} SS.

9 On this 29th day of April, 2022, before me the undersigned, a Notary
10 Public in and for said County and State, appeared JAZMIN MELGAR, known to me, or proven to me by
11 reliable evidence, to be the person who executed the above and foregoing instrument, and who
12 acknowledged to me that this instrument is freely and voluntarily executed for the purposes therein
13 mentioned.



16 Isabel Roblero
17 NOTARY PUBLIC

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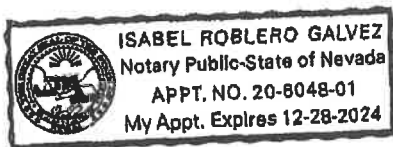
1 DATED this 2nd day of May, 2022.

2
3
4 DOUGLAS MELGAR

5
6 By: [Signature]
7 DOUGLAS MELGAR

8 STATE OF NEVADA }
9 COUNTY OF Clark } SS.

10 On this 2nd day of May, 2022, before me the undersigned, a Notary
11 Public in and for said County and State, appeared DOUGLAS MELGAR, known to me, or proven to me
12 by reliable evidence, to be the person who executed the above and foregoing instrument, and who
13 acknowledged to me that this instrument is freely and voluntarily executed for the purposes therein
14 mentioned.



17 Isabel Roblero
18 NOTARY PUBLIC

19 APPROVED AS TO FORM AND CONTENT:

20 DATED this 4th day of May, 2022.

21 H&P LAW

22 By: [Signature]
23 CARA XIDIS, ESQ. (Bar No. 11743)
24 8950 W Tropicana Ave., #1
25 Las Vegas, Nevada 89147
26 Attorney for Plaintiffs

27 ///

1 DATED this _____ day of 05/05/2022
2 _____, 2022.

3 THE STATE OF NEVADA, acting by and through its
4 DEPARTMENT OF TRANSPORTATION

5 DocuSigned by:

6 Kristina L. Swallow

C4B612FC2C1E4FB...

7 KRISTINA L. SWALLOW, P.E., Director
8 Nevada Department of Transportation

9 APPROVED AS TO FORM AND CONTENT:

10 DATED this 5th day of May, 2022.

11 AARON D. FORD
12 Attorney General

13 By: Roger Kent Miles

14 ROGER KENT MILES (Bar No. 4467)
15 Senior Deputy Attorney General
16 STEVEN M. GOLDSTEIN (Bar No. 6318)
17 Senior Deputy Attorney General
18 Department of Transportation
19 1263 South Stewart Street, Room 315
20 Carson City, Nevada 89712

21 *Attorneys for Defendant and Counter-Claimant State of Nevada*
22 *on relation of its Department of Transportation*
23
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25
26
27
28

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 24, 2022

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

From: Michael Rankin, 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 EDUCATION

Agenda Item Write-up:

Pursuant to NRS 333.475, the agency requests approval to enter into a Joinder Contract to utilize the Nevada Association of School Administrators contract with EDU2000 to provide a program for students to transition from pre-algebra to algebra 1.

Additional Information:

The agency's scope of work is targeted on the vendor developing digital resources for K-12 Science, Technology, Engineering, and Mathematics subjects with a particular focus on creating supplemental materials to compliment and supplement the currently adopted curriculums for grades K-12 mathematics and algebra. The State Purchasing Administrator approved the joinder.

Statutory Authority:

NRS 333.475

REVIEWED: _____

ACTION ITEM: _____

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25914**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	EDU2000 America, Inc.
Agency Code:	300	Contractor Name:	EDU2000 America, Inc.
Appropriation Unit:	2710-20	Address:	204 W Spear Street, 3197
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89703
If "No" please explain:	Not Applicable	Contact/Phone:	7758873655
		Vendor No.:	T29045084
		NV Business ID:	NV19951091344

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 60 days**4. Type of contract: **Contract**Contract description: **Algebra Zero Pgm**

5. Purpose of contract:

This is a new contract to provide a program for students to transition from pre-algebra to algebra 1.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,955,986.74****II. JUSTIFICATION**

7. What conditions require that this work be done?

There is evidence of a learning gap between Algebra I and Algebra II with evidence of issues addressed in motivation and comprehension. Office of Standards and Instructional Support want to address the learning loss and offer solutions for preparing students for the transition.

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

Office of Standards and Instructional Support are in need of additional support due to the capacity, the learning loss evidence, and the workload on Math Education Program Professionals. Expertise along with educational field training are a critical area of need.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicableb. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 333.475

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	03/28/2022 12:17:50 PM
Division Approval	carnol1	03/28/2022 12:18:20 PM
Department Approval	carnol1	03/28/2022 12:18:38 PM
Contract Manager Approval	mwadsw01	03/28/2022 12:25:14 PM
Budget Analyst Approval	mrarki1	05/26/2022 08:32:58 AM
BOE Agenda Approval	dlenzner	05/26/2022 08:41:34 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 #: **G220201**

REQUEST TO USE ANOTHER GOVERNMENTAL SOLICITATION

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


1	Agency Contact Information - Note: Approval notification will be sent to only the contact(s) listed below:			
	State Agency Name:	Department of Education		
	Contact Name and Title	Phone Number	Email Address	
	Dave Brancamp, Director	775.687.5930	dbrancamp@doe.nv.gov	
	Amanda Pinter, AIII	775.687.5931	apinter@doe.nv.gov	

2	Vendor Information:			
	Identify Vendor:	EDU2000		
	Contact Name:	B. Michael Liu, Ph.D.		
	Complete Address:	502 N. Division Street, Carson City, NV 89703		
	Telephone Number:	775.887.3655		
	Email Address:	mliu@education2000.com		

3	State/Entity that Released the Solicitation & Type of Solicitation. Must be Competitively Bid.			
	Type of Solicitation:	Request for Proposal		
	Identify Original State/Entity:	Nevada Association of School Administrators (NASA)		
	Contact Name:	Dr. Jeffrey Geihs		
	Telephone Number:			
	Email Address:	jgeihsnasa@gmail.com		

4	Contract Dates: Your Contract Term Date Cannot Exceed Term Date of Original Contract.			
	Original Contract:	Start Date:	7/15/2019	End Date:
				06/30/2023
	New Contract:	Start Date:	Upon Approval	End Date:
				06/30/2023

5	Funding for this new contract:			
	State Appropriated:			
	Federal Funds:	X		
	Grant Funds:			
	Other (Explain):			

Purchasing Use Only:**Approval #:**G220201 

6	Does the Scope of Work (SOW) in the original contract meet/exceed your needs?	Yes:	X	No:	
	To ensure such, requesting agency must request a copy of the State/entities Contract and SOW to be reviewed and approved by the agency's Deputy Attorney General (DAG). A copy of the Contract and written approval from the agency's DAG must be included with the request to the Purchasing Division.				
7	Did the agency receive awarded vendors permission to contract?	Yes:	X	No:	
	Written approval from the awarded vendor must accompany the agency's request/submission to the Purchasing Division.				
8	To ensure fair & reasonable pricing to the State, did the agency request a copy of the awarded vendors technical and cost proposals?	Yes:	X	No:	
	Copies of such must be included with submission to the Purchasing Division.				
9	Did the agency address any Federal Requirements associated with the contract?	Yes:		No:	X
10	Is this vendor registered in NevadaEPro?	Yes:	X	No:	
	Per Executive Order 2019-2, prior to entering into a contract with a vendor they must be registered in NevadaEPro.				
11	Is this vendor registered with the Nevada Secretary of State's Office?	Yes:	X	No:	
	Pursuant to NRS 76, prior to entering into a contract with a vendor they must obtain a Nevada Business License.				
12	Is a Business Associate Addendum or other agency specific form(s) required?	Yes:		No:	X
	If so, please include copies with submission to the Purchasing Division.				

Purchasing Use Only:	
Approval #:	G20201 @

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

David J. Brancamp

Agency Representative Initiating Request

David J. Brancamp, Director

Print Name of Agency Representative Initiating Request

1/26/2022

Date

Jonathan P. Moore

Signature of Agency Head Authorizing Request

Jonathan P. Moore, Deputy Superintendent of Student Achievement

Print Name of Agency Head Authorizing Request

1/26/2022

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NRS 333.475. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 300.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

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

Approved by:

Kevin D. O'Leary

Administrator, Purchasing Division or Designee

2/1/22

Date

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 23, 2022

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

From: Venus B. Fajota, 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 Venus B. Fajota.

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

**DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION
EMPLOYMENT SECURITY DIVISION**

Agenda Item Write-up:

Pursuant to NRS 333.475, the agency requests approval to enter into a Joinder Contract to utilize the Department of Health and Human Services Division of Welfare and Supportive Services contract with CSG Government Solutions to provide project management services.

Additional Information:

The agency's scope of work is targeted on the vendor providing project management services for the unemployment insurance system replacement. The vendor has extensive experience managing other UI modernization projects throughout the country and they were already selected in a competitive bid process for a substantively similar project in Nevada. The State Purchasing Administrator approved the joinder.

Statutory Authority:
NRS 333.475

REVIEWED: DL

ACTION ITEM: _____

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **26231**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4772-22**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CSG GOVERNMENT SOLUTIONS INC**Contractor Name: **CSG GOVERNMENT SOLUTIONS INC**Address: **180 N STETSON AVE STE 3200**City/State/Zip: **CHICAGO, IL 60601-6790**Contact/Phone: **Andrew Sutter 815-451-6935**Vendor No.: **T29039849**NV Business ID: **NV20121606936**To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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

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

Agency Reference #: **3646-24-ESD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2024**Contract term: **1 year and 334 days**4. Type of contract: **Contract**Contract description: **Project Management**

5. Purpose of contract:

This is a new contract to provide project management services for the modernization of the unemployment insurance system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,656,000.00**

Other basis for payment: PMO Project Manager; \$210 per hour. PMO Deputy Project Manager; \$190 per hour. UI Business Functional Manager (if onboarded); \$185 per hour. UI Technical Manager (if onboarded); \$185 per hour.

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency is entering into a contract with a software development vendor and requires project management to ensure smooth delivery of the product.

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

The agency does not have the necessary staff resources to dedicate to this temporary project.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicableb. Solicitation Waiver: **Not Applicable**

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

Agency has obtained approval from Purchasing to utilize an existing governmental solicitation.

This method was chosen because CSG has extensive experience managing the projects for other UI modernization throughout the country and they were already selected in a competitive bid process for a substantively similar project in Nevada.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

CETS 19027 - DWSS is very satisfied with the service provided by this vendor. Moreover, the vendor has done PMO service for several states specifically for UI modernization projects and all of them have been very satisfied with the vendor and their understanding of UI concepts as well.

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?

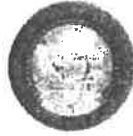
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	athomps8	05/06/2022 11:39:05 AM
Division Approval	jmarhevk	05/06/2022 13:31:28 PM
Department Approval	jmarhevk	05/06/2022 13:31:31 PM
Contract Manager Approval	jwixon	05/06/2022 14:24:28 PM
Budget Analyst Approval	vfajota	05/24/2022 15:38:37 PM
BOE Agenda Approval	dlenzner	05/25/2022 08:29:11 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 #:	G220501

REQUEST TO USE ANOTHER GOVERNMENTAL SOLICITATION

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

1	Agency Contact Information - Note: Approval notification will be sent to only the contact(s) listed below:		
	State Agency Name:	Department of Employment, Training and Rehabilitation	
	Contact Name and Title	Phone Number	Email Address
	Lindsay Thompson – Contract Manager	775-684-3967	lthompson@detr.nv.gov
	Brian Deem – Management Analyst IV	775-684-3947	b-deem@detr.nv.gov

2	Vendor Information:	
	Identify Vendor:	CSG Government Solutions
	Contact Name:	Landis Rossi
	Complete Address:	180 North Stetson, Suite 3200, Chicago, IL 60601
	Telephone Number:	208-954-0429
	Email Address:	lrossi@csghdelivers.com

3	State/Entity that Released the Solicitation & Type of Solicitation. Must be Competitively Bid.	
	Type of Solicitation:	Request for Proposal
	Identify Original State/Entity:	DHHS - DWSS
	Contact Name:	Shannon Jones
	Telephone Number:	775-684-0676
	Email Address:	sjones@dwss.nv.gov

4	Contract Dates: Your Contract Term Date Cannot Exceed Term Date of Original Contract.				
	Original Contract:	Start Date:	October 1, 2017	End Date:	April 30, 2024
	New Contract:	Start Date:	Upon Approval	End Date:	April 30, 2024

5	Funding for this new contract:	
	State Appropriated:	X
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Resub/Bid 04/11/22/Auto ✓

Purchasing Use Only:Approval #: **G220501** 

6	Does the Scope of Work (SOW) in the original contract meet/exceed your needs?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	To ensure such, requesting agency must request a copy of the State/entities Contract and SOW to be reviewed and approved by the agency's Deputy Attorney General (DAG). A copy of the Contract and written approval from the agency's DAG must be included with the request to the Purchasing Division.				
7	Did the agency receive awarded vendors permission to contract?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	Written approval from the awarded vendor must accompany the agency's request/submission to the Purchasing Division.				
8	To ensure fair & reasonable pricing to the State, did the agency request a copy of the awarded vendors technical and cost proposals?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	Copies of such must be included with submission to the Purchasing Division.				
9	Did the agency address any Federal Requirements associated with the contract?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
10	Is this vendor registered in NevadaEPro?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	Per Executive Order 2019-2, prior to entering into a contract with a vendor they must be registered in NevadaEPro.				
11	Is this vendor registered with the Nevada Secretary of State's Office?	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	Pursuant to NRS 76, prior to entering into a contract with a vendor they must obtain a Nevada Business License.				
12	Is a Business Associate Addendum or other agency specific form(s) required?	Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	If so, please include copies with submission to the Purchasing Division.				

Purchasing Use Only:	
Approval #:	G220501@

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



 Agency Representative Initiating Request

Brian Deem – Management Analyst IV

 Print Name of Agency Representative Initiating Request

1-6-2022

 Date



 Signature of Agency Head Authorizing Request

Lynda Parven – Employment Security Division Administrator

 Print Name of Agency Head Authorizing Request

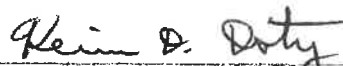
1-6-2022

 Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NRS 333.475. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 300.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

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

Approved by:



 Administrator, Purchasing Division or Designee

4/20/22

 Date

Cindy L. Stoeffler

From: Sutter, Andrew <asutter@csgdelivers.com>
Sent: Wednesday, April 20, 2022 5:11 PM
To: Brian Deem
Subject: CSG Services

WARNING - This email originated from outside the State of Nevada. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Good afternoon,

CSG is interested in providing services to DETR similar to those in our DWSS NVKIDS contract and the same pricing structure.

Thank you.

Drew

Drew Sutter, PMP
Vice President
Practice Lead, Program Modernization
CSG Government Solutions
Mobile: (815) 451-6935
asutter@csgdelivers.com
www.csgdelivers.com

Named by Forbes as One of America's Best Management Consulting Firms in 2018, 2019, and 2020

This message (including any attachments) may contain confidential information intended for a specific individual and purpose, and is protected by law. If you received this in error, please contact the sender and delete this message. Any disclosure, copying, or distribution of this message, or the taking of any action based on it, is strictly prohibited.

Rec'd 04/21/22 - Resub document

AARON D. FORD
Attorney General

KYLE E.N. GEORGE
First Assistant Attorney General

CHRISTINE JONES BRADY
Second Assistant Attorney General



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street
Carson City, Nevada 89701

JESSICA L. ADAIR
Chief of Staff

LESLIE M. NINO PIRO
General Counsel

HEIDI PARRY STERN
Solicitor General

April 7, 2022

Via Electronic Mail Only to b-deem@detr.nv.gov

Brian Deem, Management Analyst IV
Nevada Department of Employment, Training and Rehabilitation
ESD | Management and Administration Support Services
500 E 3rd St
Carson City, NV 89713

Re: NRS 333.475 Request to Utilize Another Governmental Solicitation – CSG Government Solutions

Dear Mr. Deem:

Please feel free to use this letter related to item 6 on the State Purchasing form entitled "Request to Use Another Governmental Solicitation" in the matter of the proposed scope of work for Project Management Services for the Unemployment Insurance System Replacement from CSG Government Solutions. In full disclosure, I am counsel for State Purchasing but do also assist other divisions related to contract review, including reviews performed for the Division of Employment, Training and Rehabilitation. My review in this context is specific to item 6 on the form referenced above and does not purport to bind State Purchasing in their own review and consideration of your full submission.

Per our discussions, the Department of Welfare and Supportive Services competitively contracted with CSG Government Solutions for work that aligns with the work the Department of Employment, Training and Rehabilitation now would like to have done. We have reviewed and discussed your submission packet for purchasing, including the following documents:

- 1) Request to Use Another Governmental Solicitation 3 page form (completed by DETR)
- 2) Contract for Services of Independent Contractor (CETS # 19027) between DWSS and CSG Governmental Solutions, approved by Board of Examiners on 09/27/17

NRS 333.475 Request to Utilize Another Governmental Solicitation – CSG
Government Solutions
Page 2
April 7, 2022

- a. Amendment 1 to Request for Proposal 3267
- b. Cost Proposal for Child Support Enforcement System Replacement Project
- c. Technical Proposal for Child Support Enforcement System Replacement Project
- 3) Email dated January 3, 2022 to Brian Deem from Landis Rossi of CSG Government Solutions regarding contract contact information
- 4) Project Management Office Services for the Unemployment Insurance System Replacement dated March 31, 2022 ("Statement of Work" prepared by CSG Government Solutions)


In addition to our review and discussion, CSG Government Solutions made changes requested for alignment purposes specific to item 6 for the Request to Use Another Governmental Solicitation.

Thank you for being so responsive throughout this process.

Sincerely,

AARON D. FORD
Attorney General

By:


THOMAS S. WOODRUM
Senior Deputy Attorney General
hwoodrum@ag.nv.gov

cc: Troy Jordan, Senior Attorney (DETR)
FM Contracts Distribution List (DETR)

LEASES SUMMARY

BOE #	LESSEE		LESSOR	AMOUNT
1.	DEPARTMENT OF EMPLOYMENT, TRAINING AND REHABILITATION		WILLIAM COLEMAN INVESTMENTS, LLC	\$1,104,324
	This is an extension of an existing lease.			
		Term of Lease: 07/01/2022 – 06/30/2027	Located in North Las Vegas	
2.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH – RURAL CLINICS		NAKOMA INVESTMENTS, LLC	\$525,552
	This is an extension of an existing lease.			
		Term of Lease: 09/01/2022 – 08/31/2027	Located in Gardnerville	
3.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF WELFARE AND SUPPORTIVE SERVICES		RANCHO PAVILION, LLC	\$3,442,522
	This is an extension of an existing lease.			
		Term of Lease: 07/01/2022 – 06/30/2027	Located in Las Vegas	
4.	DEPARTMENT OF PUBLIC SAFETY – NEVADA HIGHWAY PATROL – DIRECTOR'S OFFICE		LOVELOCK INDUSTRIAL, LLC	\$87,313
	This is an extension of an existing lease.			
		Term of Lease: 03/01/2023 – 02/29/2028	Located in Lovelock	
5.	OFFICE OF THE MILITARY – DIVISION OF EMERGENCY MANAGEMENT – HOMELAND SECURITY		GLOBAL EXPERIENCE SPECIALISTS, INC.	\$473,196
	This is an extension of an existing sublease.			
		Term of Lease: 07/01/2022 – 12/31/2022	Located in Las Vegas	
6.	NEVADA COMMISSION ON JUDICIAL DISCIPLINE		CITY CREEK RENO, LLC	\$241,824
	This is an extension of an existing lease.			
		Term of Lease: 07/01/2022 – 08/31/2027	Located in Reno	
7.	NEVADA STATE BOARD OF OSTEOPATHIC MEDICINE		ANC CORPORATE CENTER & PASEO VERDE, LLC	\$588,551
	This is an extension of an existing lease.			
		Term of Lease: 07/01/2022 – 06/30/2029	Located in Henderson	
8.	OFFICE OF THE MILITARY – NEVADA ARMY NATIONAL GUARD RECRUITING		8454 STELLER DRIVE, LLC	\$83,376
	This is an extension of an existing lease.			
		Term of Lease: 07/01/2022 – 06/30/2024	Located in Las Vegas	

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.
This Summary is for informational purposes only, any changes in contact information will need to be updated by agency, on agency's copy.

For Budget/Division Use Only	
Reviewed by:	<i>[Signature]</i> 05/16/22
Reviewed by:	<i>[Signature]</i> 5/21/22
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Employment, Training and Rehabilitation 500 East Third Street Carson City, Nevada 89701 Brandon Taylor T: 775.684.3901 E: bataylor@nvdetr.org						
Remarks:	This is a renewal of a lease, the current agreement is in 5% holdover.						
Exceptions/Special notes:							
2. Name of Lessor:	William Coleman Investments, LLC						
3. Address of Lessor:	51 Guld Stream Court Las Vegas, Nevada 89113						
4. Property contact:	Mickey Caley T: 702.649.3799 E: mcaley@pokerpalace.net						
5. Address of Lease property:	2827 Las Vegas Boulevard North North Las Vegas, Nevada 89030						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 9,450						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	improvement cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
	\$ 17,860.50	12	\$ 214,326.00	July 1, 2022 - June 30, 2023	\$0.00	\$0.00	\$1.89
0%	\$ 17,860.50	12	\$ 214,326.00	July 1, 2023 - June 30, 2024	\$0.00	\$0.00	\$1.89
2.5%	\$ 18,307.00	12	\$ 219,684.00	July 1, 2024 - June 30, 2025	\$0.00	\$0.00	\$1.94
2.5%	\$ 18,765.00	12	\$ 225,180.00	July 1, 2025 - June 30, 2026	\$0.00	\$0.00	\$1.99
2.5%	\$ 19,234.00	12	\$ 230,808.00	July 1, 2026 - June 30, 2027	\$0.00	\$0.00	\$2.04
c. Total Lease Consideration:	60		\$1,104,324.00				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input type="checkbox"/> Yes <input type="checkbox"/> No Renewal terms:						
f. Holdover notice:	<input type="checkbox"/> # of Days required Holdover terms:						
g. Term:	Five (5) Years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input 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:	\$2.34						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	4770, 3265, 3254						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <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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GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

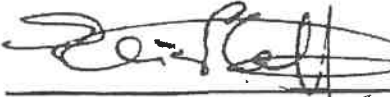
STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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

 5/10/2022
Authorized Agency Signature Date

20


For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20031069182	Exp: 5/31/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T81073454	
j. Is this an Arms Length Transaction (No Conflict of Interest)?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

 5-11-22
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. This Summary is for informational purposes only, any changes in contact information will need to be updated by agency, on agency's copy.

For Budget Division Use Only	
Reviewed by:	<i>Rey Anderson</i> 5/15/22
Reviewed by:	<i>HRF</i> 5-16-22
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Public and Behavioral Health, Rural Clinics 4150 Technology Way, Third Floor Carson City, Nevada 89706 Irma Janssen T: 775.684.4224 E: contractunit@health.nv.gov						
Remarks:	This is a renewal of an existing lease.						
Exceptions/Special notes:	Agency Preapproval Only						
2. Name of Lessor:	Nakoma Investments, LLC						
3. Address of Lessor:	1528 Highway 395 North, Suite 205 Gardnerville, Nevada 89410						
4. Property contact:	Linda Hoskin T: 775.721.1700 E: lindahoskin@ymail.com						
5. Address of Lease property:	1528 Highway 395, Suite 100 Gardnerville, Nevada 89410						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 5,280						
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
	\$8,495.20	12	\$ 101,942.40	September 1, 2022 - August 31, 2023	\$0.00	\$0.00	\$1.61
2%	\$8,653.60	12	\$ 103,843.20	September 1, 2023 - August 31, 2024	\$0.00	\$0.00	\$1.64
1%	\$8,759.20	12	\$ 105,110.40	September 1, 2024 - August 31, 2025	\$0.00	\$0.00	\$1.66
2%	\$8,917.60	12	\$ 107,011.20	September 1, 2025 - August 31, 2026	\$0.00	\$0.00	\$1.69
1%	\$8,970.40	12	\$ 107,644.80	September 1, 2026 - August 31, 2027	\$0.00	\$0.00	\$1.70
c. Total Lease Consideration:	60 \$ 525,552.00						
d. Total Improvement Cost:				\$0.00			
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		365	Renewal terms:	One Identical term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5% / 90		
g. Term:	Five (5) Years						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input checked="" type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)						
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
l. Comparable Area Market Rate Average:	\$1.57						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3648						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <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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MAY 12 2022

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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

Kelli P. Quintana 4/15/22
Authorized Agency Signature Date

13



For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):		
f. Nevada Business ID Number:	NV20061367738	Exp: 10/31/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T27028312	
j. Is this an Arms Length Transaction (No Conflict of Interest)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

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

Authorized Signature _____ 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.
This Summary is for informational purposes only, any changes in contact information will need to be updated by agency, on agency's copy.

For Budget Division Use Only	
Reviewed by:	ARF 5.16.22
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Welfare and Supportive Services 1470 College Parkway Carson City, Nevada 89706 Shannon Jones T: 775.684.0676 E: sxjones@dwss.nv.gov																																																																																																																						
Remarks:	This is a renewal of an existing lease.																																																																																																																						
Exceptions/Special notes:	This renewal includes tenant requested improvements.																																																																																																																						
2. Name of Lessor:	Rancho Pavilion, LLC																																																																																																																						
3. Address of Lessor:	23586 Calabasas Road, Suite 100 Calabasas, California 91302																																																																																																																						
4. Property contact:	Northcap Commercial Sharyn Briece T: 702.333.4455 Ex. 217 C: 702.985.8531 E: sharyn@northcap.com																																																																																																																						
5. Address of Lease property:	701 North Rancho Boulevard Las Vegas, Nevada 89106																																																																																																																						
a. Square Footage:	<input type="checkbox"/> Rentable 1,986 sf warehouse <input checked="" type="checkbox"/> Usable 25,314 office 4,375 sf playground																																																																																																																						
b. Cost:	<table border="1"> <thead> <tr> <th></th> <th>cost per month</th> <th># of months in time frame</th> <th>cost per year</th> <th>time frame</th> <th>Improve-ment cost per square foot</th> <th>Base Rent cost per square foot</th> <th>Actual cost per square foot</th> </tr> </thead> <tbody> <tr> <td>25314</td> <td>\$ 52,349.35</td> <td>24</td> <td>\$ 1,256,384.45</td> <td>July 1, 2022 - June 30, 2024</td> <td>\$0.108</td> <td>\$1.960</td> <td>\$2.068</td> </tr> <tr> <td>Office</td> <td>2% \$ 53,361.91</td> <td>24</td> <td>\$ 1,280,685.89</td> <td>July 1, 2024 - June 30, 2026</td> <td>\$0.108</td> <td>\$2.000</td> <td>\$2.108</td> </tr> <tr> <td></td> <td>2% \$ 54,627.61</td> <td>12</td> <td>\$ 655,531.34</td> <td>July 1, 2026 - June 30, 2027</td> <td>\$0.108</td> <td>\$2.050</td> <td>\$2.158</td> </tr> <tr> <td></td> <td></td> <td>60</td> <td>\$ 3,192,601.68</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>1986</td> <td>\$ 1,529.22</td> <td>24</td> <td>\$ 36,701.28</td> <td>July 1, 2022 - June 30, 2024</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.770</td> </tr> <tr> <td>Warehouse</td> <td>1% \$ 1,549.08</td> <td>24</td> <td>\$ 37,177.92</td> <td>July 1, 2024 - June 30, 2026</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.780</td> </tr> <tr> <td></td> <td>3% \$ 1,588.80</td> <td>12</td> <td>\$ 19,065.60</td> <td>July 1, 2026 - June 30, 2027</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.800</td> </tr> <tr> <td></td> <td></td> <td>60</td> <td>\$ 92,944.80</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4375</td> <td>\$ 2,581.25</td> <td>24</td> <td>\$ 61,950.00</td> <td>July 1, 2022 - June 30, 2024</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.590</td> </tr> <tr> <td>Playground</td> <td>2% \$ 2,625.00</td> <td>24</td> <td>\$ 63,000.00</td> <td>July 1, 2024 - June 30, 2026</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.600</td> </tr> <tr> <td></td> <td>2% \$ 2,668.75</td> <td>12</td> <td>\$ 32,025.00</td> <td>July 1, 2026 - June 30, 2027</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.610</td> </tr> <tr> <td></td> <td></td> <td>60</td> <td>\$ 156,975.00</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td>60</td> <td>\$ 3,442,521.48</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								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	25314	\$ 52,349.35	24	\$ 1,256,384.45	July 1, 2022 - June 30, 2024	\$0.108	\$1.960	\$2.068	Office	2% \$ 53,361.91	24	\$ 1,280,685.89	July 1, 2024 - June 30, 2026	\$0.108	\$2.000	\$2.108		2% \$ 54,627.61	12	\$ 655,531.34	July 1, 2026 - June 30, 2027	\$0.108	\$2.050	\$2.158			60	\$ 3,192,601.68					1986	\$ 1,529.22	24	\$ 36,701.28	July 1, 2022 - June 30, 2024	\$0.00	\$0.00	\$0.770	Warehouse	1% \$ 1,549.08	24	\$ 37,177.92	July 1, 2024 - June 30, 2026	\$0.00	\$0.00	\$0.780		3% \$ 1,588.80	12	\$ 19,065.60	July 1, 2026 - June 30, 2027	\$0.00	\$0.00	\$0.800			60	\$ 92,944.80					4375	\$ 2,581.25	24	\$ 61,950.00	July 1, 2022 - June 30, 2024	\$0.00	\$0.00	\$0.590	Playground	2% \$ 2,625.00	24	\$ 63,000.00	July 1, 2024 - June 30, 2026	\$0.00	\$0.00	\$0.600		2% \$ 2,668.75	12	\$ 32,025.00	July 1, 2026 - June 30, 2027	\$0.00	\$0.00	\$0.610			60	\$ 156,975.00							60	\$ 3,442,521.48				
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a. Estimated Expenses: Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

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MAY 12 2022

STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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

05/02/2022

Date

26

For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
**If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20051559588	Exp: 8/31/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T27012122	
j. Is this an Arms Length Transaction (No Conflict of Interest)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

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


Authorized Signature

5-11-22

Date

Public Works Division

bm

For Board of Examiners

☒ YES

☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.
This Summary is for informational purposes only, any changes in contact information will need to be updated by agency, on agency's copy.

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

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Public Safety Nevada Highway Patrol, Director's Office 555 Wright Way Carson City, Nevada 89711 Katie Henrie T: 776.684.4487 E: khenrie@dps.state.nv.us						
Remarks:	This is a renewal of a current lease.						
Exceptions/Special notes:							
2. Name of Lessor:	Lovelock Industrial, LLC						
3. Address of Lessor:	358 Rosemary Lane Encinitas, California 92024						
4. Property contact:	Tim Dutra T: 619.894.0479 E: tdutra@cox.net						
5. Address of Lease property:	1155 Lovelock Avenue Lovelock, Nevada 89419						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 882						
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
	\$ 1,402.38	12	\$ 16,828.56	March 1, 2023 - February 28, 2024	\$0.00	\$0.00	\$1.59
3%	\$ 1,446.48	12	\$ 17,357.76	March 1, 2024 - February 28, 2025	\$0.00	\$0.00	\$1.64
0%	\$ 1,446.48	12	\$ 17,357.76	March 1, 2025 - February 28, 2026	\$0.00	\$0.00	\$1.64
2%	\$ 1,481.76	12	\$ 17,781.12	March 1, 2026 - February 28, 2027	\$0.00	\$0.00	\$1.68
1%	\$ 1,498.96	12	\$ 17,987.52	March 1, 2027 - February 28, 2028	\$0.00	\$0.00	\$1.70
c. Total Lease Consideration:	60 \$ 87,312.72						
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 type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input checked="" type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
k. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant		Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
l. Comparable Area Market Rate Average:	\$1.07						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	4713						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

RECEIVED
MAY 03 2022
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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

Yes _____ No _____ Doc Unit _____

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

Kristen Defer 4/26/22
Authorized Agency Signature Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
**If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20061511346	Exp: 2/28/2023
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T27040221	
j. Is this an Arms Length Transaction (No Conflict of Interest)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

Wood Patrick FOR 5-2-22
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.
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For Budget Division Use Only	
Reviewed by:	UNY 5/19/22
Reviewed by:	
Reviewed by:	

**STATEWIDE SUBLEASE INFORMATION
FIRST AMENDMENT**

1. Agency:	Nevada Division of Emergency Management / Homeland Security 2478 Fairview Drive Carson City, Nevada 89701 David Forgerson T: 775.687.0300 E: dforgerson@dps.state.nv.us						
Remarks:	This first amendment is for the option to renew for an additional six (6) months, with an option to renew for an additional six (6) months if needed.						
Exceptions/Special notes:							
2. Name of Sublessor:	Global Experience Specialists, Inc						
3. Address of Sublessor:	7150 S. Tenaya Way Suite 100 Las Vegas, Nevada 89113						
4. Property contact:	Kris Truscott Property Manager T: 702.416.2999 E: ktruscott@ges.com Jon Massimino Lease/Contract Manager jmassimino@viad.com						
5. Address of Lease property:	7050 Lindell Road, Building B Las Vegas, Nevada 89118						
a. Square Footage:	<input checked="" type="checkbox"/> Rentable <input type="checkbox"/> Usable 101,310						
b. Cost:	cost per month	# of months in time frame	cost per renewal	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Appox cost per square foot
	\$ 78,865.97	6	\$ 473,195.82	July 1, 2022 - December 31, 2022	\$0.00	\$0.00	\$0.78
c. Total Sublease Consideration:	12	\$ 473,195.82					
d. Total Improvement Cost:					\$0.00	\$0.00	
e. Option to renew:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Renewal terms:		NA		
f. Holdover notice:	# of Days required 30		Holdover terms:		25% / 90		
g. Term:	6 months						
h. Pass-thrus/CAM/Taxes	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant						
i. Utilities:	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant						
j. Janitorial:	<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant		<input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day		<input checked="" type="checkbox"/> Other		
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:	\$1.82						
m. Specific termination clause in Sublease:	Breach/Default lack of funding						
n. Sublease will be paid for by Agency Budget Account Number:	3602						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing Sublease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <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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 MAY 18 2022
 GOVERNOR'S FINANCE OFFICE
 BUDGET DIVISION

**STATEWIDE LEASE INFORMATION
FIRST AMENDMENT**

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

David Wm. Tapscott
Authorized Agency Signature

May 17, 2022

Date

7


For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input checked="" type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV19831009024	Exp: 7/31/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T29038861	
j. Is this an Arms Length Transaction (No Conflict of Interest)?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

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


Authorized Signature
Public Works Division

5/17/22
Date

bm

For Board of Examiners

☒ YES

☐ NO

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

STATEWIDE LEASE INFORMATION

1. Agency:

Nevada Commission on Judicial Discipline
679 Sierra Rose Drive, Suite B
Reno, Nevada 89511
Valerie Carter
T: 775.687.4017 E: vmcarter@judicial.nv.gov

Remarks:

This lease was negotiated to replace the month to month agreement.

Exceptions/Special notes:

One (1) day a week janitorial.

2. Name of Lessor:

City Creek Reno, LLC

3. Address of Lessor:

679 Sierra Rose Drive, Suite A
Reno, Nevada 89511

4. Property contact:

Floyd Rowley
T: 775.224.3183 E: floyd@rowleyrealestateadvisors.com

5. Address of Lease property:

679 Sierra Rose Drive, Suite B
Reno, Nevada 89511

a. Square Footage:

☒ Rentable

☐ Usable 2,200

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
0%	\$ -	2	\$ -	July 1, 2022 - August 31, 2022	\$0.00	\$0.00	\$0.00
0%	\$ 3,960.00	12	\$ 47,520.00	September 1, 2022 - August 31, 2023	\$0.00	\$0.00	\$1.80
0%	\$ 3,960.00	12	\$ 47,520.00	September 1, 2023 - August 31, 2024	\$0.00	\$0.00	\$1.80
2%	\$ 4,048.00	12	\$ 48,576.00	September 1, 2024 - August 31, 2025	\$0.00	\$0.00	\$1.84
0%	\$ 4,048.00	12	\$ 48,576.00	September 1, 2025 - August 31, 2026	\$0.00	\$0.00	\$1.84
2%	\$ 4,136.00	12	\$ 49,632.00	September 1, 2026 - August 31, 2027	\$0.00	\$0.00	\$1.88
		62	\$ 241,824.00				

c. Total Lease Consideration:

d. Total Improvement Cost:

\$0.00

e. Option to renew:

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

f. Holdover notice:

of Days required 30 Holdover terms: 5%/90

g. Term:

Five (5) 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:

\$2.45

m. Specific termination clause in lease:

Breach/Default lack of funding

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

1497

6. This lease constitutes:

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

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

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MAY 11 2022

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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

Yes ☒ No ☐ Doc Unit _____

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


Authorized Agency Signature
5/9/2022
Date

For Public Works Information:

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20131318465	Exp: 5/31/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. 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
i. State of Nevada Vendor number:	T3201217.8	
j. Is this an Arms Length Transaction (No Conflict of Interest)?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

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


Authorized Signature
Public Works Division
5-11-22
Date

For Board of Examiners ☒ YES ☐ NO

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

**REAL PROPERTY LEASE SUMMARY
(FOR BOARDS - COMMISSIONS - STORAGE)**

1. Tenant:	Department - Nevada State Board of Osteopathic Medicine Division Address - 2275 Corporate Circle Ste 210 City, Nevada zip - Henderson, NV 89074 Contact persons name Sandra Reed T:702-732-2147 E: sreed@bom.nv.gov						
Remarks:	We are a licensing board amend/extend our current lease which ends in July 2022.						
Exceptions/Special notes:							
2. Name of Lessor:	ANC Corporate Center & Paseo Verde, LLC, a Delaware Limited Liability Company						
3. Address of Lessor:	5 Third Street, Ste 900, San Francisco, CA 94103						
4. Property Contact:	American Nevada Company 2360 Corporate Circle Ste 330, Henderson, NV 89074 Natalie Allred T: 702-990-2162 E: natalie.allred@amnev.com						
5. Address of Lease property:	2275 Corporate Circle, Ste 210, Henderson, NV 89074						
a. Square Footage:	<input checked="" type="checkbox"/> Rentable 2,286 <input checked="" type="checkbox"/> Usable 1,997						
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
	\$ 6,400.80	12	\$ 76,809.60	First 3 months rent is abated July 1, 2022 - June 30, 2023		\$2.80	\$2.80
3%	\$ 6,592.82	12	\$ 79,113.84	July 1, 2023 - June 30, 2024		\$2.88	\$2.88
3%	\$ 6,790.61	12	\$ 81,487.32	July 1, 2024 - June 30, 2025		\$2.97	\$2.97
3%	\$ 6,994.33	12	\$ 83,931.96	July 1, 2025 - June 30, 2026		\$3.06	\$3.06
3%	\$ 7,204.16	12	\$ 86,449.92	July 1, 2026 - June 30, 2027		\$3.15	\$3.15
3%	\$ 7,420.28	12	\$ 89,043.36	July 1, 2027 - June 30, 2028		\$3.25	\$3.25
3%	\$ 7,642.89	12	\$ 91,714.68	July 1, 2028 - June 30, 2029		\$3.34	\$3.34
			\$ -				
			\$ -				
			\$ -				
c. Total Lease Consideration:	84		\$ 588,550.68				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Renewal terms:						
f. Holdover notice:	# of Days required Holdover terms:						
g. Term:	84 Months						
h. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
i. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant						
j. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input 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:							
m. Specific termination clause in lease:							
n. Lease will be paid for by Agency Budget Account Number:	B026						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

REAL PROPERTY LEASE SUMMARY
(FOR BOARDS - COMMISSIONS - STORAGE)

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
____ N/A _____

<u><i>Sandra Reed</i></u>	<u>5/11/2022</u>
Authorized Agency Signature	Date
<i>staff count</i>	<u>4</u>

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>
e. Ownership Type (Domestic, Foreign, Government, etc.):	Foreign	
f. Nevada Business ID Number:	NV20181442221	Exp: 6/30/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
h. Is this an Arms Length Transaction (No Conflict of Interest)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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 type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

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. This Summary is for informational purposes only, any changes in contact information will need to be updated by agency, on agency's copy.

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

STATEWIDE LEASE INFORMATION

1. Agency:	Office of the Military Nevada Army National Guard Recruiting 2460 Fairview Drive Carson City, Nevada 89701 Devlin Earl T: 775.867.7280 E: devlin.m.earl.nhg@army.mil						
Remarks:	This lease was negotiated to keep the Office of the Military in this store front location. This Lease is 100% Federally Funded.						
Exceptions/Special notes:							
2. Name of Lessor:	8454 Steller Drive, LLC c/o Property Group Partners						
3. Address of Lessor:	5440 West Sahara Avenue, Suite 108 Las Vegas, Nevada 89418						
4. Property contact:	Megan Lopez T: 702.272.2827 E: meganlopez@pgpcre.com						
5. Address of Lease property:	2021 N. Rainbow Boulevard Las Vegas, Nevada 89108						
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 1,200						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	improvement cost per square foot	Base Rent cost per square foot	Actual cost per square foot
	2%	\$ 3,444.00	12	\$ 41,328.00	July 1, 2022 - June 30, 2023	\$0.00	\$2.87
	2%	\$ 3,504.00	12	\$ 42,048.00	July 1, 2023 - June 30, 2024	\$0.00	\$2.92
c. Total Lease Consideration:			24	\$ 83,376.00			
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 365 Renewal terms: One (1) Identical Term						
f. Holdover notice:	# of Days required 30 Holdover terms: 6% / 90						
g. Term:	Two (2) 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:	\$3.11						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3650						
6. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires estimated expenses) <input type="checkbox"/> A relocation (requires estimated expenses) <input type="checkbox"/> A new location (requires estimated expenses) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

RECEIVED

MAY 11 2022

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION


STATEWIDE LEASE INFORMATION

We understand that the Agency will be assessed for the services of the Public Works Division / Leasing Services, through the life of the lease and I hereby agree to pay such assessment.

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 11 May 2022


For Public Works Information:


7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		
d. The Lessor 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"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20212147653	Exp: 6/30/2022
g. Is the Lessor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
**If No, explain.... Property Group Partners, LLC		
h. 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
i. State of Nevada Vendor number:	T27044327	
j. Is this an Arms Length Transaction (No Conflict of Interest)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
**If No, explain....		

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

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


 Authorized Signature _____ Date 5-11-22
 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.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	CJ SPEAKS	FEDERAL	\$472,582	
	Contract Description:	This is the first amendment to the original contract which provides consulting services as a Digital Equity Program Director. This amendment extends the termination date from June 30, 2022 to March 26, 2026 and increases the maximum amount from \$47,315.10 to \$519,897.10 due to the continued need for these services.				
	Term of Contract:	03/28/2022 - 03/27/2026	Contract # 25594			
2.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	COLUMBIA TELECOM-MUNICATIONS CORPORATION	FEDERAL	\$999,750	
	Contract Description:	This is a new contract to provide the development and implementation of a broadband infrastructure grant program.				
	Term of Contract:	06/14/2022 - 06/13/2024	Contract # 26219			
3.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	GB & ASSOCIATES	FEDERAL	\$484,166	
	Contract Description:	This is the second amendment to the original contract which provides consultant services to oversee a fiber network development project from start to finish. This amendment extends the termination date from June 30, 2022 to December 15, 2025 and increases the maximum amount from \$77,696.14 to \$561,862.14 due to the continued need for these services.				
	Term of Contract:	12/16/2021 - 12/15/2025	Contract # 25305			
4.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	LUKAS KUCINSKI DBA KUCINSKI GIS	FEDERAL	\$454,226	
	Contract Description:	This is the first amendment to the original contract which provides consulting services as a geographic information system and data visualization analyst. This amendment extends the termination date from June 30, 2022 to March 21, 2026 and increases the maximum amount from \$43,590.36 to \$497,816.36 due to the continued need for these services.				
	Term of Contract:	03/22/2022 - 03/21/2026	Contract # 25595			
5.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	TEL/LOGIC, INC. DBA E-RATE CENTRAL	GENERAL 93% FEDERAL 7%	\$159,100	
	Contract Description:	This is the first amendment to the original contract which provides ongoing broadband technical support, project management and consulting services to support the planning, mapping and procurement of broadband services. This amendment increases the maximum amount from \$2,211,840 to \$2,370,940 due to the increased need for these services.				
	Term of Contract:	07/13/2021 - 06/30/2025	Contract # 24507			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
6.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	WEINBERG WHEELER HUDGINS DUNN & DIAL, LLC	OTHER: STATUTORY CONTINGENCY	\$60,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides outside counsel services for case number A-20-814296-C for Lopez vs. State of Nevada. This amendment extends the termination date from May 31, 2022 to May 31, 2023 and increases the maximum amount from \$40,000 to \$100,000 due to the continued need for these services.				
		Term of Contract:	05/24/2021 - 05/31/2023	Contract # 24499		
7.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	APPRISS INSIGHTS, LLC	FEE: PARTICIPATING COUNTIES 69% FEDERAL 31%	\$225,497	
	Contract Description:	This is the ninth amendment to the original contract which provides ongoing victim notification in the Statewide Automated Victim Information and Notification Program in Nevada This amendment changes the assignment from Appriss, Inc. to Appriss Insights, LLC, extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$2,450,438.21 to \$2,675,935.01 to allow time for the completion of a new request for proposal.				
		Term of Contract:	04/01/2010 - 06/30/2023	Contract # 10619		
8.	040	SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM	GARTNER, INC.	FEDERAL	\$130,000	
	Contract Description:	This is a new service agreement under master service agreement 99SWC-NV22-9032 which provides project scope development and post-production support development services for the Voter Registration Election Management System Request For Proposal.				
		Term of Contract:	Upon Approval - 12/02/2022	Contract # 26086		
9.	052	TREASURER'S OFFICE - HIGHER EDUCATION TUITION ADMINISTRATION	GABRIEL, ROEDER, SMITH & COMPANY	OTHER: COLLEGE SAVINGS ENDOWMENT FUND	\$200,500	
	Contract Description:	This is a new contract to provide actuarial services and the annual pricing models for the Nevada Prepaid Tuition Program contracts.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25993		
10.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	AUDIT SERVICES U.S., LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25893		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
11.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	DISCOVERY AUDIT SERVICES, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25901		
12.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	EECS, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25898		
13.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	INNOVATIVE ADVOCATE GROUP INCORPORATED	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25897		
14.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	KELMAR ASSOCIATES, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25902		
15.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	KROLL GOVERNMENT SOLUTIONS, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25896		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
16.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	SPECIALTY AUDIT SERVICES, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25894		
17.	054	TREASURER'S OFFICE - UNCLAIMED PROPERTY	TREASURY SERVICES GROUP, LLC	OTHER: ABANDONED PROPERTY RECEIPTS	\$4,000,000	
	Contract Description:	This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 25900		
18.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	AINSWORTH ASSOCIATES	OTHER: AGENCY FUNDS	\$32,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Army National Guard Combined Support Maintenance Shop Heating Ventilation and Air Conditioning (HVAC) Unit Replacement: CIP Project No. 20-A008; SPWD Contract No. 114504. This amendment increases the maximum amount from \$71,000 to \$103,000 due to the additional schematic design needed for the HVAC systems replacement.				
		Term of Contract:	11/10/2021 - 06/30/2025	Contract # 25163		
19.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	KGA ARCHITECTURE	OTHER: AGENCY FUNDING	\$237,677	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Stein Hospital Interior Renovations CIP project to include schematic design with the cost estimate and soft construction schedule analysis, construction documents, bidding and review services and construction administration: CIP Project No. 22-A001; SPWD Contract No. 114766.				
		Term of Contract:	Upon Approval - 12/31/2024	Contract # 26243		
20.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - TOURISM	FAHLGREN, INC. DBA FAHLGREN MORTINE	OTHER: LODGING TAX REVENUE	\$18,275,000	
	Contract Description:	This is a new contract to provide ongoing media buying services, media and industry partner relations and external communications services.				
		Term of Contract:	07/01/2022 - 06/30/2024	Contract # 26107		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
21.	130	DEPARTMENT OF TAXATION	GARTNER, INC.	GENERAL	\$263,800	
	Contract Description:	This is a new Work Plan under Master Service Agreement #186840 which provides independent and objective consulting services for the Unified Tax System Modernization Program including Request for Proposal development and evaluation tools.				
		Term of Contract:	07/01/2022 - 06/30/2023	Contract # 25997		
22.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - OFFICE OF THE CHIEF INFORMATION OFFICER	GARTNER, INC.	OTHER: COST ALLOCATION	\$224,813	
	Contract Description:	This is a new Work Plan under Master Service Agreement 99SWC-NV21-8568 which provides research and advisory services related to Information Technology. This Work Plan will add a new content research category of business initiatives, analyst research briefing, Gartner executive partner-led team workshop, and annual executive retreat and peer roundtables for the team leader.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 26169		
23.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	MOUNTAIN VISTA DEVELOPMENT, INC.	OTHER: PRIVATE AND COUNTY 35% FEDERAL 65%	\$574,891	
	Contract Description:	This is a new contract to provide floor replacement. This contract is contingent upon IFC approval of work program #C58225.				
		Term of Contract:	Upon Approval - 06/30/2024	Contract # 26154		
24.	270	CANNABIS COMPLIANCE BOARD - MARIJUANA REGULATION AND CONTROL ACCOUNT	ACCELA, INC.	FEE: LICENSURE	\$523,802	
	Contract Description:	This is the second amendment to the original contract which provides a case management and enforcement database application to track registration, audits, investigations, complaint handling and hearing and legal actions in one system. This amendment extends the termination date from June 23, 2022 to June 23, 2023 and increases the maximum amount from \$1,071,681.00 to \$1,595,483.43 due to the continued need for these services.				
		Term of Contract:	05/14/2019 - 06/23/2023	Contract # 21743		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
25.	300	DEPARTMENT OF EDUCATION – OFFICE OF THE SUPERINTENDENT	INSTRUCTURE, INC.	FEDERAL	\$2,000,000	
	Contract Description:	This is the first amendment to the original contract which provides consulting services and support for Canvas, a learning management platform, to provide teachers, students and families with equitable access to high-quality instruction and continuous learning. This amendment extends the termination date from June 30, 2022 to September 30, 2023 and increases the maximum amount from \$4,081,750 to \$6,081,750 due to the continued need for these services.				
	Term of Contract:	07/01/2020 - 09/30/2023	Contract # 23323			
26.	300	DEPARTMENT OF EDUCATION - CONTINUING EDUCATION	LITERACYPRO SYSTEMS, INC.	FEDERAL	\$200,397	
	Contract Description:	This is a new contract to provide a data system to aggregate the required Adult Education National Reporting System data from all local programs and produce required data tables for federal reporting services.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25753			
27.	300	DEPARTMENT OF EDUCATION - OTHER STATE EDUCATION PROGRAMS	JOBS FOR NEVADA GRADUATES, INC.	GENERAL	\$252,098	
	Contract Description:	This is the first amendment to the original contract which provides training to improve outcomes of public education, provide work opportunities for high school students and increase college enrollment and completion rates for high-risk youth populations. This amendment increases the maximum amount from \$7,226,830 to \$7,478,928 due to an increased need for these services.				
	Term of Contract:	07/01/2021 - 06/30/2023	Contract # 24704			
28.	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	\$216,000	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides ongoing evaluations of the Quality Rating & Improvement System and facilitates annual early childhood research symposiums. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount from \$148,790 to \$364,790 due to the continued need for these services.				
	Term of Contract:	04/14/2020 - 06/30/2022	Contract # 22922			
29.	300	DEPARTMENT OF EDUCATION - COVID-19 FUNDING	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO - GUINN CENTER	FEDERAL	\$199,733	Exempt
	Contract Description:	This is a new interlocal agreement to provide a statewide comprehensive needs assessment for local school communities.				
	Term of Contract:	Upon Approval - 06/30/2023	Contract # 26094			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
30.	300	DEPARTMENT OF EDUCATION - COVID-19 FUNDING	REGENTS OF THE UNIVERSITY OF MINNESOTA	FEDERAL	\$999,995	Exempt
	Contract Description:	This is a new interlocal agreement to provide professional development for elementary educators on literacy instruction and intervention.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 26059		
31.	315	STATE PUBLIC CHARTER SCHOOL AUTHORITY	CATAPULT SYSTEMS, LLC	FEDERAL	\$68,319	Exempt
	Contract Description:	This is the fourth amendment to the original contract which provides a grant management software subscription. This amendment extends the termination date from June 30, 2022 to January 31, 2023 and increases the maximum amount from \$362,787.00 to \$431,106.20 due to the continued need for these services.				
		Term of Contract:	07/01/2020 - 01/31/2023	Contract # 23204		
32.	332	DEPARTMENT OF ADMINISTRATION - NEVADA STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS – STATE LIBRARY	EBSCO INDUSTRIES, INC. DBA EBSCO INFORMATION SERVICES	FEDERAL	\$321,360	
	Contract Description:	This is the second amendment to the original contract which provides online access to multidisciplinary databases for all K-12 schools, academic, and public libraries, and remote use by all Nevada residents. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$1,285,440 to \$1,606,800 due to the continued need for these services.				
		Term of Contract:	07/01/2018 - 06/30/2023	Contract # 20343		
33.	332	DEPARTMENT OF ADMINISTRATION - NEVADA STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS – STATE LIBRARY	HEADED2, LLC	GENERAL	\$199,955	Sole Source
	Contract Description:	This is a new contract to provide ongoing software subscription and annual maintenance to Nevada CareerExplorer.				
		Term of Contract:	Upon Approval - 06/30/2024	Contract # 26001		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
34.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - EARLY INTERVENTION SERVICES	YAHASOFT, INC.	FEDERAL	\$1,964,430	
	Contract Description:	This is a new contract to provide cloud-hosted services for Early Intervention Management.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 26307		
35.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	CLARK COUNTY DEPARTMENT OF FAMILY SERVICES	FEDERAL	\$2,155,063	Exempt
	Contract Description:	This is a new interlocal agreement to provide targeted case management and administrative services.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25224		
36.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	HEALTH SERVICES ADVISORY GROUP, INC.	GENERAL 50% FEDERAL 50%	\$1,854,192	
	Contract Description:	This is the second amendment to the original contract which provides an external quality review of compliance with contractual service terms of the Managed Care Program, including an assessment of the quality outcomes, timelines, and access to service for which the contractors are obligated. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$2,962,597 to \$4,816,789 due to the continued need for these services. This contract is contingent upon ifc approval of work program #22frf31581.				
		Term of Contract:	07/01/2018 - 06/30/2023	Contract # 19857		
37.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	WASHOE COUNTY HUMAN SERVICES	FEDERAL	\$32,438,002	Exempt
	Contract Description:	This is a new interlocal agreement to provide targeted case management, adult day healthcare and administrative cost recovery.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25230		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	CARSON CITY HEALTH AND HUMAN SERVICES	OTHER: REVENUE	\$2,513,168	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25650		
39.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	DOUGLAS COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$966,862	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25658		
40.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	HUMBOLDT COUNTY HUMAN SERVICES	OTHER: REVENUE	\$1,058,404	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25669		
41.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	LANDER COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$538,924	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25670		
42.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	LINCOLN COUNTY	OTHER: REVENUE	\$280,815	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25671		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
43.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	MINERAL COUNTY	OTHER: REVENUE	\$330,049	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25674		
44.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	WASHOE COUNTY HUMAN SERVICES	OTHER: REVENUE	\$13,152,048	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25678		
45.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	WHITE PINE COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$267,498	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25679		
46.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	GROUNDSWELL SERVICES, INC.	GENERAL	\$137,500	
	Contract Description:	This is a new contract to provide a forensic strategic plan to address gaps, challenges, areas of focus, goals, and relevant competency models for the restoration of forensic clients. This contract is contingent upon IFC approval of work program #C57108.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 25905		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
47.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH ADMINISTRATION	NETSMART TECHNOLOGIES, INC.	GENERAL	\$1,947,919	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides for the implementation and integration of the medication management system including electronic order entry and electronic medication administration records to improve patient safety and prescribing practices. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount from \$2,753,513.34 to \$4,701,432.73 due to the continued need for these services.				
	Term of Contract:	04/10/2018 - 06/30/2026	Contract # 19548			
48.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	CARAHSOFT TECHNOLOGY	FEDERAL	\$2,233,773	
	Contract Description:	This is the second amendment to the original service agreement under statewide contract #99SWC-NV18-421 to provide cloud services for enterprise vaccination and inventory management solution for COVID-19. This amendment extends the termination date from June 30, 2022 to July 31, 2023 and increases the maximum amount from \$8,331,286.83 to \$10,565,059.64 to add support services for the statewide vaccine management hub.				
	Term of Contract:	02/01/2021 - 06/30/2022	Contract # 23986			
49.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	CSAA INSURANCE SERVICES, INC.	OTHER: EPIDEMIOLOGY AND LABORATORY CAPACITY FUNDS	\$2,823,408	Exempt
	Contract Description:	This is the second amendment to the original contract which provides disease investigation resources to assist the counties and health districts' need for additional resources. This amendment increases the maximum amount from \$5,431,600 to \$8,255,008 due to the continued need for these services.				
	Term of Contract:	09/01/2021 - 08/31/2022	Contract # 24851			
50.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - CHRONIC DISEASE	ACCESS TO HEALTHCARE NETWORK, INC.	FEDERAL	\$2,500,000	
	Contract Description:	This is the second amendment to the original contract which provides ongoing management of Nevada's Breast and Cervical Cancer Early Detection Program. This amendment increases the maximum amount from \$6,250,000 to \$8,750,000 due to the continued need for these services.				
	Term of Contract:	01/01/2020 - 06/30/2023	Contract # 22566			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
51.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - OFFICE OF HEALTH ADMINISTRATION	AGATE SOFTWARE, INC.	FEDERAL	\$1,217,606	
	Contract Description:	This is a new contract to provide a tracking software system for grants and contracts.				
		Term of Contract:	Upon Approval - 06/15/2026	Contract # 26204		
52.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - RURAL CLINICS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	GENERAL	\$100,745	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing psychiatric services to mental health clinics in rural Nevada.				
		Term of Contract:	07/01/2022 - 06/30/2023	Contract # 26229		
53.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	DATA BUILDERS, INC.	GENERAL 30% FEDERAL 70%	\$111,604	Sole Source
	Contract Description:	This is a new contract to provide ongoing support, licensing, maintenance and modifications for the Program Review & Evaluation's Q5i hearings database.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25931		
54.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	DELOITTE CONSULTING, LLP	FEDERAL	\$2,988,000	
	Contract Description:	This is the third amendment to the original contract which provides Pandemic-Electronic Benefit Transfer benefits to children who qualify for the National School Lunch Program. This amendment extends the termination date from June 30, 2022 to December 31, 2023 and increases the maximum amount from \$5,134,167 to \$8,122,167 to implement system enhancements and extend post-production support services. This contract is contingent upon IFC approval of work program #C58572.				
		Term of Contract:	06/08/2021 - 12/31/2023	Contract # 24393		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
55.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	INFOMAGNETICS TECHNOLOGIES	GENERAL 12.9% OTHER: TRANSFERS FROM OTHER DHHS DIVISIONS 60% FEDERAL 27.1%	\$554,067	
	Contract Description:	This is the second amendment to the original contract which provides a Master Client Index solution that maintains a unique identifier for clients in programs and systems within the department. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount of the contract from \$1,275,000 to \$1,832,580 due to the continued need for these services.				
		Term of Contract:	07/10/2018 - 06/30/2026	Contract # 20123		
56.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - WELFARE FIELD SERVICES	CHANGE AND INNOVATION AGENCY, LLC	GENERAL 30% FEDERAL 70%	\$1,619,470	Sole Source
	Contract Description:	This is a new contract to provide ongoing lobby management system licensing, support and training.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 26043		
57.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	CARSON CITY	OTHER: COUNTY 34% FEDERAL 66%	\$141,555	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24927		
58.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	LYON COUNTY	OTHER: COUNTY 34% FEDERAL 66%	\$103,001	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24885		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
59.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	MINERAL COUNTY	OTHER: STATE SHARE OF COLLECTIONS 34% FEDERAL 66%	\$112,608	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity, and adjust support orders.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24932			
60.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	WASHOE COUNTY	OTHER: COUNTY 34% FEDERAL 66%	\$1,536,258	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24884			
61.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY ADMINISTRATION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	GENERAL 34% FEDERAL 66%	\$130,069	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides ongoing development of a Nevada child welfare training infrastructure and an intensive quality training and professional development system for undergraduate and graduate social work students. This amendment increases the maximum amount from \$2,162,700 to \$2,292,769 pursuant to Senate Bill 460 of the 2021 Legislative Session.				
	Term of Contract:	01/01/2021 - 06/30/2023	Contract # 23176			
62.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CALIENTE YOUTH CENTER	LINCOLN COUNTY HOSPITAL DISTRICT DBA LINCOLN COUNTY MEDICAL ASSOCIATES	GENERAL	\$262,264	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing medical services to youth in residence.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25586			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
63.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	FM MARKETING, LLC	FEDERAL	\$150,000	Sole Source
	Contract Description:	This is the fourth amendment to the original contract which provides ongoing custom media services. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$586,300 to \$736,300 due to the continued need for these services.				
		Term of Contract:	12/04/2018 - 06/30/2023	Contract # 21256		
64.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES DIVISION - VICTIMS OF CRIME	COST CONTAINMENT STRATEGIES, INC.	FEE: PENALTIES AND ASSESSMENTS	\$1,685,646	Sole Source
	Contract Description:	This is the fourth amendment to the original contract which provides ongoing medical billing review, claims administration and software programming, scanning, data input, vendor management, vendor portal, document storage, and retrieval services. This amendment extends the termination date from June 30, 2022 through June 30, 2023 and increases the contract maximum from \$8,436,049.27 to \$10,121,695.51 due to the continued need for these services.				
		Term of Contract:	01/01/2017 - 06/30/2023	Contract # 18222		
65.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	PERSHING COUNTY SCHOOL DISTRICT	FEDERAL	\$108,020	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing educational and vocational services for youthful offenders incarcerated at Lovelock Correctional Center assisting them in obtaining a high school equivalency or high school diploma.				
		Term of Contract:	10/01/2021 - 09/30/2022	Contract # 26025		
66.	550	DEPARTMENT OF AGRICULTURE - LIVESTOCK INSPECTION	BUREAU OF LAND MANAGEMENT	OTHER: REVENUE	\$200,000	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide an ongoing cattle roundup in southern Nevada.				
		Term of Contract:	Upon Approval - 04/14/2023	Contract # 25889		
67.	655	DEPARTMENT OF PUBLIC SAFETY - CRIMINAL HISTORY REPOSITORY	IDEMIA IDENTITY & SECURITY USA, LLC	FEE: CIVIL APPLICANT/ FINGERPRINT	\$516,676	Sole Source
	Contract Description:	This is the eighth amendment to the original contract which provides ongoing maintenance and repair of the LiveScan fingerprint machines in various law enforcement agencies. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount of the contract from \$1,973,700.24 to \$2,490,376.74 due to the continued need for these services.				
		Term of Contract:	07/01/2011 - 06/30/2026	Contract # 13175		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
68.	655	DEPARTMENT OF PUBLIC SAFETY - CRIMINAL HISTORY REPOSITORY	SCOTT NORBERG W. DBA NORSOFT CONSULTING	FEE: VARIOUS REPOSITORY	\$808,819	
	Contract Description:	This is the fourth amendment to the original contract which provides ongoing 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, 2022 to December 31, 2023 and increases the maximum amount from \$2,890,536 to \$3,699,355 due to the continued need for these services.				
		Term of Contract:	09/13/2016 - 12/31/2023	Contract # 17828		
69.	656	DEPARTMENT OF PUBLIC SAFETY - STATE EMERGENCY RESPONSE COMMISSION	IDSI INTERNATIONAL, INC.	HIGHWAY 40% FEE: HAZMAT 60%	\$288,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing technical support and service for the Online Hazmat Reporting System.				
		Term of Contract:	08/01/2022 - 07/31/2026	Contract # 26267		
70.	658	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY PLAN AND ADMINISTRATION	TYLER TECHNOLOGIES, INC.	HIGHWAY	\$310,000	
	Contract Description:	This is the second amendment to the original contract which provides ongoing software support, maintenance and hosting of the Electronic Citation and Accident Report System. This amendment increases the maximum amount from \$4,000,000 to \$4,310,000 due to changes required with the passage of Assembly Bill 116 from the 2021 Legislative Session.				
		Term of Contract:	10/01/2020 - 09/30/2024	Contract # 23637		
71.	700	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ADMINISTRATION	U.S. GEOLOGICAL SURVEY	GENERAL	\$129,680	Exempt
	Contract Description:	This is a new interlocal agreement to provide sagebrush ecosystem habitat quantification tools using Greater Sage-grouse as an indicator species.				
		Term of Contract:	Upon Approval - 12/31/2022	Contract # 26196		
72.	702	DEPARTMENT OF WILDLIFE – DATA AND TECHNOLOGY SERVICES	AMPLEX CORPORATION	FEE: FEDERAL EDUCK STAMP	\$182,856	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides processing services for the Federal Electronic Duck Stamp Program. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$150,000 to \$332,856 due to the continued need for these services.				
		This contract is contingent upon IFC approval of work program #C58772.				
		Term of Contract:	12/14/2021 - 06/30/2023	Contract # 24748		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
73.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES – STATE PARKS INTERPRETATIVE AND EDUCATION PROGRAM	TRAILHEAD LABS, INC.	OTHER: GIFT SHOP INCOME	\$125,000	
	Contract Description:	This is a new contract to provide services for a mobile application for park visitors' use across Nevada state parks.				
		Term of Contract:	Upon Approval - 06/12/2025	Contract # 26225		
74.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - WATER QUALITY PLANNING	SILVER STATE ANALYTICAL LABORATORIES, INC.	FEDERAL	\$630,000	
	Contract Description:	This is a new contract to provide analysis of water, sediment and biota samples to characterize the chemical, physical and biological conditions of surface waters in support of the statewide surface water quality monitoring program.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25891		
75.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - WATER QUALITY PLANNING	U.S. GEOLOGICAL SURVEY	OTHER: JOINT FUNDING AGREEMENT	\$102,602	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides a collection of continuous stream turbidity and temperature from two streams with significant sediment contributions to Lake Tahoe. This amendment extends the termination date from June 30, 2022 to June 30, 2024 and increases the maximum amount from \$99,400 to \$202,002 due to the continued need for these services.				
		Term of Contract:	08/09/2019 - 06/30/2024	Contract # 22144		
76.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	ALLIANCE ENTERPRISES, INC. OF WASHINGTON	GENERAL 21.3% FEDERAL 78.7%	\$1,825,458	Sole Source
	Contract Description:	This is a new contract to provide ongoing licensing and professional services for the Aware Case Management System.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25922		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
77.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - VOCATIONAL REHABILITATION	DP VIDEO PRODUCTIONS, LLC	GENERAL 17.9% OTHER: BUSINESS ENTERPRISE SET-ASIDE 6.8% FEDERAL 75.3%	\$400,000	
	Contract Description:	This is a new contract to provide ongoing services that expand the current multi-media outreach platform to promote the Nevada Vocational Rehabilitation Program.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25509		
78.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	CARAHSOFT TECHNOLOGY	GENERAL 14% OTHER: BUSINESS ENTERPRISE SET ASIDE 3% FEDERAL 83%	\$328,195	
	Contract Description:	This is the fourth amendment to the original work plan under master service agreement #18855 which provides cloud services. This amendment extends the termination date from June 30, 2022 to June 29, 2023 and increases the maximum amount from \$872,109.71 to \$1,200,304.94 due to the continued need for these services.				
		Term of Contract:	03/30/2020 - 06/29/2023	Contract # 23046		
79.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	MELANIE S. ARTHUR	FEDERAL	\$157,750	
	Contract Description:	This is the first amendment to the original contract which provides an update to existing business services office policies, procedures and training materials for the workforce programs to align with U.S. Department of Labor workforce regulations. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$157,750 to \$315,550 due to the continued need for these services.				
		Term of Contract:	12/14/2021 - 06/30/2023	Contract # 25049		
80.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	WORKFORCE CONNECTIONS	FEDERAL	\$164,964	Exempt
	Contract Description:	This is a new interlocal agreement to provide the equipment needed to launch information technology and culinary vocational programs in four at-risk schools in the Clark County School District.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 26009		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
81.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - UNEMPLOYMENT INSURANCE	GEOGRAPHIC SOLUTIONS, INC.	FEDERAL	\$2,712,528	Exempt
	Contract Description:	This is the fifth amendment to the original contract which provides software and user training for the Pandemic Unemployment Assistance Benefits System. This amendment extends the termination date from June 30, 2022 to June 30, 2024 and increases the maximum amount from \$6,622,315 to \$9,334,843 due to the continued need for these services.				
		Term of Contract:	04/09/2020 - 06/30/2024	Contract # 23103		
82.	908	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - ADMINISTRATIVE SERVICES - INFORMATION DEVELOPMENT AND PROCESSING	GEOGRAPHIC SOLUTIONS, INC.	FEDERAL	\$207,963	
	Contract Description:	This is the sixth amendment to the original contract which provides an automated reporting and management information system that includes hardware, software, implementation, maintenance and support to provide various self-service jobseeker and employer system modules for workforce agency offices. This amendment extends the termination date from June 30, 2022 to September 30, 2022 and increases the maximum amount from \$4,238,320 to \$4,446,283 due to the continued need for these services.				
		Term of Contract:	02/14/2017 - 09/30/2022	Contract # 18376		
83.	B011	LICENSING BOARDS AND COMMISSIONS - CONTRACTORS	MCDONALD CARANO, LLP	FEE: LICENSURE	\$240,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides administrative law judge services. This amendment extends the termination date from July 13, 2022 to July 13, 2025 and increases the maximum amount from \$160,000 to \$400,000 due to the continued need for these services.				
		Term of Contract:	07/14/2020 - 07/13/2025	Contract # 23128		
84.	B011	LICENSING BOARDS AND COMMISSIONS - CONTRACTORS	THE ALLISON LAW FIRM CHTD.	FEE: LICENSURE	\$400,000	Professional Service
	Contract Description:	This is a new contract to provide legal services.				
		Term of Contract:	Upon Approval - 05/31/2024	Contract # 26337		

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: **25594** Amendment Number: **1**

Legal Entity Name: **CJ Speaks**

Agency Name: **OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY** Contractor Name: **CJ Speaks**

Agency Code: **014** Address: **1453 5th Street**

Appropriation Unit: **1003-25** City/State/Zip: **Oakland, CA 94607**

Is budget authority available?: **Yes** Contact/Phone: **Craig Settles 510/387-4176**

If "No" please explain: **Not Applicable** Vendor No.: **T32012223**

NV Business ID: **NV20222393184**

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 **03/28/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Consulting Services**

5. Purpose of contract:

This is the first amendment to the original contract which provides consulting services as a Digital Equity Program Director. This amendment extends the termination date from June 30, 2022 to March 26, 2026 and increases the maximum amount from \$47,315.10 to \$519,897.10 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:	\$47,315.10	\$47,315.10	\$47,315.10	Yes - Info
2. Amount of current amendment (#1):	\$472,582.00	\$472,582.00	\$519,897.10	Yes - Action
3. New maximum contract amount:	\$519,897.10			
and/or the termination date of the original contract has changed to:	03/27/2026			

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada's goal of universal access to broadband cannot be achieved without a commitment and plan for digital equity. Nevada received funding for broadband infrastructure and any plans for construction and deployment of infrastructure must include a digital equity component. This position will work with the OSIT infrastructure team to ensure that the digital equity support systems are in place so that all Nevadans have the opportunity to utilize broadband for education, work, or health monitoring.

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

State employees lack the expertise required for this work. Further, OSIT is a small agency and its employees are unable to dedicate the time required to administer this new federal program and complete its statutory obligations.

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?

Based on Craig Settles resume, this vendor was in the best interest of the State.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	05/06/2022 14:47:30 PM
Division Approval	jkidd	05/06/2022 15:41:22 PM

Department Approval	ssands	05/10/2022 15:29:22 PM
Contract Manager Approval	ssands	05/12/2022 10:35:55 AM
Budget Analyst Approval	dlenzner	05/20/2022 17:43:47 PM
BOE Agenda Approval	dlenzner	05/20/2022 17:43:49 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: **26219**

Agency Name:	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	Legal Entity Name:	Columbia Telecommunications Corporation
Agency Code:	014	Contractor Name:	Columbia Telecommunications Corporation
Appropriation Unit:	1003-11	Address:	CTC Technology & Energy 10613 Concord Street
Is budget authority available?:	Yes	City/State/Zip	Kensington, MD 20895
If "No" please explain:	Not Applicable	Contact/Phone:	301-933-1488
		Vendor No.:	pending
		NV Business ID:	NV20222447818

To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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

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

Agency Reference #: RFP # 01GO-S1869 JS

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/14/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/13/2024**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Broadband**

5. Purpose of contract:

This is a new contract to provide the development and implementation of a broadband infrastructure grant program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$999,750.00**

Other basis for payment: Per Itemized Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Office of Science, Innovation and technology, (OSIT) will be required to create and administer grant programs and processes to subgrant the funds to eligible entities. While some room will exist to insert State priorities, these grant programs and processes will be defined in large part by the federal agencies that administer the funds, and OSIT's programs will need to conform to and comply with the accompanying federal guidelines.

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

The State lacks both the expertise and the manpower to do the work required.

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 #01GO-S1869, 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: 03/22/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	05/03/2022 16:35:37 PM
Division Approval	jkidd	05/04/2022 09:57:15 AM
Department Approval	ssands	05/18/2022 08:39:46 AM
Contract Manager Approval	ssands	05/18/2022 08:39:49 AM
Budget Analyst Approval	dlenzner	05/20/2022 15:19:24 PM
BOE Agenda Approval	dlenzner	05/20/2022 15:19:27 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: **25305**Amendment Number: **2**Legal Entity Name: **GB & Associates**Agency Name: **OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY**Contractor Name: **GB & Associates**Agency Code: **014**Address: **10706 Misty Meadows Dr.**Appropriation Unit: **1003-25**Is budget authority available?: **Yes**City/State/Zip: **Reno, NV 89521**

If "No" please explain: Not Applicable

Contact/Phone: **Gary Bayer 408/728/0910**Vendor No.: **T32011891**NV Business ID: **NV20222328181**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/16/2021**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Fiber Consulting**

5. Purpose of contract:

This is the second amendment to the original contract which provides consultant services to oversee a fiber network development project from start to finish. This amendment extends the termination date from June 30, 2022 to December 15, 2025 and increases the maximum amount from \$77,696.14 to \$561,862.14 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:	\$69,716.00	\$69,716.00	\$69,716.00	Yes - Info
a. Amendment 1:	\$7,980.14	\$7,980.14	\$77,696.14	No
2. Amount of current amendment (#2):	\$484,166.00	\$492,146.14	\$561,862.14	Yes - Action
3. New maximum contract amount:	\$561,862.14			
and/or the termination date of the original contract has changed to:	12/15/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada will receive at minimum \$235 million in federal funding for broadband infrastructure development. Part of that federal funding may be used for administration of the infrastructure programs. OSIT requires additional expertise from an individual that has experience building and maintaining fiber networks in order to ensure the State's expenditure of funds is successful. Therefore, OSIT intends to enter into a contract for consulting services.

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

State employees lack the expertise required for this work. Further, OSIT is a small agency and its employees are unable to dedicate the time required to administer this new federal program and complete its statutory obligations.

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?

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

10. a. Does the contract contain any IT components? No

- b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	05/06/2022 14:46:48 PM
Division Approval	jkidd	05/06/2022 16:31:21 PM

Department Approval	ssands	05/11/2022 16:14:57 PM
Contract Manager Approval	ssands	05/12/2022 10:33:55 AM
Budget Analyst Approval	dlenzner	05/21/2022 21:18:42 PM
BOE Agenda Approval	dlenzner	05/21/2022 21:19:49 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: **25595** Amendment Number: **1**

Agency Name: **OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY** Legal Entity Name: **Lukas Kucinski, DBA Kucinski GIS**

Agency Code: **014** Contractor Name: **Lukas Kucinski, DBA Kucinski GIS**

Appropriation Unit: **1003-25** Address: **1551 Minor Avenue Apt. 603**

Is budget authority available?: **Yes** City/State/Zip: **Seattle, WA 98101**

If "No" please explain: Not Applicable Contact/Phone: **Lukas Kucinski 773/793-0471**

Vendor No.: **T32012110**

NV Business ID: **NV20222365832**

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 **03/22/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Consulting Services**

5. Purpose of contract:

This is the first amendment to the original contract which provides consulting services as a geographic information system and data visualization analyst. This amendment extends the termination date from June 30, 2022 to March 21, 2026 and increases the maximum amount from \$43,590.36 to \$497,816.36 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:	\$43,590.36	\$43,590.36	\$43,590.36	Yes - Info
2. Amount of current amendment (#1):	\$454,226.00	\$454,226.00	\$497,816.36	Yes - Action
3. New maximum contract amount:	\$497,816.36			
and/or the termination date of the original contract has changed to:	03/21/2026			

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada will receive at minimum \$235 million in federal funding for broadband infrastructure development. Part of that federal funding may be used for administration of the infrastructure programs. OSIT requires additional expertise in the field of GIS and data visualization in order to map broadband infrastructure paid for by State grant funds, interpret GIS and mapping data, assist in the creation and operationalization of broadband funding strategies through the analysis of existing infrastructure and an analysis of needed infrastructure, analyze mapping information provided by grant applicants, ensure compliance with federal funding rules, and other tasks.

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

State employees lack the expertise required for this work. Further, OSIT is a small agency and its employees are unable to dedicate the time required to administer this new federal program and complete its statutory obligations.

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?

Based on Lukas Kucinski's resume, this vendor was in the best interest of the State.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	05/06/2022 14:48:40 PM
Division Approval	jkidd	05/06/2022 15:35:15 PM
Department Approval	ssands	05/12/2022 07:49:21 AM
Contract Manager Approval	ssands	05/12/2022 10:32:01 AM
Budget Analyst Approval	mranki1	05/12/2022 10:53:13 AM
BOE Agenda Approval	dlenzner	05/22/2022 19:20:16 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: **24507**Amendment
Number: **1**Agency Name: **OFFICE OF SCIENCE, INNOVATION
AND TECHNOLOGY**Legal Entity
Name: **TEL/LOGIC INC., DBA E-RATE
CENTRAL**Agency Code: **014**Contractor Name: **TEL/LOGIC INC., DBA E-RATE
CENTRAL**Appropriation Unit: **1003-11**Address: **400 POST AVE STE 410**Is budget authority
available?: **Yes**City/State/Zip **WESTBURY, NY 11590-2291**

If "No" please explain: Not Applicable

Contact/Phone: **ERIC FLOCK 516/801-7885**Vendor No.: **T29039669**NV Business ID: **NV20171445786**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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	93.00 %	Fees	0.00 %
X	Federal Funds	7.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP # 01GO-S1463**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/13/2021**
Examiner's approval?Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2025**
Termination Date:Contract term: **3 years and 353 days**4. Type of contract: **Contract**Contract description: **Broadband Consulting**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing broadband technical support, project management, and consulting services to support the planning, mapping, and procurement of broadband services. This amendment increases the maximum amount from \$2,211,840 to \$2,370,940 due to the increased need for these services.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,211,840.00	\$2,211,840.00	\$2,211,840.00	Yes - Action
2. Amount of current amendment (#1):	\$159,100.00	\$159,100.00	\$159,100.00	Yes - Action
3. New maximum contract amount:	\$2,370,940.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 223.610 requires OSIT to coordinate activities in the State relating to the planning, mapping, and procurement of broadband service

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #01GO-S1463 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: 04/14/2021 Anticipated re-bid date: 01/15/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

OSIT, Agency 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:

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	jpierro1	05/09/2022 14:27:02 PM
Division Approval	jkidd	05/10/2022 16:13:09 PM
Department Approval	ssands	05/10/2022 16:20:18 PM
Contract Manager Approval	ssands	05/10/2022 16:20:28 PM
Budget Analyst Approval	dlenzner	05/22/2022 19:13:30 PM
BOE Agenda Approval	dlenzner	05/22/2022 19:13:37 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: **24499** Amendment Number: **1**

Agency Name: **ATTORNEY GENERAL'S OFFICE** Legal Entity Name: **Weinberg Wheeler Hudgins Dunn & Dial, LLC**

Agency Code: **030** Contractor Name: **Weinberg Wheeler Hudgins Dunn & Dial, LLC**

Appropriation Unit: **1030-04** Address: **6385 South Rainbow Boulevard Ste400**

Is budget authority available?: **Yes** City/State/Zip: **Las Vegas, NV 89118**

If "No" please explain: Not Applicable Contact/Phone: **702-938-3844**

Vendor No.: **Pending**

NV Business ID: **NV20051683659**

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

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

Termination Date:

Contract term: **2 years and 7 days**4. Type of contract: **Contract**Contract description: **Outside Counsel**

5. Purpose of contract:

This is the first amendment to the original contract which provides outside counsel services for case number A-20-814296-C for Lopez vs. State of Nevada. This amendment extends the termination date from May 31, 2022 to May 31, 2023 and increases the maximum amount from \$40,000 to \$100,000 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:	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
2. Amount of current amendment (#1):	\$60,000.00	\$60,000.00	\$100,000.00	Yes - Action
3. New maximum contract amount:	\$100,000.00			
and/or the termination date of the original contract has changed to:	05/31/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

To provide conflict counsel to Nurses Leilani Flores, Brigido Bayawa, and Ma Lita Sastrillo who are sued individually in their personal and/or official capacities as employees of the State of Nevada.

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

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

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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)?

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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cdavis	04/07/2022 15:25:18 PM
Division Approval	jhoba2	04/07/2022 15:31:21 PM
Department Approval	jhoba2	04/07/2022 15:31:25 PM
Contract Manager Approval	Iramire7	04/08/2022 20:52:18 PM

Budget Analyst Approval
BOE Agenda Approval

hfield
hfield

05/20/2022 16:15:01 PM
05/20/2022 16:15:05 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: **10619**Amendment
Number: **9**Agency Name: **ATTORNEY GENERAL'S OFFICE**Legal Entity
Name: **APPRISS INSIGHTS, LLC**Agency Code: **030**Contractor Name: **APPRISS INSIGHTS, LLC**Appropriation Unit: **1042-18**Address: **9901 LINN STATION RD
STE 200**Is budget authority
available?: **Yes**City/State/Zip: **LOUISVILLE, KY 40223**

If "No" please explain: Not Applicable

Contact/Phone: 800.816.0491

Vendor No.: Pending

NV Business ID: NV20222381882

To what State Fiscal Year(s) will the contract be charged? **2010-2023**

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	69.00 % Participating counties
X Federal Funds	31.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP #1846

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **04/01/2010**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2022**Contract term: **13 years and 93 days**4. Type of contract: **Contract**Contract description: **Victim Info System**

5. Purpose of contract:

This is the ninth amendment to the original contract which provides ongoing victim notification in the Statewide Automated Victim Information and Notification Program in Nevada This amendment changes the assignment from Appriss, Inc. to Appriss Insights, LLC, extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$2,450,438.21 to \$2,675,935.01 to allow time for the completion of a new request for proposal.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$490,100.00	\$490,100.00	\$490,100.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$181,000.00	\$181,000.00	\$181,000.00	Yes - Action
c. Amendment 3:	\$377,700.00	\$377,700.00	\$377,700.00	Yes - Action
d. Amendment 4:	\$194,456.00	\$194,456.00	\$194,456.00	Yes - Action
e. Amendment 5:	\$174,473.00	\$174,473.00	\$174,473.00	Yes - Action
f. Amendment 6:	\$194,515.50	\$194,515.50	\$194,515.50	Yes - Action
g. Amendment 7:	\$838,194.00	\$838,194.00	\$838,194.00	Yes - Action
h. Amendment 8:	\$0.00	\$0.00	\$0.00	No

2.	Amount of current amendment (#9):	\$225,496.80	\$225,496.80	\$225,496.80	Yes - Action
3.	New maximum contract amount:	\$2,675,935.30			
	and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The 1983 Nevada Legislature mandated certain rights and guarantees to crime victims and witnesses. Accordingly, Chapter 178 of the Nevada Revised Statutes recognizes the needs and rights of crime victims. Among other provisions, Chapter 178 mandates that a victim be notified by law enforcement of the location of the defendant following arrest, during prosecution of the criminal case, during a sentence to confinement, and when there is any release or escape of the defendant from confinement.

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

No state agencies or employees have the equipment or the experience to provide these services.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

This contractor was selected as the best solution by the evaluation committee based on pre-determined evaluation criteria.

d. Last bid date: 01/02/2010 Anticipated re-bid date: 06/30/2022

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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. Contractor entered into a contract with the Department of Public Safety, June 2009 and has been satisfied with their services

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	cdavis	05/26/2022 13:10:23 PM
Division Approval	jhoba2	05/26/2022 13:11:08 PM
Department Approval	jhoba2	05/26/2022 13:11:13 PM
Contract Manager Approval	Iramire7	05/26/2022 13:48:21 PM
EITS Approval	ljea	05/26/2022 14:34:36 PM
Budget Analyst Approval	hfield	05/26/2022 15:23:27 PM
BOE Agenda Approval	hfield	05/26/2022 15:23:31 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:

Approval #: 450 CA

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to only the contact(s) listed below:		
	ENTER STATE AGENCY NAME: Office of the Attorney General		
	Contact Name and Title	Phone Number	Email Address
	Lesley Volkov, Management Analyst II	775-684-1119	lvolkov@ag.nv.gov
	Debbie Tanaka, Management Analyst IV	775-684-1110	DTanaka@ag.nv.gov

2	Contractor Information:	
	Contractor Name:	Appriss, Inc
	Contact Name:	Jonathon Waunch
	Complete Address: City, State and Zip Code	10401 Linn Station Road Louisville, KY 40223
	Phone Number:	502-815-5768
	Email Address:	Jwanch@appriss.com

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		RFP	#:	1846
	Enter CETS Number:	#10619			
	Contract Amount:	\$2,450,438.21			
	Contract Term:	Start Date:	04/01/2010	End Date:	06/30/2022

Rec'd 04/20/22 /auto✓

Purchasing Use Only:	
Approval #:	4500

Current Contract Information:				
Solicitation Type, if applicable:			#:	
4	Enter CETS Number:	#10619		
	Initial Contract Amount:	\$490,100		
	Contract Term:	Start Date:	04/01/2010	End Date: 06/30/2011

Amendment Information – List <u>all previously</u> approved amendments:				
	<i>Amd #:</i>	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
5	#1	Extend termination date to 06/30/12		06/30/2012
	#2	Increase amount and extend term date	671,100	06/30/2013
	#3	Increase amount and extend term date	1,048,800	06/30/2017
	#4	Increase amount	1,243,256	
	#5	Increase amount	1,417,729	
	#6	Increase amount and extend termination	1,612,244.50	06/30/2018
	#7	Increase amount and extend termination	2,450,438.21	06/30/2022
	#8	Add required language for use of Federal Laws and Authorities into Attachment I	0	n/a

<u>Proposed</u> Amendment Information:				
	<i>Amd #:</i>	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
6	#9	Increase amount and extend termination date	\$2,675,935.01 \$225,496.80	06/30/2023

What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?	
7	<p>Appriss provides the technical interface, operations and maintenance of Nevada's Crime Victim Information Notification Everyday system. This is an ongoing automatic, electronic notification system that meets the requirements per NRS 178.4715 to provide registrants status information on prisoners incarcerated through Nevada prison & jail facilities. The Office of the Attorney General (OAG) began the RFP process with State Purchasing in November of 2021. However, State Purchasing has indicated they will not be able to complete an RFP and have a new contract in place prior to the current contract expiration date. By not extending this contract, the OAG would not be in compliance with NRS 178.4715 due to the possibility of a lapse of service with Appriss until a new contract can be awarded.</p>

#450 (2)

	What are the potential consequences to the State if the contract extension request is denied?
8	VINE has been in place statewide since 2010. Consequentially, Nevada would lose its VINE capabilities and potentially be out of compliance according to NRS178.4715 that mandates that a victim be notified of an offender's custody changes. This would be forced to have this task back onto the individual jurisdictions which was a burden due to lack of resources and manpower prior to the VINE implementation.

Purchasing Use Only:	
Approval #:	45008

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Lesley Volkov

Signature of Agency Representative Initiating Request

Lesley Volkov

Print Name of Agency Representative Initiating Request

01/11/2022

Date

Jessica Hoban

Signature of Agency Head Authorizing Request

Jessica Hoban

Print Name of Agency Head Authorizing Request

1/13/22

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

*** NOTE: TIN Approval Memo must be included as an attachment in CETS ***

Signed:

Kim O. Doby

Administrator, Purchasing Division or Designee

5/2/22

Date

Steve Sisolak
Governor



Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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

MEMORANDUM

TO: Jessica Hoban, Chief Financial Officer, AG
Hillery Pichon, IT Chief, AG
Tom Sanchez, Information Security Officer, AG
Crystal Novotny, Administrative Services Officer, AG
Rick Lacanilao, IT Manager, AG
Ron Olson, IT Professional III, AG

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
Jason Benshoof, IT Chief, Agency IT Services, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – AG – TIN 471 – *VINE Contract Extension* – BA 1042

DATE: April 19, 2022

We have completed our review for the Attorney General's Office's (AG) – *VINE Contract Extension* – TIN 471.

The submitted TIN, for an estimated value of \$444,425.76 in the FY22/FY23 biennium and \$232,261.68 in the FY24/FY25 biennium (71% State Fees and 29% Federal Grant), is for a one-year extension with the Statewide Automated Victim Information and Notification Program in Nevada and to remain in compliance with NRS 178, which guarantees the rights of crime victims and witnesses to be notified of the location of a defendant at various stages of the legal and justice processes.

The agency will be submitting an RFP for a SaaS or cloud solution for similar, ongoing services through

CSB #10619

State Purchasing. This mission critical investment is needed for state compliance and to ensure the rights of Nevada's citizens who are victims of crimes are protected.

The agency considers the investment and final implementation to have an ongoing low security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies.

A copy of this memo has 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: **26086**Agency Name: **SECRETARY OF STATE'S OFFICE**Agency Code: **040**Appropriation Unit: **1051-16**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER, INC.**Contractor Name: **GARTNER, INC.**Address: **980 9TH STREET****SUITE 2150**City/State/Zip: **SACRAMENTO, CA 95814**Contact/Phone: **YVETTE TOLEDO 602-561-8599**Vendor No.: **PUR0005339A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: **040**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/02/2022**Contract term: **184 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **Scope Support**

5. Purpose of contract:

This is a new service agreement under master service agreement 99SWC-NV22-9032 which provides project scope development and post-production support development services for the Voter Registration Election Management System Request For Proposal.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$130,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The State has outlined a vision whereas Voter Registration will move from a decentralized bottoms-up solution to a centralized Top-Down system by January 1, 2024 (per 2021 AB422 & 432). In addition to Voter Registration, the Secretary of State's vision is to provide Elections Management functionality to all the Counties to create a more unified, consistent and efficient Elections Eco-System. The VREMS Project represents a significant transformation to the way the State of Nevada manages Voter Registration and Elections. Gartner has subject matter expertise in making the migration from a bottom up to a top-down voter registration system. This expertise makes them uniquely qualified to provide a development strategy and scope of work which will be used when the Secretary of State's office issues the RFP for a VREMS solution.

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

State employees lack the knowledge and expertise to provide these services. An outside group of experts like Gartner has the resources and 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?

PASS Agreement under NASPO contract.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	shudder	04/20/2022 14:56:42 PM
Division Approval	shudder	04/20/2022 14:56:47 PM
Department Approval	shudder	04/20/2022 14:56:52 PM
Contract Manager Approval	adale	04/20/2022 15:44:24 PM
Budget Analyst Approval	hfield	05/23/2022 15:45:18 PM
BOE Agenda Approval	hfield	05/24/2022 11:33:31 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25993**Agency Name: **TREASURER - HIGHER
EDUCATION TUITION**Agency Code: **052**Appropriation Unit: **1081-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Gabriel, Roeder, Smith & Company

Contractor Name: **Gabriel, Roeder, Smith & Company**Address: **One Towne Square
Suite 800**City/State/Zip: **Southfield, MI 48076**

Contact/Phone: Judy Kermans 2487999000

Vendor No.: T29032482

NV Business ID: NV20131105672

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % College Savings Endowment Fund**

Agency Reference #: RFP 05TO-S1788 TB

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Actuarial Services**

5. Purpose of contract:

This is a new contract to provide actuarial services and the annual pricing models for the Nevada Prepaid Tuition Program contracts.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,500.00**

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?

NRS 353B.190 mandates an independent actuarial study of the Higher Education Trust Fund be completed each year and price modeling for the Program contract must be set annually prior to open enrollment.

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

The State Treasurer's office does not employ a certified actuary or anyone with the required skills necessary to comply with NRS 353B.190.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1788, 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: 01/05/2022 Anticipated re-bid date: 01/05/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer's Office June 2013 - Present 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	alaw1	05/02/2022 15:48:39 PM
Division Approval	alaw1	05/02/2022 15:48:41 PM
Department Approval	alaw1	05/02/2022 15:48:43 PM
Contract Manager Approval	alaw1	05/02/2022 15:48:45 PM
Budget Analyst Approval	dlenzner	05/22/2022 19:05:48 PM
BOE Agenda Approval	dlenzner	05/22/2022 19:05:59 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: **25893**

Agency Name: TREASURER - UNCLAIMED PROPERTY	Legal Entity Name: AUDIT SERVICES U.S., LLC
Agency Code: 054	Contractor Name: AUDIT SERVICES U.S., LLC
Appropriation Unit: 3815-14	Address: 370 Lexington Ave, Suite 707
Is budget authority available?: Yes	City/State/Zip: NEW YORK, NY 10017-6589
If "No" please explain: Not Applicable	Contact/Phone: Ben Spann 2253240139
	Vendor No.: T81088031
	NV Business ID: NV20051034334

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts

Agency Reference #: RFP #05TO-S1789 TB

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 06/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer � Jan 2005 through present
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	alaw1	05/02/2022 15:37:33 PM
Division Approval	alaw1	05/02/2022 15:37:38 PM
Department Approval	alaw1	05/02/2022 15:37:41 PM
Contract Manager Approval	alaw1	05/02/2022 15:37:45 PM
Budget Analyst Approval	dlenzner	05/22/2022 13:47:40 PM
BOE Agenda Approval	dlenzner	05/22/2022 13:47:43 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: **25901**Agency Name: **TREASURER - UNCLAIMED PROPERTY**Agency Code: **054**Appropriation Unit: **3815-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Discovery Audit Services, LLC**Contractor Name: **Discovery Audit Services, LLC**Address: **7515 Jefferson Hwy #244**City/State/Zip: **Baton Rouge, LA 70806**Contact/Phone: **Mr. J. King Woolf, III 225-928-9175**Vendor No.: **T29043639**NV Business ID: **NV20181283767**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts**Agency Reference #: **RFP # 05TO-S1789 TB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer, July 1, 2018 � Present
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	alaw1	05/02/2022 15:46:57 PM
Division Approval	alaw1	05/02/2022 15:47:00 PM
Department Approval	alaw1	05/02/2022 15:47:02 PM
Contract Manager Approval	alaw1	05/02/2022 15:47:04 PM
Budget Analyst Approval	dlenzner	05/22/2022 14:27:28 PM
BOE Agenda Approval	dlenzner	05/22/2022 14:27:31 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: **25898**

Agency Name: TREASURER - UNCLAIMED PROPERTY	Legal Entity Name: EECS LLC
Agency Code: 054	Contractor Name: EECS LLC
Appropriation Unit: 3815-14	Address: 111 Broadway, Suite 2002
Is budget authority available?: Yes	City/State/Zip: New York, NY 10006
If "No" please explain: Not Applicable	Contact/Phone: Oliver Olanoff 646-589-7640
	Vendor No.: T29045240
	NV Business ID: NV20222405294

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts

Agency Reference #: **RFP # 05TO-S1789 TB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	alaw1	05/02/2022 15:45:15 PM
Division Approval	alaw1	05/02/2022 15:45:17 PM
Department Approval	alaw1	05/02/2022 15:45:19 PM
Contract Manager Approval	alaw1	05/02/2022 15:45:21 PM
Budget Analyst Approval	dlenzner	05/22/2022 14:34:19 PM
BOE Agenda Approval	dlenzner	05/22/2022 14:34:23 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: **25897**Agency Name: **TREASURER - UNCLAIMED PROPERTY**Agency Code: **054**Appropriation Unit: **3815-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Innovative Advocate Group Incorporated

Contractor Name: **Innovative Advocate Group Incorporated**Address: **370 State Highway 35, Ste 201**City/State/Zip: **Red Bank, NJ 07701**

Contact/Phone: Kelly DEmilia 732-576-7710

Vendor No.: T29045267

NV Business ID: NV20181190220

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts**

Agency Reference #: RFP # 05TO-S1789 TB

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	alaw1	05/02/2022 15:43:24 PM
Division Approval	alaw1	05/02/2022 15:43:27 PM
Department Approval	alaw1	05/02/2022 15:43:29 PM
Contract Manager Approval	alaw1	05/02/2022 15:43:32 PM
Budget Analyst Approval	dlenzner	05/22/2022 18:36:13 PM
BOE Agenda Approval	dlenzner	05/22/2022 18:36:17 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: **25902**Agency Name: **TREASURER - UNCLAIMED PROPERTY**Agency Code: **054**Appropriation Unit: **3815-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Kelmar Associates, LLC

Contractor Name: **Kelmar Associates, LLC**Address: **500 Edgewater Dr. Suite 525**City/State/Zip: **Wakefield, MA 01880**

Contact/Phone: Catherine Graham Zejnullahu 781-928-9231

Vendor No.: T27026457

NV Business ID: NV20061245329

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts

Agency Reference #: RFP # 05TO-S1789 TB

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer, July 2018 � Present
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	alaw1	05/02/2022 15:47:46 PM
Division Approval	alaw1	05/02/2022 15:47:48 PM
Department Approval	alaw1	05/02/2022 15:47:50 PM
Contract Manager Approval	alaw1	05/02/2022 15:47:53 PM
Budget Analyst Approval	dlenzner	05/22/2022 18:40:10 PM
BOE Agenda Approval	dlenzner	05/22/2022 18:40:14 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: **25896**Agency Name: **TREASURER - UNCLAIMED PROPERTY**Agency Code: **054**Appropriation Unit: **3815-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Kroll Government Solutions, LLC

Contractor Name: **Kroll Government Solutions, LLC**Address: **500 Chase Parkway**City/State/Zip: **Waterbury, CT 06708**

Contact/Phone: Caroline Marshall 6465974705

Vendor No.: T32000982

NV Business ID: NV20101136695

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts**

Agency Reference #: RFP # 05TO-S1789 TB

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer, June 2010 � Present
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	alaw1	05/02/2022 15:41:28 PM
Division Approval	alaw1	05/02/2022 15:41:32 PM
Department Approval	alaw1	05/02/2022 15:41:35 PM
Contract Manager Approval	alaw1	05/02/2022 15:41:38 PM
Budget Analyst Approval	dlenzner	05/22/2022 18:46:16 PM
BOE Agenda Approval	dlenzner	05/22/2022 18:46:19 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25894**Agency Name: **TREASURER - UNCLAIMED PROPERTY**Agency Code: **054**Appropriation Unit: **3815-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Specialty Audit Services, LLC**Contractor Name: **Specialty Audit Services, LLC**Address: **724 Montgomery Avenue**City/State/Zip: **Narberth, PA 19072**Contact/Phone: **Michael Danowitz 610-617-0452**Vendor No.: **T29045241**NV Business ID: **NV20222379055**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts**Agency Reference #: **RFP # 05TO-S1789 TB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 06/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	alaw1	05/02/2022 15:39:32 PM
Division Approval	alaw1	05/02/2022 15:39:35 PM
Department Approval	alaw1	05/02/2022 15:39:37 PM
Contract Manager Approval	alaw1	05/02/2022 15:39:39 PM
Budget Analyst Approval	dlenzner	05/24/2022 10:26:24 AM
BOE Agenda Approval	dlenzner	05/24/2022 10:26:28 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: **25900**

Agency Name:	TREASURER - UNCLAIMED PROPERTY	Legal Entity Name:	Treasury Services Group, LLC
Agency Code:	054	Contractor Name:	Treasury Services Group, LLC
Appropriation Unit:	3815-14	Address:	235 N. Duke Street, Suite 300
Is budget authority available?:	Yes	City/State/Zip	Lancaster, PA 17602
If "No" please explain:	Not Applicable	Contact/Phone:	Shane Osborn 402-682-7260
		Vendor No.:	T27042228
		NV Business ID:	NV20181287671

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Abandoned Property Receipts

Agency Reference #: RFP # 05TO-S1789 TB

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Auditing Services**

5. Purpose of contract:

This is a new contract to provide unclaimed property audits, compliance reviews and to collect unclaimed property to be delivered to the Treasurer's Office on a percentage reimbursement basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00**

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?

The Treasurer Office has the authority to conduct unclaimed property audits to ensure property is reported correctly and timely under NRS and NAC 120A .

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

The Treasurer Office does not have the staff or expertise to conduct these nationwide audits.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S1789, 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: 01/21/2022 Anticipated re-bid date: 01/21/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

State Treasurer, 7/1/2018-Present

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	alaw1	05/02/2022 15:46:10 PM
Division Approval	alaw1	05/02/2022 15:46:12 PM
Department Approval	alaw1	05/02/2022 15:46:14 PM
Contract Manager Approval	alaw1	05/02/2022 15:46:17 PM
Budget Analyst Approval	dlenzner	05/22/2022 18:55:18 PM
BOE Agenda Approval	dlenzner	05/22/2022 18:57:31 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: **25163**Amendment
Number: **1**Legal Entity
Name: **AINSWORTH ASSOCIATES**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Contractor Name: **AINSWORTH ASSOCIATES**Agency Code: **082**Address: **1420 HOLCOMB AVE. SUITE 201**Appropriation Unit: **All Appropriations**Is budget authority
available?: **No**City/State/Zip **RENO, NV 89502-8003**

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3650, expenditure category 10, Army Facilities.

Contact/Phone: **775-329-9100**Vendor No.: **T27012245A**NV Business ID: **NV20201704362**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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

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

Agency Reference #: **114504**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **11/10/2021**
Examiner's approval?

Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2025**
Termination Date:Contract term: **3 years and 232 days**4. Type of contract: **Contract**
Contract description: **Arch/Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Army National Guard Combined Support Maintenance Shop Heating Ventilation and Air Conditioning (HVAC) Unit Replacement: CIP Project No. 20-A008; SPWD Contract No. 114504. This amendment increases the maximum amount from \$71,000 to \$103,000 due to the additional schematic design needed for the HVAC systems replacement.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$71,000.00	\$71,000.00	\$71,000.00	Yes - Info
2. Amount of current amendment (#1):	\$32,000.00	\$32,000.00	\$103,000.00	Yes - Action
3. New maximum contract amount:	\$103,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

"Agency Submitted Application (NV Army National Guard) HVAC Unit Replacement - CSMS.

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

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

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	nmann	05/09/2022 16:39:47 PM
Division Approval	nmann	05/09/2022 16:39:59 PM

Department Approval	nmann	05/09/2022 16:40:11 PM
Contract Manager Approval	lwildes	05/10/2022 10:24:12 AM
Budget Analyst Approval	nkephart	05/12/2022 14:29:15 PM
BOE Agenda Approval	jrodrig9	05/23/2022 13:26:29 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: **26243**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **All Appropriations**Is budget authority available?: **No**

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3161, expenditure category 60, ARPA - Stein Renovations

Legal Entity Name: **KGA ARCHITECTURE**Contractor Name: **KGA ARCHITECTURE**Address: **4170 W. DIABLO DR.**City/State/Zip: **LAS VEGAS, NV 89148**Contact/Phone: **702-367-6900**Vendor No.: **T81092560**NV Business ID: **NV19771007004**To what State Fiscal Year(s) will the contract be charged? **2023-2025**

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

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

Agency Reference #: **114766**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **07/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2024**Contract term: **2 years and 184 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 Stein Hospital Interior Renovations CIP project to include schematic design with the cost estimate and soft construction schedule analysis, construction documents, bidding and review services and construction administration: CIP Project No. 22-A001; SPWD Contract No. 114766.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$237,677.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application thru SPWD

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

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

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? No

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

Not Applicable

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

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

Demonstrated the required expertise for work on this project.

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

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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:

Pang, Justus, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	05/09/2022 16:18:50 PM
Division Approval	nmann	05/09/2022 16:18:52 PM
Department Approval	nmann	05/09/2022 16:18:55 PM
Contract Manager Approval	lwildes	05/10/2022 09:52:51 AM
Budget Analyst Approval	jrodrig9	05/24/2022 10:28:25 AM
BOE Agenda Approval	jrodrig9	05/24/2022 10:29:00 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: **26107**

Agency Name:	DTCA - DIVISION OF TOURISM	Legal Entity Name:	FAHLGREN, INC. DBA FAHLGREN MORTINE
Agency Code:	101	Contractor Name:	FAHLGREN, INC. DBA FAHLGREN MORTINE
Appropriation Unit:	1522-31	Address:	FAHLGREN MORTINE 4030 EASTON STATION, STE 300 COLUMBUS, OH 43219-7012
Is budget authority available?:	Yes	City/State/Zip	COLUMBUS, OH 43219-7012
If "No" please explain:	Not Applicable	Contact/Phone:	MARTY MCDONALD 614/383-1621
		Vendor No.:	T29035894
		NV Business ID:	NV20121202601

To what State Fiscal Year(s) will the contract be charged? **2023-2024**

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 % LODGING TAX REVENUE

Agency Reference #: **RFP #10TCA-S1900 - AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Media Buying/PR**

5. Purpose of contract:

This is a new contract to provide ongoing media buying services, media and industry partner relations and external communications services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$18,275,000.00**

Other basis for payment: PR External Communications - Approximately \$550,000 - FY23 and \$725,000 - FY24; Media Buying - Approximately \$6,500,000 - FY23 and \$10,500,000 - FY24. Billing will be done on a monthly basis for all activities and costs incurred.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Tourism is tasked with developing a comprehensive program of marketing and advertising for both domestic and international markets that publicizes travel and tourism to all regions in Nevada.

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

To accomplish the above task, the Division of Tourism uses various channels to advertise Nevada's brand and generate awareness of Nevada as a world class destination. The Division of Tourism would not be able to garner favorable buy rates, as we do not have the luxury of pooling our advertising dollars with other entities.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):

ABBI AGENCY
BVK
FALHGREN INC DBA FAHLGREN MORTINE
NOBLE STUDIOS

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #10TCA-S1900 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 02/15/2022 Anticipated re-bid date: 01/01/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 Division of Tourism, February 2015 to present. The vendor is deemed 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	amathies	04/21/2022 09:59:42 AM
Division Approval	amathies	04/21/2022 09:59:46 AM
Department Approval	amathies	04/21/2022 09:59:48 AM
Contract Manager Approval	amathies	05/12/2022 13:19:36 PM
Budget Analyst Approval	tsmorra	05/12/2022 16:47:08 PM
BOE Agenda Approval	hfield	05/23/2022 15:19:29 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: **25997**Agency Name: **DEPARTMENT OF TAXATION**Agency Code: **130**Appropriation Unit: **2361-13**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER, INC.**Contractor Name: **GARTNER, INC.**Address: **PO BOX 911319**City/State/Zip: **DALLAS, TX 75391-1319**

Contact/Phone: 239/561-4815

Vendor No.: PUR0005339A

NV Business ID: NV19941112701

To what State Fiscal Year(s) will the contract be charged? **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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **364 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **Work Plan**

5. Purpose of contract:

This is a new Work Plan under Master Service Agreement #186840 which provides independent and objective consulting services for the Unified Tax System Modernization Program including Request for Proposal development and evaluation tools.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$263,800.00**

Payment for services will be made at the rate of \$0.00 per N/A

Other basis for payment: Progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

Senate Bill No. 414, approved and passed during the 2021 Legislative Session, makes an appropriation to the Department of Taxation for the continuing costs of the modernization of the Unified Tax System as part of Project MYNT. Gartner will collaborate with the Nevada Department of Taxation and the Nevada State Purchasing Division to create an RFP for the procurement of a modern integrated tax solution. Gartner will also develop the methodology by which vendor proposals will be evaluated.

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

State Master Service Agreement; State employees do not have the expertise.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Gartner, Inc. is a Purchasing Approved vendor under Master Agreement #99SWC-NV22-9032 to provide Procurement Assistance Support Services including Consultation and Research.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple agencies, service satisfactory.

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

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

Not Applicable

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

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	jgrimmer	04/07/2022 10:25:38 AM
Division Approval	jgrimmer	04/07/2022 10:25:42 AM
Department Approval	jgrimmer	04/07/2022 10:25:45 AM
Contract Manager Approval	jgrimmer	04/07/2022 10:25:47 AM
EITS Approval	daxtel1	04/13/2022 14:57:18 PM
Budget Analyst Approval	hfield	05/23/2022 13:02:15 PM
BOE Agenda Approval	hfield	05/23/2022 13:02:18 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: **26169**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Agency Code: **180**Appropriation Unit: **1373-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER, INC.**Contractor Name: **GARTNER, INC.**Address: **PO BOX 911319**City/State/Zip: **DALLAS, TX 75391-1319**Contact/Phone: **480-283-8933**Vendor No.: **T80976121A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Cost Allocation

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 29 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **IT End Users**

5. Purpose of contract:

This is a new Work Plan under Master Service Agreement 99SWC-NV21-8568, which provides research and advisory services related to Information Technology. This Work Plan will add a new content research category of business initiatives, analyst research briefing, Gartner executive partner-led team workshop, and annual executive retreat and peer roundtables for the team leader.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$224,813.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Without access to the depth of research, expert technology analysts, and toolkits Gartner provides, the EITS Executive team will not be able to apply the lessons learned or leverage successes in the rapidly changing technology environment, likely resulting in more costly IT investments for the State.

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

Gartner has been identified as a source of trusted expertise in IT research for both the government and private sectors. We continue to rely on up-to-date information from them.

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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	rsanche6	05/09/2022 16:52:00 PM
Division Approval	jkidd	05/10/2022 08:44:24 AM
Department Approval	ssands	05/16/2022 16:30:31 PM
Contract Manager Approval	ssands	05/16/2022 16:30:37 PM
Budget Analyst Approval	dlenzner	05/20/2022 17:07:44 PM
BOE Agenda Approval	dlenzner	05/20/2022 17:07:46 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: **26154**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2561-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Mountain Vista Development, INC.

Contractor Name: **Mountain Vista Development, INC.**Address: **2675 East Patrick Lane #15**City/State/Zip: **Las Vegas, NV 89120**

Contact/Phone: Vicki King 702-458-9700

Vendor No.: T29044469

NV Business ID: NV20001430725

To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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

General Funds 0.00 % Fees 0.00 %

X Federal Funds **65.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **35.00 % PRIVATE AND COUNTY**

Agency Reference #: RFP # 24VS-S1874 HM

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years and 30 days**4. Type of contract: **Contract**Contract description: **Flooring service**

5. Purpose of contract:

This is a new contract to provide floor replacement. This contract is contingent upon IFC approval of work program #C58225.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$574,891.00**

Other basis for payment: monthly upon approved invoices

II. JUSTIFICATION

7. What conditions require that this work be done?

THE FLOORING AT THE SOUTHERN NEVADA VETERANS HOME IS OVER 20 YEARS OLD AND IS STARTING TO BECOME OUT OF COMPLIANCE. THE AUDITORS ON OUR LAST INSPECTIONS HAVE NOTED THE CONDITION. REPLACEMENT OF THE FLOORING WILL KEEP THE HOME IN COMPLIANCE WITH THE VARIOUS LICENSING ENTITIES

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

THE AGENCY NOR THE STATE HAS THE EXPERTISE OR MANPOWER TO COMPLETE THE WORK9. 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 #24VS-S1874, 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: 01/31/2022 Anticipated re-bid date: 01/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	04/26/2022 09:46:24 AM
Division Approval	jtheil1	04/26/2022 09:46:26 AM
Department Approval	jtheil1	04/26/2022 09:46:30 AM
Contract Manager Approval	cbenham	04/26/2022 13:56:59 PM
Budget Analyst Approval	kanders2	05/17/2022 10:54:01 AM
BOE Agenda Approval	afrantz	05/20/2022 10:14:18 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: **21743**Amendment Number: **2**Agency Name: **CANNABIS COMPLIANCE BOARD**Legal Entity Name: **ACCELA, INC.**Agency Code: **270**Contractor Name: **ACCELA, INC.**Appropriation Unit: **4207-26**Address: **2633 Camino Ramon, Ste. 500**Is budget authority available?: **Yes**City/State/Zip: **San Ramon, CA 94583**

If "No" please explain: Not Applicable

Contact/Phone: Ken Anderson 303-507-2116

Vendor No.: T27042840

NV Business ID: NV20141641164

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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 % License
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP # 13DAT-S478

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/14/2019**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/23/2022**Contract term: **4 years and 41 days**4. Type of contract: **Contract**Contract description: **MCMES - Marijuana**

5. Purpose of contract:

This is the second amendment to the original contract which provides a case management and enforcement database application to track registration, audits, investigations, complaint handling and hearing and legal actions in one system. This amendment extends the termination date from June 23, 2022 to June 23, 2023 and increases the maximum amount from \$1,071,681.00 to \$1,595,483.43 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:	\$772,017.00	\$772,017.00	\$772,017.00	Yes - Action
a. Amendment 1:	\$299,664.00	\$299,664.00	\$299,664.00	Yes - Action
2. Amount of current amendment (#2):	\$523,802.43	\$523,802.43	\$523,802.43	Yes - Action
3. New maximum contract amount:	\$1,595,483.43			
and/or the termination date of the original contract has changed to:	06/23/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division is tasked with regulating the marijuana industry as it specifically relates to taxing, licensure, investigations and regulatory enforcement for the protection of consumers and benefit of the citizens of the State. Of the numerous services the Division provides, the more strenuous on staff include licensure and ownership, complaints, investigations, audits and inspections. Currently all business processes require manual research through a variety of portals/systems, files (both physical and electronic), folders and spreadsheets to gather necessary information. Each computer system/portal provides very limited and specific information.

Currently when customers want to apply, verify status, or pay fees, they must contact the Division via email, phone call, mail or in-person. Responding to these customers requires looking in a variety of electronic and physical locations for information, and in many cases requires confirming information with other Division staff members.

All Division information with regard to registrations, inspections, audits, investigations, complaint handling, hearings and legal action is spread out in a variety of computer systems, electronic files, paper files and spreadsheets. They are not connected and have to be manually reviewed prior to moving forward with assigned tasks. Once the tasks are completed, each system, file and spreadsheet must be manually updated.

The Division does not have an accurate and effective tool to visualize licensee locations, activities or investigation data geographically. The Division expends valuable time and resources when evaluating licensee locations and scheduling activities, resulting in many versions and a lack of accuracy/updates.

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

Immediate implementation is necessary as there currently is no centralized system in place for the Division to reliably track licensees or enforcement activities. The current process requires manually pulling information from numerous electronic and paper-based sources that are not always up to date with the most relevant information. Some current processes also require citizens to conduct in-person visits, emails and phone calls to secure information and statuses, creating an inconvenience to citizens and a drain on already limited staffing resources within the Division. The Division/Department does not have staffing resources available to complete this project in a timeframe that would meet the needs of the State.

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 #13DAT-S478, 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: 01/31/2019 Anticipated re-bid date: 01/31/2022

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	jgiesle2	05/25/2022 16:05:33 PM
Division Approval	jgiesle2	05/25/2022 16:05:36 PM
Department Approval	jgiesle2	05/25/2022 16:05:39 PM
Contract Manager Approval	jgiesle2	05/25/2022 16:05:41 PM
EITS Approval	ljean	05/26/2022 07:03:14 AM
Budget Analyst Approval	dlenzner	05/27/2022 12:51:04 PM
BOE Agenda Approval	dlenzner	05/27/2022 12:51:07 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:

Approval #:

44800

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: Cannabis Compliance Board		
	Contact Name and Title	Phone Number	Email Address
	Steve Gilbert, Chief of Administration	775-684-5874	sfgilbert@ccb.nv.gov
	Dawn Boyter, Management Analyst II	775-687-6292	boyterdn@ccb.nv.gov

2	Contractor Information:	
	Contractor Name:	ACCELA, INC.
	Contact Name:	Ken Anderson
	Complete Address: City, State and Zip Code	2633 Camino Ramon, Suite 500 San Ramon, CA 94583
	Phone Number:	303-507-2116
	Email Address:	KAnderson@accela.com

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		Sole Source	#:	
	Enter CETS Number:	#21743			
	Contract Amount:	\$1,259,283.43			
	Contract Term:	Start Date:	May 14, 2019	End Date:	June 23, 2022

Purchasing Use Only:	
Approval #:	448 ②

4	Current Contract Information:			
	Solicitation Type, if applicable:		<i>Sole Source</i>	#:
	Enter CETS Number:	#21743		
	Initial Contract Amount:	\$435,817		
	Contract Term:	Start Date:	<i>May 14, 2019</i>	End Date:

5	Amendment Information – List <u>all previously</u> approved amendments:			
	<i>Amd #:</i>	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	<i>1#</i>	<i>Extended the previous contract by 1 year. Added 18 additional user licenses. Added 1,000 time & material hours. Increase contract authority by \$299,664.</i>	<i>\$299,664</i>	<i>June 23, 2022</i>

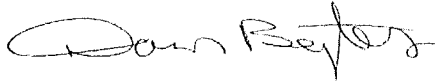
6	<u>Proposed</u> Amendment Information:			
	<i>Amd #:</i>	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	<i>#2</i>	<i>This contract amendment is being used as a bridge to get through the RFP process. Adds 15 additional user licenses. Adds 1,000 time & material hours. Increase contract authority by \$523,802.43.</i>	<i>\$523,802.43</i>	<i>June 23, 2023</i>

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	<i>The CCB would be required to dedicate staff to developing, testing, and standing up a new system. All CCB staff and Nevada cannabis establishment licensees will be required to receive training, adapt their business practices, and modify their internal or contracted systems to meet the requirements of a new licensing tracking system.</i>

8	What are the potential consequences to the State if the contract extension request is denied?
	<i>This extension will act as a one-year bridge to allow the agency to go through a new RFP process.</i>

Purchasing Use Only:	
Approval #:	4480

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.



Signature of Agency Representative Initiating Request

Dawn Boyter, Management Analyst II

Print Name of Agency Representative Initiating Request

04/29/2022

Date



Signature of Agency Head Authorizing Request

Steve Gilbert, Division Chief- Licensing and Administration

Print Name of Agency Head Authorizing Request

04/29/2022

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

** NOTE: TIN approval must be included as an attachment in CETS **

Signed:

** Kevin D. Ooty*

Administrator, Purchasing Division or Designee

5/2/22

Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Tyler Klimas, Executive Director, CCB
Morgan Canfield, IT Manager II, Information Security Officer, CCB
Dawn Boyter, Management Analyst, CCB

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – CCB – TIN 386 – *Case Management System and Enforcement System* – BA 4207 – Update A

DATE: April 29, 2022

We have completed our review for the Cannabis Compliance Board's (CCB) – *Case Management System and Enforcement System* – TIN 386, Update A.

The submitted TIN, for an estimated value of \$523,802.43 in the FY22/FY23 biennium (an increase of \$100,000 from the original submission) (100% State Fees), is to continue an existing contract for a cloud-based, marijuana-specific statewide case management and enforcement solution.

The system increases efficiency and reduces costs by streamlining processes, improving accuracy, providing electronic options, optimizing workflow and reporting, as well as enhancing personnel and citizen safety through expedited regulatory compliance.

The agency considers the investment and final implementation to have an ongoing low security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **23323**Amendment Number: **1**Legal Entity Name: **INSTRUCTURE, INC.**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Contractor Name: **INSTRUCTURE, INC.**Agency Code: **300**Address: **6330 South 3000 East, Ste 700**Appropriation Unit: **2673 - All Categories**Is budget authority available?: **Yes**City/State/Zip: **SALT LAKE CITY, UT 84121**

If "No" please explain: Not Applicable

Contact/Phone: **Eric Spencer 949-909-0002**Vendor No.: **PUR0005712**NV Business ID: **NV20121738582**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

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

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

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 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **3 years and 91 days**4. Type of contract: **Contract**Contract description: **Consulting Servcies**

5. Purpose of contract:

This is the first amendment to the original contract which provides consulting services and support for Canvas, a learning management platform, to provide teachers, students and families with equitable access to high-quality instruction and continuous learning. This amendment extends the termination date from June 30, 2022 to September 30, 2023 and increases the maximum amount from \$4,081,750 to \$6,081,750 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$4,081,750.00	\$4,081,750.00	\$4,081,750.00	Yes - Action
2. Amount of current amendment (#1):	\$2,000,000.00	\$2,000,000.00	\$2,000,000.00	Yes - Action
3. New maximum contract amount:	\$6,081,750.00			
and/or the termination date of the original contract has changed to:	09/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

On March 15, 2020 Governor Sisolak issued Emergency Directive 001, closing Nevada Schools due to COVID-19 pandemic. He followed this with Emergency Directive 005 on March 20, 2020, in which he directed county school districts and charter schools implement emergency programs of distance education in accordance with guidance provided by the Superintendent of Public Instruction. It has become apparent that many districts in this State lack the capacity and supportive resources to prepare their educators to successfully teach students remotely during this state of emergency and to properly support them in doing so. In light of this reality it is proposed by the Superintendent of Public Instruction to enter into an emergency contract with Instructure, Inc. which is designed to work in concert with the other distance learning contracts to provide both high quality content aligned to Nevada Standards and differentiated professional development offerings to meet the diverse needs of over 700 schools across the state. This aligns with the Governor's focus on education as a priority, and will help to ensure that Nevada's students do not suffer as a result of the emergency measures being taken to minimize potential infectious exposure to COVID-19.

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

Instructure, Inc. is a proprietary software product only available through the vendor. This contract will license a cloud based product that has no impact on the technology resources of the State.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

Per NAC 333-114 This is an emergency contract due to COVID-19 pandemic emergency directive 005 and was selected by the Superintendent of Public Instruction and Leadership.

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	05/12/2022 12:16:25 PM
Division Approval	carnol1	05/12/2022 12:19:00 PM
Department Approval	carnol1	05/12/2022 12:19:02 PM
Contract Manager Approval	mwadswo1	05/12/2022 13:15:31 PM
EITS Approval	ljea	05/18/2022 12:40:10 PM
Budget Analyst Approval	dlenzner	05/20/2022 14:39:53 PM
BOE Agenda Approval	dlenzner	05/20/2022 14:39:57 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: Dave Brancamp, Director, Standards and Instructional Support, NDE
Matthew Brown, Budget Analyst III, NDE
Glenn Meyer, IT Manager I, NDE

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – NDE – TIN 155 – *Canvas Learning Management*
– BA 2673 – Update A

DATE: May 18, 2022

We have completed our review for the Nevada Department of Education's (NDE) – *Canvas Learning Management* – TIN 155, Update A.

The submitted TIN, for an estimated value of \$3,654,250.00 in the FY22/FY23 biennium and \$500,000.00 in the FY24/FY25 biennium (100% Federal CARES Grant funding), is to provide a statewide Learning Management System (LMS) capable of delivering digital learning tools to all Nevada Teachers and Students. This TIN has been updated to align with a current contract amendment to extend these services for an additional two years at a total cost of \$2,000,000.00. There is no change in scope.

The LMS enables students to access assignments, take exams, collaborate with peers, track their progress, and communicate with educators. It also allows for the passing of roster and grade information to and from the statewide student information system (SIS), Infinite Campus. This system will be in use in all 17 Nevada School Districts and schools within the State Public Charter School Authority, serving 500,000+ users. This system will not be built on State infrastructure and will have no technology impact on the State's technology infrastructure. The agency considers the investment and final implementation to have an ongoing low security risk; however, the agency should be advised there is CISA security alert for this

product CVE-2020-5775¹ that should be reviewed before implementing this product.

The agency considers the investment and final implementation to have an ongoing low security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

¹<https://www.cvedetails.com/cve/CVE-2020-5775/>

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: **25753**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	LiteracyPro Systems, Inc.
Agency Code:	300	Contractor Name:	LiteracyPro Systems, Inc.
Appropriation Unit:	2680-26	Address:	2355 Canyon Blvd. Suite 204
Is budget authority available?:	Yes	City/State/Zip	Boulder, CO 80302-5656
If "No" please explain:	Not Applicable	Contact/Phone:	David Miller 303-4406906
		Vendor No.:	T27042299
		NV Business ID:	NV20181584011

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 04/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Data Mgmt System**

5. Purpose of contract:

This is a new contract to provide a data system to aggregate the required Adult Education National Reporting System data from all local programs and produce required data tables for federal reporting services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,397.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

the Literacy Adult and Community Education System (LACES) is needed in order to meet the requirements imposed by the US Department of Education Office of Career, Technical, and Adult Education (OCTAE) for the Adult Education and Family Literacy Act (AEFLA) under the Workforce Innovation and Opportunity Act (WIOA) grant. All data collected is for federal reporting requirements.

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

Although this is a new contract, ten years of data is currently housed in LACES for WIOA. Title II Adult Education program. Required federal reporting necessities using multiple years of data at a time. Staff is not available to provide the amount and level of work required to use or develop another system.

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):

Only bidder

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #30DOE-S1795, 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: 01/13/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Other

NT7 Business License

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	mbro28	03/28/2022 12:53:00 PM
Division Approval	carnol1	04/05/2022 09:06:31 AM
Department Approval	carnol1	04/05/2022 09:06:35 AM
Contract Manager Approval	mwadswol	04/05/2022 10:13:03 AM
EITS Approval	daxtel1	04/14/2022 16:15:53 PM
Budget Analyst Approval	mranki1	04/18/2022 09:24:43 AM
BOE Agenda Approval	dlenzner	05/22/2022 20:48:07 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 CONTRACT

1. Contract Number: **24704** Amendment Number: **1**

Agency Name: **NDE - DEPARTMENT OF EDUCATION** Legal Entity Name: **JOBS FOR NEVADA GRADUATES, INC.**

Agency Code: **300** Contractor Name: **JOBS FOR NEVADA GRADUATES, INC.**

Appropriation Unit: **2699-25** Address: **4045 S BUFFALO DR STE A101-128**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89145**

If "No" please explain: Not Applicable Contact/Phone: **RENE CANTU 702-810-3068**

Vendor No.: **T32002801A**

NV Business ID: **NV20131697401**

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **NV JAG**

5. Purpose of contract:

This is the first amendment to the original contract which provides training to improve outcomes of public education, provide work opportunities for high school students and increase college enrollment and completion rates for high-risk youth populations. This amendment increases the maximum amount from \$7,226,830 to \$7,478,928 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:	\$7,226,830.00	\$7,226,830.00	\$7,226,830.00	Yes - Action
2. Amount of current amendment (#1):	\$252,098.00	\$252,098.00	\$252,098.00	Yes - Action
3. New maximum contract amount:	\$7,478,928.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Jobs for America's Graduates (JAG) is a state-based national non-profit organization dedicated to preventing dropouts among young people who are not at-risk. This contract will enable the Department of Education to fulfill its obligation to this program.

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

The Jobs for America's Graduates model requires the state to contract with a qualified non-profit organization to administer this program. Jobs for America's Graduates operates in school districts throughout the state and includes funding from private partnerships.

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?

Pursuant to SB 458 Section 8 (A), an allocation has been made directly to JAG therefore no waiver is required and no other vendors were solicited.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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- 7/1/17-6/30/21 - 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	mbro28	05/10/2022 13:44:20 PM
Division Approval	carnol1	05/10/2022 13:44:44 PM
Department Approval	carnol1	05/10/2022 13:44:48 PM
Contract Manager Approval	mwadswo1	05/10/2022 14:23:33 PM

Budget Analyst Approval
BOE Agenda Approval

dlenzner
dlenzner

05/19/2022 09:46:13 AM
05/19/2022 09:46:23 AM

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: **22922** Amendment Number: **1**

Agency Name: **NDE - DEPARTMENT OF EDUCATION** Legal Entity Name: **BOARD OF REGENTS-NSHE ON BEHALF OF UNLV**

Agency Code: **300** Contractor Name: **BOARD OF REGENTS-NSHE ON BEHALF OF UNLV**

Appropriation Unit: **2709-21** Address: **OFFICE OF SPONSORED PROGRAMS
4505 S MARYLAND PKWY MS 451055**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89154**

If "No" please explain: Not Applicable Contact/Phone: **Amanda Haboush-Deloye 702-895-5908**

Vendor No.: **D35000813B**

NV Business ID: **Governmental 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? **No** or b. other effective date **04/14/2020**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **2 years and 77 days**4. Type of contract: **Interlocal Agreement**Contract description: **CCDF Quality**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides ongoing evaluations of the Quality Rating & Improvement System and facilitates annual early childhood research symposiums. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount from \$148,790 to \$364,790 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:	\$148,790.00	\$148,790.00	\$148,790.00	Yes - Action
2. Amount of current amendment (#1):	\$216,000.00	\$216,000.00	\$216,000.00	Yes - Action
3. New maximum contract amount:	\$364,790.00			

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 Applicable

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

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

In accordance with NRS 277.180 the agency has contracted with the Board of Regents, University of Nevada, Las Vegas.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/14/2022 10:38:49 AM
Division Approval	carnol1	04/19/2022 12:02:02 PM
Department Approval	carnol1	04/19/2022 12:02:07 PM
Contract Manager Approval	mwadsw01	04/19/2022 12:03:12 PM
Budget Analyst Approval	mranki1	04/19/2022 14:14:50 PM
BOE Agenda Approval	dlenzner	05/22/2022 20:12:18 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: **26094**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	Board of Regents NSHE UNR Guinn Center
Agency Code:	300	Contractor Name:	Board of Regents NSHE UNR Guinn Center
Appropriation Unit:	2710-20	Address:	1665 north Virginia Street 204 Ross Hall Mail Stop 0325
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89557-0325
If "No" please explain:	Not Applicable	Contact/Phone:	Thomas A Landis 775-784-4040
		Vendor No.:	D35000816
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 29 days**4. Type of contract: **Interlocal Agreement**Contract description: **Needs Assessment**

5. Purpose of contract:

This is a new interlocal agreement to provide a statewide comprehensive needs assessment for local school communities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$199,733.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The federal emergency relief funds provide Nevada Department of Education for data driven recovery strategies for needs assessments within the local school communities to determine needed resources for budgeting and planning in supporting and safely opening schools.

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

The Guinn Center is specialized in conducting research and analysis for educational needs within the schools in 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 Applicableb. Solicitation Waiver: **Exempt (Per statute)**

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

Request to contract with a governmental entity, pursuant to NRS 277.180.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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

The indirect cost rate is listed as 8 percent, for a total of \$14,798.

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	carnol1	04/20/2022 16:13:06 PM
Division Approval	carnol1	04/20/2022 16:13:09 PM
Department Approval	carnol1	04/20/2022 16:13:12 PM
Contract Manager Approval	mwadswol	04/20/2022 16:17:16 PM
Budget Analyst Approval	mranki1	04/22/2022 14:40:25 PM
BOE Agenda Approval	dlenzner	05/06/2022 08:34:43 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: **26059**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2710-13**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Regents of the University of Minnesota
OBO Minnesota Center forContractor Name: **Regents of the University of Minnesota OBO Minnesota Center for**Address: **Reading Research****NW 5960 P.O. Box 1450**City/State/Zip: **Minneapolis, MN 55485-5960**

Contact/Phone: Shona Burke 612-624-2034

Vendor No.: T32001153B

NV Business ID: GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 29 days**4. Type of contract: **Interlocal Agreement**Contract description: **Reading Training**

5. Purpose of contract:

This is a new interlocal agreement to provide professional development for elementary educators on literacy instruction and intervention.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$999,995.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The project adheres to the 2020 ESSER II federal COVID relief requirements for the 2020-2021 school year with federal guidelines specifically identifying gaps and critical needs in K-12. It adheres to the professional learning requirements identified in AB289- 2019. 2.4.a. and NAC 388.662; 388.664, and 388.666.

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

The instruction is designed to take professional educators and address a need for reading instruction and intervention development to specialize their skills and needs that were identified since COVID-19. They are the specialists and this provides for additional training to improve personnel resources, but expertise in this area is limited.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

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

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

NRS 277.180 Governmental Entity

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/19/2022 12:09:38 PM
Division Approval	carnol1	04/19/2022 12:10:50 PM
Department Approval	carnol1	04/19/2022 12:10:52 PM
Contract Manager Approval	mwadsw01	04/19/2022 12:11:03 PM
Budget Analyst Approval	mranki1	05/06/2022 15:04:37 PM
BOE Agenda Approval	dlenzner	05/22/2022 19:31:16 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 CONTRACT

1. Contract Number: **23204** Amendment Number: **4**

Legal Entity Name: **Catapult Systems, LLC**

Agency Name: **STATE PUBLIC CHARTER SCHOOL AUTHORITY** Contractor Name: **Catapult Systems, LLC**

Agency Code: **315** Address: **1221 South Mo Pac Expressway, Suite 350**

Appropriation Unit: **2711-27** City/State/Zip: **Austin, TX 78746**

Is budget authority available?: **Yes** Contact/Phone: **Lauren Brown 512-225-6751**

If "No" please explain: **Not Applicable** Vendor No.: **T32009010**

NV Business ID: **NV20201764358**

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

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

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

Agency Reference #: **315**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2020**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **2 years and 214 days**4. Type of contract: **Contract**Contract description: **Grant Management**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides a grant management software subscription. This amendment extends the termination date from June 30, 2022 to January 31, 2023 and increases the maximum amount from \$362,787.00 to \$431,106.20 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:	\$87,720.00	\$87,720.00	\$87,720.00	Yes - Action
a. Amendment 1:	\$49,876.00	\$49,876.00	\$49,876.00	Yes - Info
b. Amendment 2:	\$125,492.00	\$125,492.00	\$175,368.00	Yes - Action
c. Amendment 3:	\$99,699.00	\$99,699.00	\$99,699.00	Yes - Info
2. Amount of current amendment (#4):	\$68,319.20	\$68,319.20	\$168,018.20	Yes - Action
3. New maximum contract amount:	\$431,106.20			
and/or the termination date of the original contract has changed to:	01/31/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The State Public Charter School Authority requires a vendor to provide Administrative, fixes and enhancement services to the Grants Management System.

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

There is no state employees that have qualifications to perform this work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

NAC 333.150 Professional Service Exemption approved by the Purchasing Administrator.
Solicitation Waiver 200506.

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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 is currently under contract with the agency 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 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	jbauer	05/12/2022 17:21:41 PM
Division Approval	jbauer	05/12/2022 17:21:44 PM
Department Approval	jbauer	05/12/2022 17:21:48 PM
Contract Manager Approval	jbauer	05/12/2022 17:21:52 PM
EITS Approval	daxtel1	05/18/2022 12:04:28 PM
Budget Analyst Approval	vfajota	05/18/2022 12:12:59 PM
BOE Agenda Approval	dlenzner	05/23/2022 09:35:54 AM



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: Rebecca Feiden, Executive Director, SPCSA
Jennifer Bauer, Administrative Services Officer III, SPCSA
Todd Carl, Business Process Analyst II, SPCSA

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA
Denise Frohlich, Interim Administrator, Office of Grant Procurement,
Coordination, and Management, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – SPCSA – TIN 046 – *SPCSA Grant Management System* – BA 2711 – Update B

DATE: May 17, 2022

We have completed our review for the State Public Charter School Authority (SPCSA) – *SPCSA Grant Management System* – TIN 046, Update B.

The submitted TIN, for an estimated value of \$379,199.04 in the FY22/FY23 biennium (an increase of \$68,319.20 from update A) (100% Federal Grants), is to implement a cloud-based Grant Management System (GMS) and to support CETS contract #23204.

The SPCSA has an immediate need for a cloud-based GMS. The current system for managing Federal and State Grants is manual in nature and does not provide for clear and concise reporting or adequate sub-recipient monitoring. The system SPCSA intends to stand-up will have the following capabilities:

- Customer portal to facilitate the submission of Grant Applications, Reimbursement Requests, Amendment Requests and reporting on previous grant activities.
- Admin control panel to set-up grant programs, set-up applications to be accessed through the Customer

Portal, conduct sub-recipient monitoring and process Reimbursement Requests.

- Reporting on Grant Program funding, both in real time and upon completion of the program.

This (fourth) contract amendment provides for an extension to the term to allow the agency time to procure a new contract through the RFP process and adds a scope of work to require the current contractor to provide “as-built” system documentation in writing and via audio/video recordings.

EITS recommends that the agency consider contacting the Office of Grant Procurement, Coordination, and Management (Nevada Grant Office) that is currently conducting a needs assessment authorized by Assembly Bill 445 of the 2021 legislative session to procure a statewide GMS.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies.

A copy of this memo has 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: **20343**Amendment
Number: **2**Agency Name: **ADMIN - NV ST LIBRARY,
ARCHIVES AND PUBLIC RECORDS**Legal Entity
Name: **EBSCO Industries, Inc. DBA EBSCO
Information Services**Agency Code: **332**Contractor Name: **EBSCO Industries, Inc. DBA EBSCO
Information Services**Appropriation Unit: **2891-12**Address: **10 Estes Street**Is budget authority
available?: **Yes**City/State/Zip **Ipswich, MA 01938**

If "No" please explain: Not Applicable

Contact/Phone: **Kevin Leffew 800-653-2726**Vendor No.: **PUR0004258**NV Business ID: **NV20011454889**To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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 #: **RFP # 08DOA-S67 PSMs GB**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/01/2018**
Examiner's approval?Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**
Termination Date:Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Database Package**

5. Purpose of contract:

This is the second amendment to the original contract which provides online access to multidisciplinary databases for all K-12 schools, academic, and public libraries, and remote use by all Nevada residents. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$1,285,440 to \$1,606,800 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:	\$642,720.00	\$642,720.00	\$642,720.00	Yes - Action
a. Amendment 1:	\$642,720.00	\$642,720.00	\$642,720.00	Yes - Action
2. Amount of current amendment (#2):	\$321,360.00	\$321,360.00	\$321,360.00	Yes - Action
3. New maximum contract amount:	\$1,606,800.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The state requires a library database service for all agencies, cities, counties and political subdivisions.

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

This is a specialized service.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #08DOA-S67, and in accordance with NRS 333, the selected vendor was the highest scoring proposed as determined by an independently appointed evaluation committee.

d. Last bid date: 04/14/2018 Anticipated re-bid date: 01/14/2020

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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 holds the contract for the Statewide Library Database. The 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 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	rsanche6	05/05/2022 14:03:48 PM
Division Approval	jkidd	05/05/2022 14:13:54 PM

Department Approval	ssands	05/11/2022 08:17:06 AM
Contract Manager Approval	ssands	05/11/2022 08:17:19 AM
EITS Approval	ljean	05/11/2022 08:23:51 AM
Budget Analyst Approval	jcoope8	05/17/2022 15:03:55 PM
BOE Agenda Approval	hfield	05/23/2022 12:40:41 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:	
Approval #:	452 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Nevada State Library, Archives and Public Records</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Sulin Jones</i>	<i>775-684-3340</i>	<i>sulinjones@admin.nv.gov</i>

2	Contractor Information:	
	Contractor Name:	<i>EBSCO Industries, INC</i>
	Contact Name:	<i>Kevin Leffew</i>
	Complete Address: City, State and Zip Code	<i>10 Estes Street, Ipswich, MA 01938</i>
	Phone Number:	<i>800-653-2726</i>
	Email Address:	<i>kleffew@ebSCO.com</i>

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		#:	<i>08DOA-S67</i>	
	Enter CETS Number:	<i>#20343</i>			
	Contract Amount:	<i>\$642,720</i>			
	Contract Term:	Start Date:	<i>07/01/18</i>	End Date:	<i>06/30/20</i>

Rec'd 04/27/22 // auto ✓

Purchasing Use Only:	
Approval #:	45200

4	Current Contract Information:			
	Solicitation Type, if applicable: <i>amendment</i>			#:
	Enter CETS Number:	#20343		
	Initial Contract Amount:	\$		
	Contract Term:	Start Date:		End Date:

5	Amendment Information – List <u>all previously</u> approved amendments:			
	<i>Amd #:</i>	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	1	Contract was written for 2 years. This amendment extended the contract to 4 years	642,720	06/30/22

6	<u>Proposed</u> Amendment Information:			
	<i>Amd #:</i>	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	2	Extend the current contract for an additional year.	321,360	06/30/23

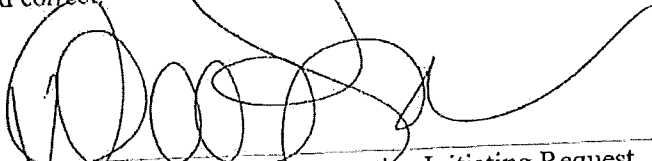
7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	The TIN for a new RFQ for Statewide Educational Databases for Nevada Libraries was approved at the end of March 2022. NSLAPR has submitted an RFQ development form to its Purchasing Officer, however the contract expires on June 30, 2022. It would be in the state's best interest if the EBSCO Comprehensive database contract were extended by 12 months so that we can successfully complete the Statewide Comprehensive database RFQ process.

8	What are the potential consequences to the State if the contract extension request is denied?
	Without a one year extension, EBSCO Comprehensive database package will expire June 2022 and there will be no products to fill the educational resources gap. Nevadans, specifically students who use this database, will not have access to quality, trusted learning resources that have proven essential to their educational achievements. and from all geographic locations. Academic and school libraries especially rely upon the EBSCO database – during our most recent survey (winter 2022), eighty-nine percent (89%) of survey respondents rated the Statewide Databases program as “somewhat impactful” or “very impactful.” Additionally, 61% of survey respondents rated the EBSCO database as “very impactful”. Survey comments:

- | | |
|--|--|
| | <ul style="list-style-type: none">• At the high school level, databases are huge for our students.• (Access to the) databases has been the most beneficial for our library district. This is especially true during the pandemic.• Especially during the pandemic closures, the databases were a lifeline to our community.• (databases) have helped us serve students on site and at a distance. |
|--|--|

Purchasing Use Only:	
Approval #:	4520

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.



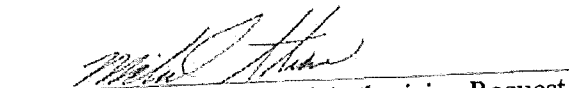
 Signature of Agency Representative Initiating Request

DENISE FROHLICH

 Print Name of Agency Representative Initiating Request

4/26/22

 Date



 Signature of Agency Head Authorizing Request

Michael Stron

 Print Name of Agency Head Authorizing Request

4/26/2022

 Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty

 Administrator, Purchasing Division or Designee

5/4/22

 Date

Steve Sisolak
Governor



Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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: Mike Strom, NSLAPR Administrator, NSLAPR, DOA
Jennifer Victor, Budget Analyst, NSLAPR, DOA
Jason Benshoof, Chief IT Manager, Agency IT Services, EITS, DOA
Sulin Jones, LSTA Coordinator, NSLAPR, DOA

CC: Tim Galluzi, Administrator, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – NSLAPR – 360 – *Educational Databases for NV Libraries* – BA 2891 – Update A

DATE: April 30, 2022

We have completed our review for the Department of Administration (DOA), Nevada State Library, Archives and Public Records' (NSLAPR) – *Educational Databases for NV Libraries* – TIN 360, Update A.

The submitted TIN, for an estimated value of \$642,720 in the FY22/FY24 biennium (100% Federal Grant funding), is to renew a subscription service that is already in place.

Nevada Statewide Databases are made available to all Nevada residents via online access through their local public, school, and academic libraries. Statewide databases provide fact based, creditable, primary source research and informational materials that: cover a broad range of disciplines, ages, and skill levels and targeted to complement public, school, and academic library collections; support school curricula from pre-K to college; strengthen the skillsets needed for certifications, workplace attainment, and career advancement; provide trusted information that is not available for free anywhere on the internet.

A Statewide contract ensures equitable access to information for all Nevadans, without regard to geographic location or economic status; it also ensures sustainability by leveraging the purchasing power of the state to obtain the highest quality online content for the best possible prices. NSLAPR has procured statewide informational databases, for the benefit of all Nevadans, for over 20 years.

#452 @

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **26001**

Agency Name:	ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS	Legal Entity Name:	HEADED2, LLC
Agency Code:	332	Contractor Name:	HEADED2, LLC
Appropriation Unit:	2891-28	Address:	14 Van Terrace
Is budget authority available?:	Yes	City/State/Zip	Sparkill, NY 10976
If "No" please explain:	Not Applicable	Contact/Phone:	215/513-0874
		Vendor No.:	T29039522
		NV Business ID:	NV20171423240

To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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 %

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years and 30 days**4. Type of contract: **Contract**Contract description: **Data Subscription**

5. Purpose of contract:

This is a new contract to provide ongoing software subscription and annual maintenance to Nevada CareerExplorer.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$199,955.00**

Payment for services will be made at the rate of \$199,955.00 per year

Other basis for payment: FY22: \$199,955

II. JUSTIFICATION

7. What conditions require that this work be done?

Increase patron access and participation in library services.

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

Staffing restraints9. 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 #: 220301****Approval Date: 03/15/2022**

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

sole-sourced to vendor

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jvictor	04/08/2022 11:33:32 AM
Division Approval	jkidd	04/13/2022 09:55:53 AM
Department Approval	ssands	04/15/2022 09:34:44 AM
Contract Manager Approval	ssands	04/15/2022 09:34:47 AM
EITS Approval	daxtel1	04/18/2022 17:01:06 PM
Budget Analyst Approval	hfield	05/23/2022 15:06:59 PM
BOE Agenda Approval	hfield	05/23/2022 15:07:02 PM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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

Purchasing Use Only:

Approval#:

220301 (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 <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: Nevada State Library, Archives & Public Records (NSLAPR) -Dept of Administration		
	Contact Name and Title	Phone Number	Email Address
	Mike Strom, Administrator	775-684-3410	mstrom@admin.nv.gov

1b	Vendor Information:	
	Vendor Name:	Headed2 LLC
	Contact Name:	Katherine DeRosear
	Complete Address: City, State, and Zip Code	14 Van Terrace Sparkill, NY 10976
	Telephone Number:	
	Email Address:	kderosear@headed2.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? Check One:	Yes: X	No:	
	Amendment Number:			
	Enter CETS Number:	#21351		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:	No:	X
	Contract:	Start Date:	May 11, 2022	End Date:

1f	Funding:	
	State Appropriated:	General Fund
	Federal Funds:	
	Grant Funds:	

Other (Explain):	
------------------	--

Purchasing Use Only:

Approval #:

220301 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$399,910.00

	Provide a description of work/services to be performed or commodity/good to be purchased:
	<p>This contract is for continued maintenance and support of the Nevada Career Explorer Augmentation database. Access to the Headed2 career information database, its software services, and research is available to jobseekers using a public library card as the key identifier. This promotes quality career guidance services that can lead citizens toward opportunities for quality, middle-class employment. Headed2 is an entirely unique, web-based career information database that, with a library card, can be accessed from anywhere and provide Nevada-first career information and research materials.</p> <p>FOR NEVADANS:</p> <p>The easily understood, well-curated and well-displayed research data base is designed to promote local labor markets and training opportunities for:</p> <ul style="list-style-type: none"> • Nevada's priority industries, • To highlight the necessary corresponding credential and certifications, and • Point people to local and statewide employment opportunities. <p>FOR PUBLIC LIBRARIANS AND LIBRARY PARTNERS:</p> <ul style="list-style-type: none"> • The tool provides powerful supply/demand analysis and reporting, helping stat provide timely career coaching and • Provides customized reporting modules for each partner. <p>The platform builds career literacies and navigation skills by drawing connections among formal education institutions, training and certification systems and the careers they fuel. This helps people better understand exactly how their career choices will translate into fulfilling and gainful employment.</p> <ul style="list-style-type: none"> • Additionally, this is NOT a tool that the State Library, Archives and Public Records will use itself. It is provided in our role as a support to local libraries and their partners.
2	

	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<p>The unique features required not available form any other vendor are:</p> <ul style="list-style-type: none"> • Using a library card as the identifier to access the research and information database. This way librarians and their allied project partners can work from the same information base, in sync, to help job seekers make sense of and navigate the increasingly complex job market. • Customized reporting modules to show how all partners uniquely and as a community of practice helping a patron/client along the career advisement journey, through education/training pathways, and from application to employment. • While there are other software solutions that exist for this solution, they do not have the proprietary algorithm that drives the Headed2 career information database and allows for the use of a library card as a key identifier. • Additionally, transitioning from the existing Headed2 system to a different solution is a potentially million-dollar project that the State is not currently able to conduct. <p>NSLAPR is working on a continued project which placed Nevada's public libraries as a major part of the solution in providing the quality of workers to sustain and grow Nevada's targeted industry sectors. As noted above, the Headed2 career</p>
3	

information database offers a complete picture of the entire state's key industries by making use of data gathered and synthesized by OWINN, DETR, and GOED, combined with national labor data.

For the continuation of this project, it is imperative that career information obtained from the same platform. The tool will be used in two ways:

1. First, across four counties (comprising the Las Vegas Valley region) partners are engaged in a first of its kind in the nation project. The Las Vegas Valley's four different library systems and the region's One-Stop Career Centers program (funded with the Department of Labor's Workforce Innovation Opportunity Act (WIOA) are the first to embed One Stop centers inside library buildings and work as allied partners toward the same goal: helping people find, train for, and get good jobs.
2. Jaime Cruz serves as the Executive Director for Workforce Connections (Southern Nevada's Local Workforce Development Board). He advances and oversees processes that support continual improvement of the local one-stop delivery system, which provides employment and training services to Southern Nevadans. In late 2016, Mr. Cruz approached public library leaders within the Las Vegas Valley and ask them to consider working with Workforce Connections to leverage their resources with the library as a place that is open after hours, on the weekends and is filled with research, resources, and staff. By early 2017, partners agreed, and ten libraries are now home to Workforce Connections one-stop centers.
3. NSLAPR's library development work that includes statewide strategic planning and initiatives using Library Services Technology Act funds (LSTA, managed through the Institute of Museum and Library Services, IMLS) currently provides the career information database, Headed2. This adds tremendous value to this partnership of libraries. It has helped to better support public libraries' role in facilitating workforce development within their communities, librarians understand the broad industry mix of the regional economy and related critical occupations (supply and demand) and advanced the "big idea" of the first of its kind in the nation demonstration project being deployed in southern Nevada.
4. The Headed2 career information database is also available to all public libraries in Nevada. This has allowed the rest of the state to utilize the tool and provide access to the database. For the State Library, responsibilities are identified in NRS 378.081, which describes our role in benefitting the library community and other agencies and organizations in planning and providing workforce development services to the citizens of Nevada.

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

Features not available from any other vendor are described below; therefore, the unique required qualities of the Headed2 database necessitate sole sourcing:

- Access to the information database and software as a service feature obtained through a library card.
- An in place, comprehensive, Nevada-first career information architecture.
- Customized reporting modules to show how all partners uniquely and as a community of practice help a patron/client along the career advisement journey, through education/training pathways, and from application to employment.
- The proprietary algorithm that drives the Headed2 career information database to assists the Nevada State Library in its role to support public librarians in delivery of strategic research and instruction that advances the Governor's goals of furthering Nevada's recovery after the COVID 19 pandemic, including preparing students for college and career success, ensuring a highly skilled and diverse workforce, increasing the number of Nevadans with post-secondary credentials, and ultimately helping to reduce Nevada's unemployment rate.

4

5	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
			X
	a. <i>If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>		
	b. <i>If not, why were alternatives not evaluated?</i>		
	Alternative solutions were considered prior to execution of the original contract, but not for this amendment. This amendment provides for the continued maintenance from the existing vendor in the existing system.		

Purchasing Use Only:	
Approval #:	220301G

Has the agency purchased this service or commodity in the past? Check One:				Yes	No
NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				X	
a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:					
Term		Value		Type of Procurement	
Start Date	End Date			ENTER RFP#, RFQ#, Waiver #	
4/1/2019	3/31/2020	\$199,955.00		Waiver # 201003	
		\$			
		\$			
		\$			

What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid? Without the continued funding for maintenance requested, the Nevada libraries will be unable continue providing the invaluable resources for facilitating workforce development within their communities. Current budgeted funding allows for continued maintenance and support only.
The Governor's Office of Economic Development, the Governor's Office of Workforce Innovation, the Department of Training and Rehabilitation, Department of Education, and the Department of Administration are utilizing this resource to advance career development and job force growth. It also is assisting with recovery after the COVID 19 pandemic and driving Nevada's economic recovery.

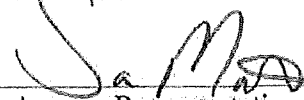
What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable? NSLAPR researched potential alternate solutions or options available through existing statewide contracts and cooperatives. None were available, and it was determined continuing with the current Headed2 solution is in the best interest of the State in the short term.

Will this purchase obligate the State to this vendor for future purchases? Check One: <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes	No
a. If yes, please provide details regarding future obligations or needs. The agency may be requesting an additional waiver for continued maintenance support.	X	

--	--

Purchasing Use Only:	
Approval #:	#220301 @

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.



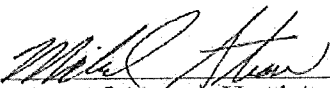
Agency Representative Initiating Request

Sara Martel, State Records Manager

Print Name of Agency Representative Initiating Request

March 3, 2022

Date



Signature of Agency Head Authorizing Request

Michael Strom, Administrator

Print Name of Agency Head Authorizing Request

March 3, 2022

Date

FOR PURCHASING USE ONLY – 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:** Agency must include a copy

Name of agency or entity who provided information or review:

of their approved EITS TIN memo as an

Representative Providing Review

Attachment in CETS**

Print Name of Representative Providing Review

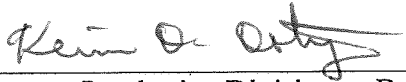
Date

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.

#220301(4)

Approved by:



Administrator, Purchasing Division or Designee

3/15/22

Date

Steve Sisolak
Governor



Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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: Laura Freed, Director, DOA
Mike Strom, Administrator, NSLAPR
Jason Benshoof, IT Chief, Agency IT Services, EITS, DOA
Sara Martel, State Records Manager, NSLAPR
Jennifer Victor, ASD Budget Analyst, ASD, DOA

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA

FROM: David Axtell, State Chief Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo – NSLAPR – 203 – Nevada Career Explorer Data Augmentation – BA2891 –Update-B

DATE: March 1, 2022

We have completed an update review for NSLAPR's – *Nevada Career Explorer Data Augmentation* TIN203.

The submitted TIN, for an estimated value of \$399,910 (an addition of \$ 274,910) this biennium (100% General Fund) is to renew maintenance and support of and add additional enhancements to the Nevada Career Explorer system.

“Additional enhancements to the Nevada Career Explorer via an additional workforce recovery grant through OWINN allocate resources to build upon this data enhancement feature to create a 'skills decoder' The Skills Decoder will serve as a translator that identifies transferable abilities and skills in an individual's experience and converts them to credits, the 'currency' required to enter, advance and succeed in postsecondary education. The tool will provide high education with data to align/equate skills to industry credentials, certifications and qualifications that can be awarded credit. It will also provide industry with the information they need to assess compatibility for open jobs, and identify skills gaps, thereby improving the hiring process and reducing onboarding costs. While this has long been identified as a critical gap for both industry and higher education, the impacts of the pandemic have brought it to the fore as a high priority for getting Nevadans back to work.”

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **26307**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	Yahasoft, INC.
Agency Code:	402	Contractor Name:	Yahasoft, INC.
Appropriation Unit:	3208-33	Address:	3245 Peachtree Pkwy., D-446
Is budget authority available?:	Yes	City/State/Zip	Suwanee, GA 30024
If "No" please explain:	Not Applicable	Contact/Phone:	Roy Su 678-549-9899
		Vendor No.:	T29045388
		NV Business ID:	NV20222439879

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **EI Case Mgmt System**

5. Purpose of contract:

This is a new contract to provide cloud-hosted services for Early Intervention Management.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,964,430.00**

Other basis for payment: Upon receipt of invoice and approval of services by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Health and Human Services' IDEA Part C Office is required per IDEA Part C Grant to maintain a data system capable of collecting all 618 data requirements for Federal Reporting. The system is a single point of entry for each early intervention program and creates a non-duplicated early intervention record for each child who is referred to the system. The data system is utilized to track children's status and detailed progress throughout their enrollment in early intervention, assist local programs with individual child case management functions, provide required forms, reports and other outputs as requested, allow the Part C Lead Agency to monitor the entire program for compliance, and allow the Part C Lead Agency and ADSD to run reports for purposes of federal and state reporting and local program monitoring.

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

Existing staff do not have the expertise and are unable to build, test, and implement this new system.

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):

Strategic Solutions Group
Public Consulting Group
Gainwell Technologies
Yahasoft, Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #40DHHS-S1853, 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: 01/12/2022 Anticipated re-bid date: 01/12/2026

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	chadwic1	05/10/2022 15:22:44 PM
Division Approval	chadwic1	05/10/2022 15:28:32 PM
Department Approval	chadwic1	05/10/2022 15:28:34 PM
Contract Manager Approval	smccrosk	05/10/2022 15:30:30 PM
EITS Approval	ljea	05/11/2022 08:07:14 AM
Budget Analyst Approval	bmacke1	05/17/2022 15:59:43 PM
BOE Agenda Approval	afrantz	05/20/2022 11:28:02 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: Jeffrey Haag, Deputy Administrator, ADSD
Justin Robinson, ITM 3, ADSD
Jenna Quinn, ITM 1, ADSD
Robin Hager, ASO 4, ADSD

CC: Alan Cunningham, State CIO, EITS, DOA
Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - ADSD - Cloud Based Enterprise Case Management System - BA 3151 - TIN 284

DATE: August 19, 2021

We have completed the review for ADSD's - Cloud Based Enterprise Case Management System TIN 284.

The submitted TIN for an estimated value of \$3,680,000 current biennium and \$1,880,000 next biennium (100% Federal Grant) to enhance and/or upgrade an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

This Technology Investment Notification is submitted in support of modernizing ADSD's existing intake, case management, and billing systems. This modernization eliminates manual process and enables online accessibility for internal and external users.

Through this modernization ADSD will establish a unified back-end that will allow them to track and report data across systems in a consistent and uniform manner.

Project related development, implementation, testing, and training costs are supported in this TIN request. Ongoing licensing and maintenance costs will be paid with existing funding already in the ADSD budget.

Modernizing current process and technology into a new and upgraded system offers necessary improvements to security for regulatory concerns, state and federal legislative imperatives, and data and user access. In achieving data consistency over these multiple functionalities, services and consumer groups, reporting becomes more normalized and consistent. Consistency and normalization further enhance the agency's ability to document compliance and performance standards to regulating bodies.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25224**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Clark County Department of Family Services
Agency Code:	403	Contractor Name:	Clark County Department of Family Services
Appropriation Unit:	3158-24	Address:	500 Grand Central Parkway
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89155
If "No" please explain:	Not Applicable	Contact/Phone:	Jessica Colvin, Chief Financial Officer 702-455-3324

Vendor No.:
NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **TCM/Admin Services**

5. Purpose of contract:

This is a new interlocal agreement to provide targeted case management and administrative services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,155,063.00**

Other basis for payment: \$500,000.00 (FY23); \$525,000.00 (FY24); \$551,250.00 (FY25); \$578,813.00 (FY26)

II. JUSTIFICATION

7. What conditions require that this work be done?

Targeted Case Management Services are pervaded per the Medicaid State Plan Amendment in the Nevada Medicaid Services Manual.

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 staff available 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 Applicableb. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2018 - 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	aroma2	04/22/2022 11:23:41 AM
Division Approval	trya4	04/22/2022 11:30:57 AM
Department Approval	pburrel1	04/22/2022 11:46:37 AM
Contract Manager Approval	trya4	04/22/2022 11:59:43 AM
Budget Analyst Approval	laaron	05/19/2022 08:58:39 AM
BOE Agenda Approval	laaron	05/19/2022 08:58:41 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 CONTRACT

1. Contract Number: **19857** Amendment Number: **2**

Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Legal Entity Name: **HEALTH SERVICES ADVISORY GROUP, INC.**

Agency Code: **403** Contractor Name: **HEALTH SERVICES ADVISORY GROUP, INC.**

Appropriation Unit: **3158-04** Address: **3133 E CAMELBACK RD STE 140**

Is budget authority available?: **No** City/State/Zip: **PHOENIX, AZ 85016-4545**

If "No" please explain: June BOE approval contingent upon June IFC approval of funding. Work Program #22FRF31581. Contact/Phone: Mary Ellen Dalton, PhD 602-801-6701

Vendor No.: T81093076
NV Business ID: NV20001213956

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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	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 **07/01/2018**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **EQRO Vendor**

5. Purpose of contract:

This is the second amendment to the original contract which provides an external quality review of compliance with contractual service terms of the Managed Care Program, including an assessment of the quality outcomes, timelines, and access to service for which the contractors are obligated. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$2,962,597 to \$4,816,789 due to the continued need for these services.

This Contract Is Contingent Upon IFC Approval Of Work Program 22FRF31581.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,962,597.00	\$2,962,597.00	\$2,962,597.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$1,854,192.00	\$1,854,192.00	\$1,854,192.00	Yes - Action
3. New maximum contract amount:	\$4,816,789.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Balanced Budget Act of 1997 (BBA) requires that DHCFP contract with a qualified independent entity to annually review the quality outcomes, timeliness, and access to services for which the managed care contractors are contractually responsible.

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

The State does not have the staffing or expertise available to perform these services.

9. Were quotes or proposals solicited? Yes

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

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

Germane Solutions
Delmarva Foundation for Medical Care
Mercer Health & Benefits, LLC

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3491, 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: 01/10/2018 Anticipated re-bid date: 09/01/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2018 to 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 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	aroma2	05/09/2022 09:34:41 AM
Division Approval	ltuttl1	05/09/2022 09:43:27 AM
Department Approval	pburrel1	05/09/2022 11:02:43 AM
Contract Manager Approval	ltuttl1	05/09/2022 11:08:36 AM
Budget Analyst Approval	laaron	05/23/2022 16:32:41 PM
BOE Agenda Approval	laaron	05/23/2022 16:32:43 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: **25230**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Washoe County
Agency Code:	403	Contractor Name:	Washoe County Human Services
Appropriation Unit:	3158-24	Address:	350 S. Center Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89501
If "No" please explain:	Not Applicable	Contact/Phone:	Brandi Johnson 775-337-4489
		Vendor No.:	
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **TCM / ADHC / Admin**

5. Purpose of contract:

This is a new interlocal agreement to provide targeted case management, adult day healthcare and administrative cost recovery.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$32,438,002.00**

Other basis for payment: \$7,526,000.00 (FY23); \$7,902,300.00 (FY24); \$8,297,416.00 (FY25); \$8,712,286.00 (FY26)

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract serves the eligible Medicaid population in Washoe County who need Targeted Case Management Services and Adult Day Health Care. To increase payment and tracking efficiencies, the county requested all three services (TCM, ADHC, and administrative claiming) be combined into one contract.

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 staff available 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 Applicableb. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2017 - 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	aroma2	04/01/2022 14:29:02 PM
Division Approval	trya4	04/01/2022 15:07:00 PM
Department Approval	pburrel1	04/01/2022 17:56:24 PM
Contract Manager Approval	ltuttl1	04/04/2022 16:23:56 PM
Budget Analyst Approval	laaron	05/18/2022 09:42:54 AM
BOE Agenda Approval	laaron	05/18/2022 09:42:56 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: **25650**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Carson City Health and Human Services

Contractor Name: **Carson City Health and Human Services**Address: **900 E. Long Street**City/State/Zip: **Carson City, NV 89706**

Contact/Phone: Mary Jane Ostrander 775-887-2110

Vendor No.: T80990941

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,513,167.61**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$1,238,013.60, FY23 - \$1,275,154.01

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MAIL Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/13/2022 15:41:57 PM
Division Approval	trya4	04/13/2022 16:01:47 PM
Department Approval	pburrel1	04/19/2022 12:02:41 PM
Contract Manager Approval	trya4	04/19/2022 13:51:52 PM
Budget Analyst Approval	laaron	05/19/2022 09:21:29 AM
BOE Agenda Approval	laaron	05/19/2022 09:21:32 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
- 25658 Douglas County
- 25662 Elko County
- 25664 Esmeralda County
- 25668 Eureka County
- 25669 Humboldt County
- 25670 Lander County
- 25671 Lincoln County
- 25672 Lyon County
- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25658**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Douglas County Social Services
Agency Code:	403	Contractor Name:	Douglas County Social Services
Appropriation Unit:	3243-00	Address:	P. O Box 218
Is budget authority available?:	Yes	City/State/Zip	Minden, NV 89423
If "No" please explain:	Not Applicable	Contact/Phone:	Caren Witt 775-782-9825
		Vendor No.:	T40174400G
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$966,862.13**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$482,207.68, FY23 - \$484,654.44

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/22/2022 10:16:27 AM
Division Approval	trya4	04/22/2022 10:19:15 AM
Department Approval	pburrel1	04/25/2022 15:30:02 PM
Contract Manager Approval	trya4	04/25/2022 15:50:52 PM
Budget Analyst Approval	laaron	05/19/2022 09:54:50 AM
BOE Agenda Approval	laaron	05/19/2022 09:54:52 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
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- 25662 Elko County
- 25664 Esmeralda County
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- 25671 Lincoln County
- 25672 Lyon County
- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25669**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Humboldt County Human Services
Agency Code:	403	Contractor Name:	Humboldt County Human Services
Appropriation Unit:	3243-00	Address:	50 West 5th Street
Is budget authority available?:	Yes	City/State/Zip	Winnemucca, NV 89445
If "No" please explain:	Not Applicable	Contact/Phone:	Dave Mendiola, County Manager 775-623-6343
		Vendor No.:	T40139500E
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,058,404.47**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$528,250.34, FY23 - \$530,154.13

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFF pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bonder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/22/2022 07:25:08 AM
Division Approval	trya4	04/22/2022 08:21:35 AM
Department Approval	pburrel1	04/25/2022 15:29:30 PM
Contract Manager Approval	trya4	04/25/2022 15:51:21 PM
Budget Analyst Approval	laaron	05/19/2022 09:51:28 AM
BOE Agenda Approval	laaron	05/19/2022 09:51:30 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
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- 25672 Lyon County
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- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25670**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Lander County Social Services
Agency Code:	403	Contractor Name:	Lander County Social Services
Appropriation Unit:	3243-00	Address:	50 State Route 305
Is budget authority available?:	Yes	City/State/Zip	Battle Mountain, NV 89820
If "No" please explain:	Not Applicable	Contact/Phone:	Tonia Bakker 775-635-5311
		Vendor No.:	T40262000
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$538,923.81**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$269,150.64, FY23 - \$269,773.17

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/22/2022 07:22:38 AM
Division Approval	trya4	04/22/2022 08:21:13 AM
Department Approval	pburrel1	04/25/2022 15:29:06 PM
Contract Manager Approval	trya4	04/25/2022 15:50:16 PM
Budget Analyst Approval	laaron	05/19/2022 10:02:48 AM
BOE Agenda Approval	laaron	05/19/2022 10:02:49 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
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Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25671**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Lincoln County
Agency Code:	403	Contractor Name:	Lincoln County
Appropriation Unit:	3243-00	Address:	PO BOX 539
Is budget authority available?:	Yes	City/State/Zip	PIOCHE, NV 89043
If "No" please explain:	Not Applicable	Contact/Phone:	Denice Brown 775-962-8063
		Vendor No.:	T40267400D
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$280,815.09**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$140,293.55, FY23 - \$140,521.54

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/11/2022 10:11:43 AM
Division Approval	trya4	04/11/2022 10:33:28 AM
Department Approval	pburrel1	04/13/2022 10:43:23 AM
Contract Manager Approval	trya4	04/13/2022 10:54:05 AM
Budget Analyst Approval	laaron	05/18/2022 09:39:11 AM
BOE Agenda Approval	laaron	05/18/2022 09:39:13 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
- 25658 Douglas County
- 25662 Elko County
- 25664 Esmeralda County
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- 25669 Humboldt County
- 25670 Lander County
- 25671 Lincoln County
- 25672 Lyon County
- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25674**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Mineral County
Agency Code:	403	Contractor Name:	Mineral County
Appropriation Unit:	3243-00	Address:	PO BOX 1450
Is budget authority available?:	Yes	City/State/Zip	HAWTHORNE, NV 89415
If "No" please explain:	Not Applicable	Contact/Phone:	Teresa McNally 775-945-2446
		Vendor No.:	T40291300J
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$330,048.71**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$162,585.57, FY23 - \$167,463.14

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/11/2022 06:52:35 AM
Division Approval	trya4	04/11/2022 10:20:49 AM
Department Approval	pburrel1	04/13/2022 10:43:56 AM
Contract Manager Approval	trya4	04/13/2022 10:56:09 AM
Budget Analyst Approval	laaron	05/18/2022 09:35:17 AM
BOE Agenda Approval	laaron	05/18/2022 09:35:20 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
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- 25677 Storey County
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- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25678**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Washoe County Human Services
Agency Code:	403	Contractor Name:	Washoe County Human Services
Appropriation Unit:	3243-00	Address:	350 S. Center Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89501
If "No" please explain:	Not Applicable	Contact/Phone:	Amber Howell 775-337-4506
		Vendor No.:	T40283400A
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,152,047.50**

Other basis for payment: FY22 - \$6,525,161.97, FY23 - \$6,626,885.53

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/11/2022 06:36:24 AM
Division Approval	trya4	04/11/2022 10:05:10 AM
Department Approval	pburrel1	04/13/2022 10:42:48 AM
Contract Manager Approval	trya4	04/13/2022 10:50:58 AM
Budget Analyst Approval	laaron	05/19/2022 10:06:37 AM
BOE Agenda Approval	laaron	05/19/2022 10:06:40 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
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- 25672 Lyon County
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- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25679**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	White Pine County Social Services
Agency Code:	403	Contractor Name:	White Pine County Social Services
Appropriation Unit:	3243-00	Address:	297 East 11th Street Suite 7
Is budget authority available?:	Yes	City/State/Zip	Ely, NV 89301
If "No" please explain:	Not Applicable	Contact/Phone:	Desiree Barnson 775-293-6528
		Vendor No.:	T80971176V
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$267,497.82**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$133,186.66, FY23 - \$134,311.16

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/21/2022 09:11:32 AM
Division Approval	trya4	04/21/2022 10:00:22 AM
Department Approval	pburrel1	04/22/2022 10:00:30 AM
Contract Manager Approval	trya4	04/22/2022 10:16:24 AM
Budget Analyst Approval	laaron	05/19/2022 09:17:13 AM
BOE Agenda Approval	laaron	05/19/2022 09:17:16 AM
BOE Final Approval	Pending	



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
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- 25676 Pershing County
- 25677 Storey County
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- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25905**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Groundswell Services, INC.
Agency Code:	406	Contractor Name:	Groundswell Services, INC.
Appropriation Unit:	3161-04	Address:	P.O. Box 102381
Is budget authority available?:	Yes	City/State/Zip	Denver, CO 80250
If "No" please explain:	Not Applicable	Contact/Phone:	W. Neil Gowensmith 828-738-6694
		Vendor No.:	T32012271
		NV Business ID:	NV20222403700

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: C 17978

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 29 days**4. Type of contract: **Contract**Contract description: **Consultation Service**

5. Purpose of contract:

This is a new contract to provide a forensic strategic plan to address gaps, challenges, areas of focus, goals, and relevant competency models for the restoration of forensic clients. This contract is contingent upon IFC approval of work program #C57108.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$137,500.00**

Other basis for payment: Payment from invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

There are many challenges facing Nevada in managing the increasing demand for forensic services. Implementing changes, including changes implemented by other states facing similar crises, can ultimately help DHHS mitigate against more significant difficulties.

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

Agency do not have staff qualified in the specialized area of forensic consultation.

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 #40DHHS-S1865, and in accordance with NRS 333, the selected vendor was the only vendor that submitted a proposal. An internal review was done by the Division of Public and Behavioral Health.

d. Last bid date: 01/28/2022 Anticipated re-bid date: 11/01/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Joanne Malay, Deputy Administrator Ph: 702-486-8894

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	05/10/2022 10:38:46 AM
Division Approval	rmille8	05/10/2022 10:48:58 AM
Department Approval	Isherych	05/10/2022 11:30:58 AM
Contract Manager Approval	rmille8	05/12/2022 16:10:48 PM
Budget Analyst Approval	kanders2	05/16/2022 11:53:05 AM
BOE Agenda Approval	afrantz	05/20/2022 14:30:46 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: **19548** Amendment Number: **1**

Legal Entity Name: **NETSMART Technologies, Inc.**

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH** Contractor Name: **NETSMART Technologies, Inc.**

Agency Code: **406** Address: **11100 Nall Avenue**

Appropriation Unit: **3168-26** City/State/Zip: **Overland Park, KS 66211**

Is budget authority available?: **Yes** Contact/Phone: **Jeff Matthews 913-202-1660**

If "No" please explain: **Not Applicable** Vendor No.:

NV Business ID: **NV20101021052**

To what State Fiscal Year(s) will the contract be charged? **2018-2026**

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 #: **C 16383**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/10/2018**

Anticipated BOE meeting date **06/2022**

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **8 years and 83 days**4. Type of contract: **Contract**Contract description: **Medication Mgmt.**

5. Purpose of contract:

This is the first amendment to the original contract which provides for the implementation and integration of the medication management system including electronic order entry and electronic medication administration records to improve patient safety and prescribing practices. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount from \$2,753,513.34 to \$4,701,432.73 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:	\$2,753,513.34	\$2,753,513.34	\$2,753,513.34	Yes - Action
2. Amount of current amendment (#1):	\$1,947,919.39	\$1,947,919.39	\$1,947,919.39	Yes - Action
3. New maximum contract amount:	\$4,701,432.73			
and/or the termination date of the original contract has changed to:	06/30/2026			

II. JUSTIFICATION

7. What conditions require that this work be done?

This system is necessary to regulate and monitor Medication orders for DPBH and DCFS.

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 authority 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: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 170703

Approval Date: 07/10/2017

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

This vendor provides services related to similar products already in use.

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Providing services to DPBH since 2009 - 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

rmille8

05/10/2022 10:56:30 AM

Division Approval

rmille8

05/10/2022 10:56:32 AM

Department Approval	lsherych	05/10/2022 11:28:14 AM
Contract Manager Approval	rmille8	05/10/2022 12:42:13 PM
EITS Approval	daxtel1	05/10/2022 12:59:10 PM
Budget Analyst Approval	kanders2	05/17/2022 15:46:29 PM
BOE Agenda Approval	afrantz	05/23/2022 13:50:04 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

MEMORANDUM

TO: Debi Reynolds, Deputy Administrator, DPBH, DHHS
John Borrowman, Behavioral Health Fiscal Manager, DPBH, DHHS
Joanne Malay, DA Clinical Services, DPBH, DHHS
Lorraine McMullen, IT Professional III, Project Manager, DPBH, DHHS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DHHS – TIN 334 – *Pharmacy Information System* – BA 3168 – Update B

DATE: May 7, 2022

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health's (DPBH) – *Pharmacy Information System* – TIN 334, Update B.

The submitted TIN, for an estimated value of \$458,715.62 in the FY22/FY23 biennium and \$973,211.07 in the FY24/FY25 biennium (for a total decrease of \$397,475.01 for the combined biennia) and an additional \$515,993 for FY26 (100% Cost Allocation), is to extend the ongoing licensing, subscription, hosting, support, and maintenance services for the SNAMHS/NNAMHS Pharmacy Information System that interfaces with several system modules. This update has been corrected for costing.

The Pharmacy Information System supports SNAMHS/NNAMHS inpatient medication management and maintains the inpatient Electronic Medication Authorization Record (EMAR) in myAvatar EHR. The system is housed within the Netsmart PaaS environment. This fully automated, proprietary system supports clinicians and pharmacists in prescribing and dispensing inpatient medication orders in the myAvatar system, thus improving patient safety, and removing risks associated with the paper MAR.

Ongoing licensing, support, and maintenance of this system is critical to the SNAMHS/NNAMHS inpatient medication ordering, pharmacy dispensing, and medication record authorization management.

The agency considers the investment and final implementation to have a moderate security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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 CONTRACT

1. Contract Number: **23986** Amendment Number: **2**

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH** Legal Entity Name: **CARAHSOFT TECHNOLOGY**

Agency Code: **406** Contractor Name: **CARAHSOFT TECHNOLOGY**

Appropriation Unit: **3219-13** Address: **CORPORATION**

Is budget authority available?: **Yes** City/State/Zip: **11493 SUNSET HILLS RD STE 100 RESTON, VA 20190-5230**

If "No" please explain: Not Applicable Contact/Phone: Johnathan Rodger 703/871-8500

Vendor No.: PUR0004357

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2021-2022**

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

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

Agency Reference #: C 17776

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **1 year and 148 days**4. Type of contract: **Contract**Contract description: **MSA Work Plan**

5. Purpose of contract:

This is the second amendment to the original service agreement under statewide contract #99SWC-NV18-421 to provide cloud services for enterprise vaccination and inventory management solution for COVID-19. This amendment extends the termination date from June 30, 2022 to July 31, 2023 and increases the maximum amount from \$8,331,286.83 to \$ 10,565,059.64 to add support services for the statewide vaccine management hub.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$6,064,154.21	\$6,064,154.21	\$6,064,154.21	Yes - Action
a. Amendment 1:	\$2,267,132.62	\$2,267,132.62	\$2,267,132.62	Yes - Action
2. Amount of current amendment (#2):	\$2,233,772.81	\$2,233,772.81	\$2,233,772.81	Yes - Action
3. New maximum contract amount:	\$10,565,059.64			

II. JUSTIFICATION

7. What conditions require that this work be done?

COVID-19 Emergency response to trace, track and vaccinate Nevada's citizens.

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.

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. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Current vendor with DPBH since June 2020 - 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	rmille8	05/06/2022 10:10:09 AM
Division Approval	rmille8	05/06/2022 10:10:13 AM
Department Approval	Isherych	05/10/2022 11:29:36 AM
Contract Manager Approval	rmille8	05/10/2022 14:52:13 PM
EITS Approval	ljeane	05/10/2022 14:59:05 PM

Budget Analyst Approval
BOE Agenda Approval

kanders2
afrantz

05/17/2022 09:19:59 AM
05/23/2022 15:24:48 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
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M E M O R A N D U M

TO: Julia Peek, Deputy Administrator, DPBH, DHHS
Sophia Allec, Management Analyst II, DPBH, DHHS
Erin Williams, OIT IT Manager III, DPBH, DHHS
Lorraine McMullen, ITP III/OIT Project Manager, DPBH, DHHS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DPBH – 240 – *MTX Vaccination and Inventory Management System* – BA 3219 – Update-C

DATE: April 29, 2022

We have completed an updated review for the DHHS-Division of Public and Behavioral Health's (DPBH) – *MTX Vaccination and Inventory Management System* – TIN 240, Update-C.

The submitted TIN, for an estimated value of \$4,389,925.54 in the FY22/FY23 biennium and \$110,979.89 in the FY24/FY25 biennium (a total decrease of \$3,050,593.47 for the combined biennia from update B) (100% Federal Grant funding), is to provide ongoing hosting, warranty support, and maintenance for the MTX Vaccination and Inventory Management System hosted within the Carahsoft Salesforce cloud platform. The solution, which meets federal and state requirements, is used by the Division for all tracing, tracking, and vaccination information for COVID-19. Expected implementation is in FY24.

The agency considers the investment and final implementation to have an ongoing moderate security risk, as the solution includes PII and is subject to federal and/or other security standards. All information technology services and systems should have documented security specifications that include an analysis of security risks and recommended controls. DPBH's ISO will conduct pre- and post-implementation security reviews for the investment.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **24851**Amendment Number: **2**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Legal Entity Name: **CSAA Insurance Services, Inc.**Agency Code: **406**Contractor Name: **CSAA Insurance Services, Inc.**Appropriation Unit: **3219-13**Address: **3055 Oak Road**Is budget authority available?: **Yes**City/State/Zip: **Walnut Creek, CA 94597**

If "No" please explain: Not Applicable

Contact/Phone: **Chris Knievel 715-722-6678**Vendor No.: **T27043709**NV Business ID: **NV19691002311**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Epidemiology and Laboratory Capacity Funds

Agency Reference #: **C 17910**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2021**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **08/31/2022**Contract term: **364 days**4. Type of contract: **Contract**Contract description: **Contract Tracing**

5. Purpose of contract:

This is the second amendment to the original contract which provides disease investigation resources to assist the counties and health districts, need for additional resources. This amendment increases the maximum amount from \$5,431,600 to \$8,255,008 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:	\$5,431,600.00	\$5,431,600.00	\$5,431,600.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$2,823,408.00	\$2,823,408.00	\$2,823,408.00	Yes - Action
3. New maximum contract amount:	\$8,255,008.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

COVID-19 pandemic urgency to meet grant award requirements of contact tracing and disease investigation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
 Due to the urgency of providing these services, CSAA already has the structure of their call center in place and will be able to quickly deploy staff to assist with contact tracing and disease investigation.
9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? No
 a. List the names of vendors that were solicited to submit proposals (include at least three):
 Not Applicable
 b. Solicitation Waiver: **Exempt (Per statute)**
 c. Why was this contractor chosen in preference to other?
 This is an emergency contract approved by Administrator Doty according to NAC 333.114.
 d. Last bid date: Anticipated re-bid date:
10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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 with DPBH since 2020, satisfactory services.
14. Is the contractor currently involved in litigation with the State of Nevada?
 No If "Yes", please provide details of the litigation and facts supporting approval of the contract:
 Not Applicable
15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
 Other
 Foreign Nonprofit 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:
20. Contract Status:
 Contract Approvals:
- | Approval Level | User | Signature Date |
|-------------------------|-----------|------------------------|
| Budget Account Approval | rmille8 | 03/22/2022 10:54:27 AM |
| Division Approval | rmille8 | 04/05/2022 15:08:40 PM |
| Department Approval | Ischerych | 04/05/2022 15:53:17 PM |

Contract Manager Approval	rmille8	04/05/2022 16:00:57 PM
Budget Analyst Approval	kanders2	05/11/2022 07:04:37 AM
BOE Agenda Approval	afrantz	06/01/2022 12:17:12 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: **22566**Amendment Number: **2**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Legal Entity Name: **Access to Healthcare Network, INC.**Agency Code: **406**Contractor Name: **Access to Healthcare Network, INC.**Appropriation Unit: **3220-21**Address: **4001 S. Virginia St., Suite F**Is budget authority available?: **Yes**City/State/Zip: **Reno, NV 89502**

If "No" please explain: Not Applicable

Contact/Phone: **Sherri Rice 775-284-1904**Vendor No.: **T29014671**NV Business ID: **NV20061133335**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 #: **RFP 40DHHS-S590/ C 17502**

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 **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2023**Contract term: **3 years and 180 days**4. Type of contract: **Contract**Contract description: **Women's Health**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing management of Nevada's Breast and Cervical Cancer Early Detection Program. This amendment increases the maximum amount from \$6,250,000 to \$8,750,000 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:	\$6,250,000.00	\$6,250,000.00	\$6,250,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$2,500,000.00	\$2,500,000.00	\$2,500,000.00	Yes - Action
3. New maximum contract amount:	\$8,750,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

To improve access to screening, Congress passed the Breast and Cervical Cancer Mortality Prevention Act of 1990, Public Law 101-354, and the Centers for Disease Control and Prevention (CDC) created the National Breast and Cervical Cancer Early Detection Program (NBCCEDP). The NBCCEDP funds all 50 states, the District of Columbia, 6 U.S. territories, and 13 tribes or tribal organizations to provide screening services for breast and cervical cancer. This contract will help DPBH implement this Act.

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 skills or expertise to perform these services.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #40DHHS-S590, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

125 individual bidders were solicited through NevadaEPro.com. Access to Healthcare was the only proposer.

d. Last bid date: 04/08/2019 Anticipated re-bid date: 12/01/2021

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Services provided to DPBH since 2014 - satisfactory

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	rmille8	04/08/2022 09:15:54 AM
Division Approval	rmille8	04/08/2022 11:35:33 AM
Department Approval	cphinney	04/20/2022 15:40:58 PM
Contract Manager Approval	rmille8	04/21/2022 12:32:29 PM
Budget Analyst Approval	kanders2	05/11/2022 07:05:13 AM
BOE Agenda Approval	afrantz	05/20/2022 15:23:31 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: **26204**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Agate Software, Inc.
Agency Code:	406	Contractor Name:	Agate Software, Inc.
Appropriation Unit:	3223-19	Address:	2214 University Park Dr Ste 102
Is budget authority available?:	Yes	City/State/Zip	Okemos, MI 48864
If "No" please explain:	Not Applicable	Contact/Phone:	Jason P. Hagle 517-336-2537
		Vendor No.:	
		NV Business ID:	NV20101743480
To what State Fiscal Year(s) will the contract be charged?	2022-2026		

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 18004		

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/15/2026**Contract term: **4 years and 15 days**4. Type of contract: **Contract**Contract description: **Contract Mgmt System**

5. Purpose of contract:

This is a new contract to provide a tracking software system for grants and contracts.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,217,606.00**

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?

The Division of Public and Behavioral Health (DPBH) Contracting Units current process of the creation, tracking and management of contracts, subgrants and related document types is an inefficient, cumbersome and lengthy manual process which affects not only the Contracting Unit, but other Division, Department and vendor/partner staff as well.

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 perform

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):

MTX Group
Periscope Holdings, Inc.
Optimus BT

b. Solicitation Waiver: **Not Applicable**

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

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: 10/15/2021 Anticipated re-bid date: 01/30/2025

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Current vendor with Department of Traffic Safety, satisfactory services.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	05/04/2022 13:04:36 PM
Division Approval	rmille8	05/04/2022 13:04:38 PM
Department Approval	Isherych	05/05/2022 14:42:16 PM
Contract Manager Approval	rmille8	05/06/2022 16:33:38 PM
EITS Approval	daxtel1	05/06/2022 16:47:43 PM
Budget Analyst Approval	kanders2	05/17/2022 07:42:20 AM
BOE Agenda Approval	afrantz	05/23/2022 11:03:26 AM
BOE Final Approval	Pending	



STATE OF NEVADA
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M E M O R A N D U M

TO: Debi Reynolds, Deputy Director, Administrative Services, DPBH
Tasha Couste, IT Manager II, DPBH
Kelli Quintero, ASO III, DPBH
Laurie Gleason, ASO II, DPBH

CC: Alan Cunningham, State CIO, EITS, DOA
Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DPBH – 93 – Electronic Contracting System –
3223 – Update a

DATE: September 27, 2021

We have completed the review for DPBH's - Electronic Contracting System - TIN 93 Update a.

The submitted TIN is for an estimated value of \$1,240,150.00 in the current biennium and \$410,532.00 next biennium (100% Indirect/Cost Allocation) to implement a new technology, a new automated solution, and/or new equipment not previously in use by the agency.

The scope is being amended to:

Implement an electronic Contract Management system

1. Implement a system that electronically creates, tracks, manages, and stores all contractual documents such as: contracts, subgrants, amendments, extensions, maintenance agreements, subawards, work orders, and Memo of Understanding (MOU)
2. Optimizes the process to increase throughput and increase staff efficiency
3. Houses all related documents, such as Business Associate Agreements and Data Sharing Agreements for each contract (when required)
4. Allows for a single shared repository with version control and categorization for all documents

Automate and track all system events

1. Events such as logins, document creation, modifications, negotiations, and alerts/notifications will be tracked and managed at the user permission level
2. Implement an online approval process to expedite approvals and eliminates the need for email communication or delivery of hard copied documents
3. Sends notifications and/or alerts of upcoming due dates for actions such as: expirations and renewals
4. Allows users (based on permission level) to view, search and retrieve contractual documents
5. Provides comprehensive, easy-to-read dashboards and extensive reporting capabilities and analysis features

Provide a Technical Support Model in a Secure Location

1. Provides technical support to maintain the solution that minimizes downtime and offers technical support to all users

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **26229**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	NSHE - UNR
Agency Code:	406	Contractor Name:	NSHE - UNR
Appropriation Unit:	3648-08	Address:	1664 N. Virginia Street, M/S 0332
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89557-0332
If "No" please explain:	Not Applicable	Contact/Phone:	Susan A. Poore 7757846003
		Vendor No.:	
		NV Business ID:	Governmental Entity
To what State Fiscal Year(s) will the contract be charged?	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 #: C 17939

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Telemedicine**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing psychiatric services to mental health clinics in rural Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,745.00**

Other basis for payment: Per Attachment B: Financial Schedule: Psychiatric Residency and Child And Adolescent Fellowship

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract allows DPBH and UNRMED to treat patients more efficiently utilizing teleconferencing equipment to quickly diagnose and treat patients.

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

DPBH is not staffed appropriately to provide these types of services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not 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 public agencies to perform and governmental service, activity, or undertaking.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Ongoing vendor with the State of Nevada with satisfactory services.

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

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

Not Applicable

15. The contractor is 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	rmille8	05/06/2022 09:59:47 AM
Division Approval	rmille8	05/06/2022 09:59:49 AM
Department Approval	Isherych	05/10/2022 11:28:38 AM
Contract Manager Approval	rmille8	05/10/2022 13:09:59 PM
Budget Analyst Approval	kanders2	05/16/2022 09:45:52 AM
BOE Agenda Approval	afrantz	05/20/2022 14:12:43 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: **25931**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3228-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DATA BUILDERS, INC.**Contractor Name: **DATA BUILDERS, INC.**Address: **PO BOX 1263**City/State/Zip: **TEMECULA, CA 92593-1263**Contact/Phone: **951/699-0777**Vendor No.: **PUR0004208A**NV Business ID: **NV20131523313**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **30.00 %** Fees 0.00 %**X** Federal Funds **70.00 %** 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? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Q51 Hearings Databas**

5. Purpose of contract:

This is a new contract to provide ongoing support, licensing, maintenance and modifications for the Program Review & Evaluation's Q5i hearings database.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$111,604.00**

Other basis for payment: As specified in Attachment A - Scope of Work

II. JUSTIFICATION

7. What conditions require that this work be done?

The Q5i hearings system must be maintained to continue to meet the needs of the program and State/Federal guidelines.

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

State employees do not have the resources 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 #: 220306

Approval Date: 03/29/2022

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

Nevada Administrative Code (NAC) 333.150(2)(a) & (b)(6) authorizes the Administrator of the Purchasing Division to waive the solicitation requirements in instances where contracts by their nature are not compatible with competitive solicitation; such contracts may be sole or single source or a professional service not adaptable to competitive selection.

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

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with DWSS and providing satisfactory services.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Connie Campbell-Loving, Social Service Chief, III Ph: 775-684-0603

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbuscay	04/28/2022 12:55:15 PM
Division Approval	bberry	04/28/2022 17:05:09 PM
Department Approval	mchappel	04/29/2022 11:44:22 AM
Contract Manager Approval	mpomerle	05/05/2022 13:53:34 PM
EITS Approval	daxtel1	05/06/2022 13:55:57 PM
Budget Analyst Approval	afrantz	05/18/2022 09:19:10 AM
BOE Agenda Approval	afrantz	05/18/2022 09:19:13 AM
BOE Final Approval	Pending	



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M E M O R A N D U M

TO: Robert Thompson, Administrator, DWSS, DHHS
Brenda Berry, Chief Financial Officer, DWSS, DHHS
Bart London, Chief IT Manager, DWSS, DHHS
Connie Campbell-Loving, Chief III PRE/QC, DWSS, DHHS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
Sean Montierth, IT Chief, Computing, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, Business Process Analyst III, EITS, DOA

SUBJECT: TIN Completion Memo – DHHS – 76 – *Data Builders Contract (Q5i)* – BA 3228

DATE: March 24, 2022

We have completed our review for the Department of Health and Human Services' (DHHS) – *Data Builders Contract (Q5i)* – TIN 76.

The submitted TIN, for an estimated value of \$53,503 this biennium (an additional \$27,318) and \$55,783 in the next biennium (30% General Fund and 70% Federal Grant), is to renew the ongoing maintenance contract with Data Builders (Q5i).

Q5i is a federally approved quality assurance (QA) system that has been used by the Division of Welfare and Supportive Services (DWSS) QC function for over 15 years. This system provides case load error reporting to the federal government and tracks hearing information. DWSS is required to use a QA system such as Q5i for reporting. The current contract expires 7/1/2022. This TIN will renew the contract with Data Builders for uninterrupted, continued use of Q5i.

While Q5i is supported by Data Builders, it is fully implemented within DWSS' infrastructure, on server equipment that physically resides at an EITS Data Center.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **24393**Amendment Number: **3**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Legal Entity Name: **DELOITTE CONSULTING LLP**Agency Code: **407**Contractor Name: **DELOITTE CONSULTING LLP**Appropriation Unit: **3228-47**Address: **4022 SELLS DR**Is budget authority available?: **No**City/State/Zip: **HERMITAGE, TN 37076-2903**

If "No" please explain: Budget Authority pending June IFC approval of Work Program C58572.

Contact/Phone: **615/882-7158**Vendor No.: **T27024237A**NV Business ID: **NV20081436471**To what State Fiscal Year(s) will the contract be charged? **2021-2024**

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

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **407**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/08/2021**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **2 years and 206 days**4. Type of contract: **Contract**Contract description: **P-EBT Benefits**

5. Purpose of contract:

This is the third amendment to the original contract which provides Pandemic-Electronic Benefit Transfer benefits to children who qualify for the National School Lunch Program. This amendment extends the termination date from June 30, 2022 to December 31, 2023 and increases the maximum amount from \$5,134,167 to \$8,122,167 to implement system enhancements and extend post-production support services. This contract is contingent upon IFC approval of work program #C58572.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$3,300,568.00	\$3,300,568.00	\$3,300,568.00	Yes - Action
a. Amendment 1:	\$1,556,399.00	\$1,556,399.00	\$1,556,399.00	Yes - Action
b. Amendment 2:	\$277,200.00	\$277,200.00	\$277,200.00	Yes - Action
2. Amount of current amendment (#3):	\$2,988,000.00	\$2,988,000.00	\$2,988,000.00	Yes - Action
3. New maximum contract amount:	\$8,122,167.00			
and/or the termination date of the original contract has changed to:	12/31/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Consolidated Appropriations Act provides states with the opportunity to provide P-EBT benefits to children who qualify for the National School Lunch Program.

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

State Staff does not possess the expertise required to perform this modification to the TANF system.

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 #40DHHS-S1537, 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: 03/26/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Vendor under contract with multiple agencies. 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:

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	cbuscay	05/03/2022 07:43:53 AM
Division Approval	bberry	05/09/2022 13:42:38 PM
Department Approval	rthomps1	05/09/2022 14:18:00 PM
Contract Manager Approval	mpomerle	05/09/2022 15:52:15 PM
EITS Approval	daxtel1	05/10/2022 00:40:35 AM
Budget Analyst Approval	afrantz	05/20/2022 08:55:45 AM
BOE Agenda Approval	afrantz	05/20/2022 08:55:52 AM



STATE OF NEVADA
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M E M O R A N D U M

TO: Robert Thompson, Administrator, DWSS
Brenda Berry, Chief Financial Officer, DWSS
Bart London, Chief IT Manager, DWSS
Sheri Gallucci, Program Specialist III, DWSS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
Sean Montierth, IT Chief, Computing, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, Business Process Analyst III, EITS, DOA

SUBJECT: TIN Completion Memo – DWSS – 223 – *PEBT 2021-2023* – BA3228 – Update-C

DATE: March 15, 2022

We have completed an updated review for the Division of Welfare and Supportive Services' (DWSS) – *PEBT 2021-2023*, TIN 223.

The State of Nevada's Division of Welfare and Supportive Services (DWSS) is requesting an additional \$3,265,200 in funding for the current biennium (100% USDA Federal Grant funding) to implement changes in the scope of work for the P-EBT project for School Year 21-22. The new scope includes:

"AMPS (DWSS's eligibility system)

- * Complete the development of the PEBT-case,
- * processing BAP Develop a P-EBT electronic casefile and storage system Develop P-EBT notices.

Access Nevada (DWSS's online application portal)

Make enhancements to Access Nevada so parents/primary guardians have the ability to upload documents.

1. Issue SY21-22 Summer P-EBT benefits. Please note that FNS has not released guidance on the Summer P-EBT Program for the SY21-22. DWSS anticipates that all FRL eligible children, which is approximately 390,000 children will be eligible for Summer P- EBT benefits.

2. Issue benefits to any students that may have been missed from the SY20-21 issuances:

*Students whose data was not processed due to incomplete addresses, guardian information, school codes, and FRL enrolment dates received from Nevada Department of Education (“NDE”). DWSS will work with NDE and Nevada Department of Agriculture (“NDA”) to collect the necessary data to make appropriate corrections.

*Students who may have been excluded initially will also be included in this data correction. DWSS will work with Nevada Department of Education (“NDE”) and Nevada Department of Agriculture (“NDA”) to collect the necessary student data.”

This request is in addition to the \$4,856,967.00 in funding requested in the 6/7/2021 Completion Memo (Update-B) that was in response to USDA’s memos issued on 11/16/2020 (Pandemic EBT – State Plans for School Year 2020-2021) and April 26, 2021 (Pandemic EBT – Summer 2021).

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **20123** Amendment Number: **2**

Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES** Legal Entity Name: **INFOMAGNETICS TECHNOLOGIES**

Agency Code: **407** Contractor Name: **INFOMAGNETICS TECHNOLOGIES**

Appropriation Unit: **3228-26** Address: **USA CORPORATION DBA IMT USA
701 LEE ST STE 430**

Is budget authority available?: **Yes** City/State/Zip: **DES PLAINES, IL 60016-4554**

If "No" please explain: Not Applicable Contact/Phone: **847/598-3544**

Vendor No.: **T32011219**

NV Business ID: **NV20181300474**

To what State Fiscal Year(s) will the contract be charged? **2019-2026**

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	12.90 %	Fees	0.00 %
X	Federal Funds	27.10 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	60.00 % Transfers from other DHHS Divisions

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/10/2018**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **7 years and 357 days**

4. Type of contract: **Contract**

Contract description: **Master Client Index**

5. Purpose of contract:

This is the second amendment to the original contract which provides a Master Client Index solution that maintains a unique identifier for clients in programs and systems within the department. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount of the contract from \$1,275,000 to \$1,832,580 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:	\$1,275,000.00	\$1,275,000.00	\$1,275,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$554,067.00	\$554,067.00	\$554,067.00	Yes - Action
3. New maximum contract amount:	\$1,829,067.00			
and/or the termination date of the original contract has changed to:	06/30/2026			

II. JUSTIFICATION

7. What conditions require that this work be done?

In order to perform data analytics to determine total clients within the Department of Health and Human Services (DHHS) for performing caseload projections, DHHS requires a system to compile and consolidate client data from all Divisions within DHHS.

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 abilities to provide these services.

9. Were quotes or proposals solicited? Yes

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

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

InfoMagnetics Technologies USA Corporation
EKS&H

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

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

Pursuant to RFP #40DHHS-S25, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

- d. Last bid date: 02/15/2018 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with DWSS and providing satisfactory services.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

Budget Account Approval

User

cbusay

Signature Date

05/03/2022 07:45:03 AM

Division Approval	bberry	05/03/2022 16:44:30 PM
Department Approval	rthomps1	05/06/2022 14:02:55 PM
Contract Manager Approval	mpomerle	05/06/2022 14:09:57 PM
EITS Approval	daxtel1	05/06/2022 15:18:27 PM
Budget Analyst Approval	afrantz	05/20/2022 14:47:49 PM
BOE Agenda Approval	afrantz	05/20/2022 14:47:55 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: Robert Thompson, Administrator, DWSS, DHHS
Brenda Berry, Chief Financial Officer, DWSS, DHHS
Bart London, Chief, IT Manager, DWSS, DHHS
Larry Smolyansky, IT Manager III, DWSS, DHHS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
Sean Montierth, IT Chief, Computing, EITS, DOA
Jon Mathews, IT Chief, Communication, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DHHS – 353 – *Master Client Index (MCI)* – BA 3228

DATE: April 4, 2022

We have completed our review for the Department of Health and Human Services' (DHHS) – *Master Client Index (MCI)* – TIN 353.

The submitted TIN, for an estimated value of \$245,128 in the FY22/FY23 biennium and \$312,452 in the FY24/FY25 biennium (12.86% General Fund, 27.14% Federal Grant, and 60% transfers from other DHHS divisions), is to extend the contract for M&O hardware appliance software licensing and vendor product support.

MCI aggregates data from five DHHS Divisions for reporting to State and Federal partners by creating a cross-index of all DHHS databases and ensuring that a client is logically represented only once and with the same set of demographic and registration data. The five affected Divisions within DHHS are the Divisions of Health Care Financing and Policy (DHCFFP), Welfare and Supportive Services (DWSS), Aging and Disability Services (ADSD), Public and Behavioral Health (DPBH) and Child and Family

Services (DCFS). The Public Defender is also included within the organizational structure of DHHS. The solution will reduce the number of duplicate records in disparate DHHS systems and aid in statistical analysis of Nevada's population.

The solution is a standalone appliance that is hosted in a State facility and has been in use by the five listed DHHS agencies since 2018. Data access controls allow only the DHHS Office of Analytics to see the data and assures compliance with all required security measures.

The agency considers this investment to be mission critical as it has significant impact on daily business transactions and a low security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **26043**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3233-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CHANGE AND INNOVATION AGENCY, LLC**Contractor Name: **CHANGE AND INNOVATION AGENCY, LLC**Address: **8908 N GLENWOOD AVE**City/State/Zip: **KANSAS CITY, MO 64157-7889**Contact/Phone: **573/230-7470**Vendor No.: **T32002127**NV Business ID: **NV20121733603**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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 **30.00 %** Fees 0.00 %**X** Federal Funds **70.00 %** 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 **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **3 years and 30 days**4. Type of contract: **Contract**Contract description: **Lobby Management**

5. Purpose of contract:

This is a new contract to provide ongoing lobby management system licensing, support and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,619,470.48**

Other basis for payment: As specified in Attachment BB: Negotiated Cost Summary

II. JUSTIFICATION

7. What conditions require that this work be done?

The Lobby Management system is essential for maintaining the streamlined service process, increased client satisfaction, and enhanced productivity of DWSS District Office employees.

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

State employees do not have the resources 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 #: 211202

Approval Date: 12/13/2021

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

Nevada Administrative Code (NAC) 333.150(2)(a) & (b)(6) authorizes the Administrator of the Purchasing Division to waive the solicitation requirements in instances where contracts by their nature are not compatible with competitive solicitation; such contracts may be sole or single source or a professional service not adaptable to competitive selection.

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Joe Garcia, Social Services Chief III, POST Ph: 775) 684-0516

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbuscay	05/03/2022 07:45:37 AM
Division Approval	bberry	05/03/2022 16:01:23 PM
Department Approval	rthomps1	05/06/2022 13:59:32 PM
Contract Manager Approval	mpomerle	05/06/2022 15:12:47 PM
EITS Approval	daxtel1	05/06/2022 15:17:49 PM
Budget Analyst Approval	afrantz	05/20/2022 09:25:02 AM
BOE Agenda Approval	afrantz	05/20/2022 09:25:06 AM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
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M E M O R A N D U M

TO: Steve Fisher, Administrator, DWSS
Bart London, Chief IT Manager, DWSS
Joe Garcia, Social Services Chief III, DWSS
Brenda Berry, CFO, DWSS

CC: Tim Galluzi, Administrator, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DWSS - 178 - Lobby Management System - 3233
- Update b

DATE: December 8, 2021

We have completed the review for DWSS' Lobby Management System - TIN 178 Update b.

The submitted TIN is for an estimated value of \$958,950.40 in the current biennium and \$1,116,055.92 next biennium (70% Federal Grant and 30% General Fund) to enhance and/or upgrade an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

DWSS has been using a Lobby Management System (LMS) since 2014 provided by Change and Innovation Agency, LLC (CIA). The solution has met all the functional and technical requirements and has streamlined DWSS services to our customers. The CIA solution is cloud base, software as a service (SaaS) solution tailored to DWSS' needs. CIA, in order to better serve their customers' needs in support of SNAP, TANF, and all related applications, has developed a new system named CURRENT with existing functional requirements and enhancements. The CIA SaaS solution, known as PathOS, is being decommissioned and all States are moving onto Current. DWSS is preparing for the transition and future use of the CIA LMS.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.



**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#:	211202@

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 <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: DWSS		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Joe Garcia, Chief III DWSS Contracts	775.684.0516 -	jgarcia@dwss.nv.gov dwsscontracts@dwss.nv.gov

1b	Vendor Information:	
	Vendor Name:	Change and Innovation Agency
	Contact Name:	Blake Shaw
	Complete Address: City, State, and Zip Code	8908 N. Glenwood Ave. Kansas City, MO 64157
	Telephone Number:	573.230.7470
	Email Address:	blake@changeagents.info

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? Check One:	Yes:	X	No:	
	Amendment Number:	N/A			
	Enter CETS Number:	N/A			

1e	Term:				
	One (1) Time Purchase? Check One:	Yes:		No:	X
	Contract:	Start Date:	July 1, 2022	End Date:	June 30, 2025

1f	Funding:	
	State Appropriated:	General Fund: \$485,841.14
	Federal Funds:	Federal Fund: \$1,133,629.34
	Grant Funds:	
	Other (Explain):	

Rec'd 12/09/21

Purchasing Use Only:

Approval #:

211202 @

1g

Total Estimated Value of this Service Contract, Amendment or Purchase:

\$1,619,470.48

2

Provide a description of work/services to be performed or commodity/good to be purchased:

The Division of Welfare and Supportive Services (DWSS) wishes to enter into a new contract with the Change and Innovation Agency (CIA) to provide ongoing Lobby Management System (LMS) licensing and support using CIA's proprietary 'real time' LMS known as CURRENT (formerly known as PathOS). CURRENT allows DWSS to effectively manage the volume of work being received by all entry points contributing to our growth under process management by not only allocating resources appropriately under one roof but being able to cross our resources over from office to office. It is the tool that allows us to effectively manage a universal caseload, statewide which enables us to preserve our gained efficiencies.

3

What are the unique features/qualifications required for this service or good that are not available from any other vendor:

DWSS submitted an RFP for Business Process Reengineering (BPR) services, and upon selection of a vendor, it became apparent the agency also needed to go to bid for a lobby management system. Change and Innovation (CIA) has successfully partnered with DWSS to reengineer business practices in all Field Offices, as well as within the Energy Assistance Program (EAP) and New Employees of Nevada (NEON) program. CIA's proprietary LMS called (CURRENT) enables DWSS to share work statewide, thereby improving efficiencies and continuity. CURRENT provides real-time monitoring of all client workflows ensuring staff do not deviate from the established BPR procedures and unintentionally corrupt the established business process and workflow. This is accomplished by constant analysis of workflow tracked by CURRENT. CURRENT also provides a variety of robust reports for determining staffing levels for Program and Field Operations, evaluating worker level production, and reporting data to the legislature. CURRENT supports the agency in helping determine eligibility and enrollment staffing levels per office, program, and purpose of customer interaction. This LMS has been designed to meet the needs of DWSS BPR procedures and has been interfaced with DWSS' mainframe (NOMADS/AMPS). Integration has reduced the manual staff intervention needed, allowing the division to utilize saved personnel hours to process additional tasks. CURRENT also provides a granular status of program specific outcomes which prior platforms did not deliver. CURRENT allows a flexible designation and delivery of staff resources by allowing managerial users to re-direct staff without causing interruption to clientele and staff. The technology and rules within CURRENT, increase agency capacity and facilitate a "one and done" client eligibility determination more efficiently than prior methods, resulting in the ability to determine eligibility for individuals at first contact 75% of the time.

Purchasing Use Only:

Approval #:

211202 @

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

4

The effort and expertise already provided by C!A is unparalleled. They have an 8-year proven track record with DWSS. DWSS has integrated our NOMADS/AMPS mainframe with C!A's proprietary system (CURRENT) that is designed to work with the BPR process designed by C!A. Replacing the CURRENT system would cost DWSS millions of dollars and disrupt an already proven process and workflow system. Corrupting or not maintaining the CURRENT system could result in reduced capacity, poor timeliness, poor quality, increased error rates and potential federal sanctions. Increased staffing would be needed to manage the disruptions resulting from obtaining a new vendor and causing eligibility delays to the customers we serve. Additionally, our DWSS Information Technology (IT) team is balancing multiple competing projects and would not be able to take on another complex project at this time. A new vendor would need to become well-versed with our mainframe systems, and BPR processes, prior to development and implementation of a new Lobby Management System.

Were alternative services or commodities evaluated?

Check One:

Yes

No

X

a. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

Although another vendor may be able to provide a comparable LMS, it may result in the need to perform another BPR analysis, extremely high costs, and potential negative impacts when DWSS already has a proven LMS.

5

The CURRENT system manages how, when, and who processes our work for approximately 1,220 division staff. There would be a negative cost-benefit to the state if DWSS were to transition to a new vendor. It would also disrupt an already highly functioning process which increased timeliness of case processing for Nevadans and protects State and Federal assets.

The engagement of a new vendor would require DWSS to:

- i. *Educate the vendor with knowledge and understanding of AMPS, NOMADS, and how various sub-systems are integrated.*
- ii. *Assign in-house staff to take on additional comprehensive project implementations when they are already stretched thin due to other competing projects with a high degree of complexity.*
- iii. *Invest an extensive amount of time and resources to onboard and familiarize a new vendor with the existing systems, processes, and business needs.*

b. If not, why were alternatives not evaluated?

Purchasing Use Only:	
Approval #:	2/1202 @

6	Has the agency purchased this service or commodity in the past? Check One:				Yes	No
	NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.				X	
	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:					
	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #	
	Start Date	End Date				
07/01/2018	06/30/2022	\$1,679,501	Lobby Management System, including Amendment 1.	Previous purchase/ installation of system in use by State.		
03/11/2014	06/30/2018	\$1,302,500	Lobby Management System, including Amendments 1 and 2.	RFP#3038		

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 this solicitation waiver is not approved, DWSS would potentially face interruptions to hundreds of thousands of Nevadan's benefits due to the requirement that the assignment of work would need to be manually directed by a Family Services Supervisor, instead of automatically assigned by CURRENT based on due dates, type of work and employee skill sets.</i>	
	<i>It is imperative DWSS retains C!A's proprietary system to continue with the BPR processes, as well as maintain efficiencies already recognized because of their guidance.</i>	
	<i>Both Hawaii and Alaska failed to maintain the health of their newly established business process and lobby management system, resulting in the loss of their previous gains. They fell back into the realm of untimely work, poor customer service, and federal sanctions. At the urging of FNS, and because of our partnership with C!A, DWSS improved average processing times from 52 days to 8 days. Improved the decision error rate from 7.61% to less than 6%. Additionally, DWSS went from a sanction status in 2014 and a penalty of \$755,091.50, to one of the most improved in the nation in 2015 and received a 1.9-million-dollar bonus. DWSS continues to experience success with workload management via CURRENT, and denial of this waiver would be detrimental to work processes, timeliness, customer service, and the ability to work as one statewide team.</i>	

Purchasing Use Only:	
Approval #:	211202

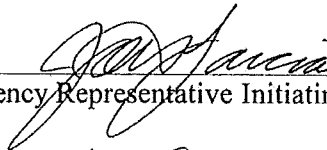
8	<p>What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?</p> <p><i>DWSS has invested a significant amount of time, resources, and funds working with various federal partners and C!A to remediate the negative impacts of the FY 14 accuracy rates and federal sanctions. C!A has worked effectively to implement an efficient LMS while providing quality, consistent training which continues to result in substantial improvements in timeliness. These efficiencies continue to allow DWSS to be a good steward of State and Federal dollars while providing considerable cost savings to the State.</i></p> <p><i>Additionally, DWSS would lose the momentum gained with the current vendor and put DWSS at risk of federal sanctions, reducing the amount of federal funding available for services to Nevadans. C!A has a deep functional and technical understanding of all the components impacted by this project. 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 C!A has agreed to.</i></p>		
9	<p>Will this purchase obligate the State to this vendor for future purchases? Check One:</p> <p><u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u></p>		<p>Yes No</p> <p>X </p>
	<p>a. If yes, please provide details regarding future obligations or needs.</p>		
	<p><i>As demonstrated above, it would not be cost effective for the Division to transition to another workload data tool. Therefore, it is the Division's intention to continue to partner with C!A for their workload data tool, CURRENT.</i></p>		

Purchasing Use Only:

Approval #:

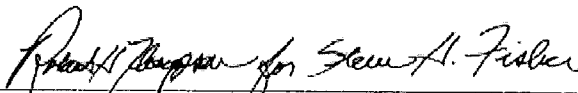
211202 @

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

Joe Garcia
Print Name of Agency Representative Initiating Request

11/18/2021
Date


Signature of Agency Head Authorizing Request

Robert H. Thompson for Steve H. Fisher
Print Name of Agency Head Authorizing Request

11/18/21
Date

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

**** Please include your TIN approval memo as an attachment in CEIS ****
Name of agency or entity who provided information or review:

Representative Providing Review

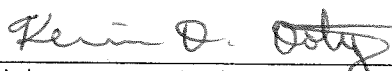
Print Name of Representative Providing Review

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

12/13/21
Date

Steve Sisolak
Governor



Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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: Steve Fisher, Administrator, DWSS
Bart London, Chief IT Manager, DWSS
Joe Garcia, Social Services Chief III, DWSS
Brenda Berry, CFO, DWSS

CC: Tim Galluzi, Administrator, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DWSS - 178 - Lobby Management System - 3233
- Update b

DATE: December 8, 2021

We have completed the review for DWSS' Lobby Management System - TIN 178 Update b.

The submitted TIN is for an estimated value of \$958,950.40 in the current biennium and \$1,116,055.92 next biennium (70% Federal Grant and 30% General Fund) to enhance and/or upgrade an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

DWSS has been using a Lobby Management System (LMS) since 2014 provided by Change and Innovation Agency, LLC (CIA). The solution has met all the functional and technical requirements and has streamlined DWSS services to our customers. The CIA solution is cloud base, software as a service (SaaS) solution tailored to DWSS' needs. CIA, in order to better serve their customers' needs in support of SNAP, TANF, and all related applications, has developed a new system named CURRENT with existing functional requirements and enhancements. The CIA SaaS solution, known as PathOS, is being decommissioned and all States are moving onto Current. DWSS is preparing for the transition and future use of the CIA LMS.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **24927**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CARSON CITY**Contractor Name: **CARSON CITY**Address: **FIRST JUDICIAL DISTRICT COURT
885 E MUSSER ST STE 2007**City/State/Zip: **CARSON CITY, NV 89701**Contact/Phone: **775/887-2121**Vendor No.: **T80990941AJ**NV Business ID: **GOV'T ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % County**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Masters**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$141,555.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that DWSS attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

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

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

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

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

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 11:31:25 AM
Division Approval	bberry	04/27/2022 16:37:10 PM
Department Approval	mchappel	04/28/2022 09:21:24 AM
Contract Manager Approval	mpomerle	04/28/2022 09:51:35 AM
Budget Analyst Approval	afrantz	05/06/2022 09:08:19 AM
BOE Agenda Approval	afrantz	05/06/2022 09:08:22 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: **24885**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **LYON COUNTY**Contractor Name: **LYON COUNTY**Address: **LYON COUNTY TREASURER
27 S MAIN ST**City/State/Zip: **YERINGTON, NV 89447-2571**Contact/Phone: **775/463-6501**Vendor No.: **T40156600F**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % County**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Masters**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$103,001.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that the Division attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

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

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

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

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

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 11:31:08 AM
Division Approval	bberry	04/27/2022 16:38:32 PM
Department Approval	mchappel	04/28/2022 09:28:00 AM
Contract Manager Approval	mpomerle	04/28/2022 09:49:49 AM
Budget Analyst Approval	afrantz	05/06/2022 08:46:42 AM
BOE Agenda Approval	afrantz	05/06/2022 08:46:46 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: **24932**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MINERAL COUNTY**Contractor Name: **MINERAL COUNTY**Address: **FIFTH JUDICIAL DIST
PO BOX 1450**City/State/Zip: **HAWTHORNE, NV 89415**Contact/Phone: **775/945-2446**Vendor No.: **T40291300W**NV Business ID: **GOV'T ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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

General Funds 0.00 % Fees 0.00 %

X Federal Funds **66.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **34.00 % State Share of Collections**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Masters**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity, and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$112,608.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that DWSS attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

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

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

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

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

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	05/03/2022 07:45:58 AM
Division Approval	bberry	05/03/2022 16:03:48 PM
Department Approval	rthomps1	05/06/2022 14:01:32 PM
Contract Manager Approval	mpomerle	05/06/2022 14:07:26 PM
Budget Analyst Approval	afrantz	05/20/2022 08:41:56 AM
BOE Agenda Approval	afrantz	05/20/2022 08:41:59 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: **24884**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WASHOE COUNTY**Contractor Name: **WASHOE COUNTY**Address: **WASHOE SECOND JUDICIAL DIST CT
75 COURT ST**City/State/Zip: **RENO, NV 89501**Contact/Phone: **775/328-3569**Vendor No.: **T40283400Y**NV Business ID: **Gov't Entity**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % County**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Master**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,536,258.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that the Division attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

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

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 11:30:53 AM
Division Approval	bberry	04/27/2022 16:34:56 PM
Department Approval	mchappel	04/28/2022 09:28:47 AM
Contract Manager Approval	mpomerle	04/28/2022 09:47:28 AM
Budget Analyst Approval	afrantz	05/06/2022 08:58:51 AM
BOE Agenda Approval	afrantz	05/06/2022 08:58:54 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: **23176**Amendment Number: **1**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Legal Entity Name: **Board of Regents, Nevada System of Higher Education-OBO**Agency Code: **409**Contractor Name: **Board of Regents, Nevada System of Higher Education-OBO**Appropriation Unit: **3145-10**Address: **University of Nevada , Reno**Is budget authority available?: **Yes****Mail Stop 090**
City/State/Zip **Reno , NV 89557-0242**

If "No" please explain: Not Applicable

Contact/Phone: **Jennifer Dole Massie, MSW 775-682-7412**Vendor No.: **D35000816**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2021-2023**

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

X	General Funds	34.00 %	Fees	0.00 %
X	Federal Funds	66.00 %	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 **01/01/2021**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **2 years and 179 days**4. Type of contract: **Interlocal Agreement**Contract description: **Training Services**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides ongoing development of a Nevada child welfare training infrastructure and an intensive quality training and professional development system for undergraduate and graduate social work students. This amendment increases the maximum amount from \$2,162,700 to \$2,292,769 pursuant to Senate Bill 460 of the 2021 Legislative Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,162,700.00	\$2,162,700.00	\$2,162,700.00	Yes - Action
2. Amount of current amendment (#1):	\$130,069.00	\$130,069.00	\$130,069.00	Yes - Action
3. New maximum contract amount:	\$2,292,769.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal and State requirements for training of child welfare staff who serve children that have been abused neglected or abandoned.

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

The State does not have an in-house training program or the capacity to conduct training to child welfare staff that would meet the federal/state requirements of initial and ongoing training.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

NRS 277.180

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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

20% (blended - 26% federal, 8% general fund)

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

University of Nevada, Reno.

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 and other agencies. 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 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	hbugg	04/28/2022 09:20:53 AM
Division Approval	knielsen	05/02/2022 08:27:36 AM
Department Approval	cpitlock	05/02/2022 11:57:00 AM
Contract Manager Approval	kathr55	05/03/2022 10:32:32 AM
Budget Analyst Approval	bmacke1	05/19/2022 16:21:44 PM
BOE Agenda Approval	afrantz	05/20/2022 14:01:22 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: **25586**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	LINCOLN COUNTY HOSPITAL District DBA LINCOLN COUNTY MEDICAL ASSoc
Agency Code:	409	Contractor Name:	LINCOLN COUNTY HOSPITAL District DBA LINCOLN COUNTY MEDICAL ASSoc
Appropriation Unit:	3179-04	Address:	Grover C. Dils Medical Center PO BOX 1010
Is budget authority available?:	Yes	City/State/Zip	Caliente, NV 89008
If "No" please explain:	Not Applicable	Contact/Phone:	Melissa Rowe, CEO 775-726-3171
		Vendor No.:	T80588110
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Medical Services**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing medical services to youth in residence.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$262,264.00**

Payment for services will be made at the rate of \$3,232.00 per Month for SFY23

Other basis for payment: \$3,329 per Month for SFY24; \$3,429 per Month for SFY25; and \$3,532 per Month for SFY26; \$50,000 for Ins. 7/1/22 and 7/1/24.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 432A.530 requires that medical care be provided to youth in our care. This interlocal contract would provide the mandatory continuity of care.

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

A medically qualified and licensed physician is required to diagnose and treat the youth in residence to include prescription medication. There is no licensed physician on 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: **Exempt (Per statute)**

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

NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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

The contractor is a governmental entity of Lincoln County.

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 been under contract with the Division since at least 2009. 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 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:

Bruce Burgess, Superintendent CYC Ph: 775-726-8200

Sheryl Johnson, Admin Services Officer 1 Ph: 775-726-8200

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	02/10/2022 15:20:54 PM
Division Approval	knielsen	03/13/2022 20:52:42 PM
Department Approval	cpitlock	03/14/2022 16:25:38 PM
Contract Manager Approval	sknigge	04/18/2022 14:45:50 PM
Budget Analyst Approval	bmacke1	05/10/2022 14:07:29 PM
BOE Agenda Approval	afrantz	05/20/2022 12:10:48 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: **21256** Amendment Number: **4**

Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES** Legal Entity Name: **FM MARKETING, LLC**

Agency Code: **409** Contractor Name: **FM MARKETING, LLC**

Appropriation Unit: **3229-42** Address: **7473 W LAKE MEAD BLVD STE 100**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89128-0265**

If "No" please explain: Not Applicable Contact/Phone: **702/249-9900**

Vendor No.: **T29040933**

NV Business ID: **NV20041045342**

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2018**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years and 208 days**4. Type of contract: **Contract**Contract description: **Media Campaign**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides ongoing custom media services. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$586,300 to \$736,300 due to the continued need for this service.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$50,000.00	\$50,000.00	\$50,000.00	Yes - Action
a. Amendment 1:	\$46,300.00	\$46,300.00	\$46,300.00	Yes - Info
b. Amendment 2:	\$450,000.00	\$450,000.00	\$496,300.00	Yes - Action
c. Amendment 3:	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
2. Amount of current amendment (#4):	\$150,000.00	\$150,000.00	\$190,000.00	Yes - Action
3. New maximum contract amount:	\$736,300.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

A shortage of Foster Homes in rural Nevada causes children to be placed outside of their community of origin. A comprehensive media campaign coupled with collaborative outreach by courts and community partnership will yield homes in rural Nevada and enhance efforts to keep children in their schools and communities when they must be removed from their parents due to safety reasons.

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

State agencies do not have the expertise to undertake launching a media campaign.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

Approval #: 180607

Approval Date: 06/29/2018

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

FM Marketing developed DCFS' media campaign in 2014. This contract is a continuation of that existing campaign.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Contractor has been under contract with the Division since 2014 and service provided has been satisfactory.

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	05/06/2022 16:08:49 PM
Division Approval	knielsen	05/09/2022 17:50:11 PM
Department Approval	cpitlock	05/10/2022 10:34:31 AM
Contract Manager Approval	sknigge	05/10/2022 14:17:29 PM
Budget Analyst Approval	bmacke1	05/17/2022 16:01:55 PM
BOE Agenda Approval	afrantz	05/20/2022 11:15:05 AM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:

Approval #:

4570

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Division of Child and Family Services</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Kathryn Roose, Management Analyst II</i>	<i>775-720-3964</i>	<i>kroose@dcfs.nv.gov</i>
	<i>Katrina Nielsen, ASO IV</i>	<i>775-684-4414</i>	<i>knielsen@dcfs.nv.gov</i>
	<i>Maria Hickey, Social Services Program Specialist</i>	<i>775-684-1975</i>	<i>mhickey@dcfs.nv.gov</i>

2	Contractor Information:	
	Contractor Name:	<i>FM Marketing, LLC</i>
	Contact Name:	<i>Susan Somers</i>
	Complete Address: City, State and Zip Code	<i>7473 West Lake Mead, Suite 100 Las Vegas NV 89128</i>
	Phone Number:	<i>(702) 227-8700 or cell (702) 249-9900</i>
	Email Address:	<i><u>susan@fmmnpr.com</u></i>

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		<i>Sole Source Solicitation Waiver</i>	#:	<i>180607</i>
	Enter CETS Number:	<i># 20599</i>			
	Contract Amount:	<i>\$49,862</i>			
	Contract Term:	Start Date:	<i>8/24/2018</i>	End Date:	<i>9/30/2019</i>

Purchasing Use Only:	
Approval #:	457 @

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		<i>Informal Solicitation</i>		#:
	Enter CETS Number:		#24427 (unrelated to current contract)		
	Contract Amount:		\$30,000		
	Contract Term:	Start Date:	6/4/2021	End Date:	9/30/2021

4	Current Contract Information:				
	Solicitation Type, if applicable:		<i>Sole Source Solicitation Waiver</i>		#:
	Enter CETS Number:		#21256		
	Initial Contract Amount:		\$50,000		
	Contract Term:	Start Date:	12/4/2018	End Date:	9/30/2019

5	Amendment Information – List <u>all previously</u> approved amendments:			
	<i>Amd #:</i>	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	1	<i>Increase contract maximum to continue media campaign.</i>	<i>\$46,300</i>	
	2	<i>Increase contract maximum and extend contract termination due to an increased need for these services.</i>	<i>\$450,000</i>	<i>6/30/2022</i>
	3	<i>Increases contract maximum and updates the scope of work due to continued need for the services, and the need to modify the messages of the media campaign.</i>	<i>\$40,000</i>	

6	<u>Proposed</u> Amendment Information:			
	<i>Amd #:</i>	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	4	<i>Increase contract maximum and extend contract termination to allow time to conduct a competitive request for proposal.</i>	<i>\$150,000</i>	<i>6/30/2023</i>

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	<i>To allow time for a competitive Request for Approval process while ensuring there is no gap in these services.</i>

8	What are the potential consequences to the State if the contract extension request is denied?
	<i>This contract provides a public awareness campaign to recruit foster parents and encourage reporting of abuse and neglect of children. The potential consequences to the State if the contract extension request is denied is a possible decline in the recruitment of foster parents, and a decrease in public awareness and education about how and when to report suspected abuse and neglect of children.</i>

<i>Purchasing Use Only:</i>	
Approval #:	45700

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

KRoose

Signature of Agency Representative Initiating Request

Kathryn Roose

Print Name of Agency Representative Initiating Request

May 6, 2022

Date

[Signature]

Signature of Agency Head Authorizing Request

Dr. Cindy Pitlock

Print Name of Agency Head Authorizing Request

May 6, 2022

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Doty

Administrator, Purchasing Division or Designee

5/10/22

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: **18222** Amendment Number: **4**

Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES** Legal Entity Name: **COST CONTAINMENT STRATEGIES, INC.**

Agency Code: **409** Contractor Name: **COST CONTAINMENT STRATEGIES, INC.**

Appropriation Unit: **4895-04** Address: **PO BOX 94525**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89193-4525**

If "No" please explain: Not Applicable Contact/Phone: **Barry Siskind 702/433-3145**

Vendor No.: **T80984462A**

NV Business ID: **NV19921037032**

To what State Fiscal Year(s) will the contract be charged? **2017-2023**

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 % Penalties and 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 **01/01/2017**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **6 years and 180 days**4. Type of contract: **Contract**Contract description: **Review Medical Claim**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides ongoing medical billing review, claims administration and software programming, scanning, data input, vendor management, vendor portal, document storage, and retrieval services. This amendment extends the termination date from June 30, 2022 through June 30, 2023 and increases the contract maximum from \$8,436,049.27 to \$10,121,695.51 due to the continued need for this service.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$5,993,317.20	\$5,993,317.20	\$5,993,317.20	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$1,612,364.40	\$1,612,364.40	\$1,612,364.40	Yes - Action
c. Amendment 3:	\$830,367.67	\$830,367.67	\$830,367.67	Yes - Action
2. Amount of current amendment (#4):	\$1,685,646.24	\$1,685,646.24	\$1,685,646.24	Yes - Action
3. New maximum contract amount:	\$10,121,695.51			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Victims of Crime Program is authorized by NRS 217.010 to provide assistance with medical expenses to individuals who are victims of violent crime within the State of Nevada.

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

The agency does not have the expertise or the resources to perform these services.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

Approval #: 160902

Approval Date: 09/19/2016

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

The proprietary claims management software provided by Cost Containment Strategies (CCSI) was custom built to meet the needs of the Nevada Victims of Crime Program. The system contains features and built in parameters that allow us to ensure compliance with the statutes and policies that govern our program. The specialized software design elements allow us to manage claims process with limited staffing levels. CCSI has partnered with the program to provide direct support for all back room operations. This allows the program to focus on the victim while CCSI handles all systems and vendor issues, performs all data entry, and handles all document processing.

d. Last bid date: 09/01/2016 Anticipated re-bid date: 06/30/2022

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Since 2011 to current date, Cost Containment has worked with VOC satisfactorily.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	04/27/2022 15:23:25 PM
Division Approval	knielsen	04/27/2022 15:27:33 PM
Department Approval	cpitlock	04/29/2022 14:18:57 PM
Contract Manager Approval	sknigge	05/06/2022 13:58:10 PM
EITS Approval	ljean	05/09/2022 12:14:30 PM
Budget Analyst Approval	bmacke1	05/17/2022 16:04:01 PM
BOE Agenda Approval	afrantz	05/20/2022 11:03:15 AM



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: Ross Armstrong, Administrator, DCFS
Srinivas Bokka, IT Manager II, DCFS
Sharon Knigge, Management Analyst II, DCFS
Katrina Nielsen, Acting Deputy Administrator, DCFS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DCFS – 313 - Medical and Billing Claims Review – 3143

DATE: December 8, 2021

We have completed the review for DCFS' - Medical and Billing Claims Review TIN 313.

The submitted TIN is for an estimated value of \$2,100,830.31 in the current biennium and \$3,524,518.14 next biennium (100% State Fees) to replace an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

The State of Nevada Purchasing Division on behalf of the Division of Child and Family Services (DCFS), Victims of Crime Program (VOCP), is soliciting proposals to provide an administrative software platform as well as additional service offerings to assist the Program in auditing medical, dental, prescription and counseling bills, and managing and overseeing all associated claims documentation and processing related to the assistance of individuals who are victims of violent crimes within the state of Nevada.

The VOCP is authorized pursuant to NRS 217.010 to provide assistance to individuals who are victims of violent crime within the State in terms of overall expenses, e.g. medical, prescription, dental, counseling, lost wages, funeral, etc. In an effort to more effectively administer this program and reach its goal of providing benefits to victims to meet their overall needs, the Board of Examiners in conjunction with VOCP has approved a number of initiatives to enhance the Program's operations efficiencies and cost effectiveness in providing assistance.

The components of this policy are as follows:

- Medical Billing Review to approved medical fee schedules per NRS 616C.260;
- A Preferred Provider Organization for additional medical discounts when applicable;
- Claims Administration Software to assist VOCP staff in better managing the operational and functional needs of the Program;
- A Paperless Platform to enhance the administrative process in delivering benefits on a timely basis; and
- A dedicated team to assist VOCP staff with reporting, support and other tasks as specified.

The DCFS and VOCP agencies will administer contract(s) resulting from this RFP. The resulting contract(s) will be for an initial contract term of six (6) years, anticipated to begin March 8, 2022, subject to Board of Examiners approval.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.



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: Cindy Pitlock, Administrator, DCFS, DHHS
Katrina Nielsen, Administrative Services Officer IV, DCFS, DHHS
Srinivas Bokka, IT Manager, DCFS, DHHS
Sharon Knigge, Management Analyst II, DCFS, DHHS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DCFS – TIN 313 – *DCFS-Medical and Billing Claims Review* – BA 4895 – Update A

DATE: May 9, 2022

We have completed our review for the Department of Health and Human Services (DHHS), Division of Child and Family Services' (DCFS) – *DCFS-Medical and Billing Claims Review* – TIN 313 – Update A.

The submitted TIN, for an estimated value of \$3,322,196.22 in the FY22/FY23 biennium, \$3,524,517.97 in the FY24/FY25 biennium, \$3,739,161.12 in the FY26/FY27 biennium, and an additional \$1,954,126.12 in FY28 (100% State Fees), is to replace an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency. This amendment extends the terminate date from June 30, 2022, through June 30, 2023, and increases the existing contract maximum from \$8,436,049.27 to \$10,121,695.51 to allow additional time to complete the RFP process.

The solution will provide an administrative software platform as well as additional service offerings to assist the Program in auditing medical, dental, prescription and counseling bills, and managing and overseeing all associated claims documentation and processing related to the assistance of individuals who are victims of violent crimes within the state of Nevada.

The components of this policy are as follows:

- Medical Billing Review to approved medical fee schedules per NRS 616C.260
- A Preferred Provider Organization for additional medical discounts when applicable
- Claims Administration Software to assist VOCP staff in better managing the operational and functional needs of the Program
- A Paperless Platform to enhance the administrative process in delivering benefits on a timely basis, and
- A dedicated team to assist VOCP staff with reporting, support and other tasks as specified.

The agency considers the investment to have an ongoing high security risk because PII is transported, stored, and or processed with this system and is subject to federal security standards, in addition to users accessing the existing application from outside of SilverNet.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:	
Approval #:	4590

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: DCF		
	Contact Name and Title	Phone Number	Email Address
	Sharon Knigge	775-684-7952	sharon.knigge@dcfs.nv.gov
	Katrina Nielsen	775-684-4414	knielsen@dcfs.nv.gov

2	Contractor Information:	
	Contractor Name:	Cost Containment Strategies, Inc.
	Contact Name:	Barry Siskind
	Complete Address: City, State and Zip Code	PO Box 94525, Las Vegas, NV 89193-4525
	Phone Number:	702-433-3145
	Email Address:	bsiskind@ccsinv.com

3.a	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):			
	Solicitation Type, if applicable:		Unknown (predates CETS)	#:
	Enter CETS Number:	#CONV5189		
	Contract Amount:	\$8,000,000		
	Contract Term:	Start Date:	01/2004	End Date:

Purchasing Use Only:

Approval #:

4590

3.b	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable: <i>RFP</i>			#:	1682
	Enter CETS Number:		#11360		
	Contract Amount:		\$6,000,000		
	Contract Term:	Start Date:	12/2008	End Date:	12/2012

3.c	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable: <i>RFP</i>			#:	1993
	Enter CETS Number:		13817		
	Contract Amount:		\$5,000,000		
	Contract Term:	Start Date:	01/2013	End Date:	12/2016

4	Current Contract Information:				
	Solicitation Type, if applicable: <i>Solicitation Waiver</i>			#:	160902
	Enter CETS Number:		#18222		
	Initial Contract Amount:		\$5,993,317		
	Contract Term:	Start Date:	01/2017	End Date:	12/2020

5	Amendment Information – List <u>all previously</u> approved amendments:			
	Amd #:	Brief Synopsis of What Amendment Accomplished:	Dollar Change in Contract Amount	Change in End Date
	1	Changes to the Scope of Work	\$0	N/A
	2	Extended contract term for an additional year	\$1,612,364.40	12/31/2021
	3	Extended contract for an additional six months	\$830,367.67	06/30/2022

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Dollar Change in Contract Amount	Change in End Date
	4	Extend term of contract for an additional year	\$1,685,646.30	06/30/2023

#4590

7	<p>What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?</p> <p><i>DCFs requests extension of this contract to continue uninterrupted with this vendor while the Division conducts an RFP through the Purchasing Division for these services. The RFP Development form has been submitted to the Purchasing Division. However, there have been agency delays in providing all of the requested supporting information pertaining to development of the RFP. The agency is requesting an additional year to finalize the RFP, select a new vendor and potentially implement a new solution.</i></p>
8	<p>What are the potential consequences to the State if the contract extension request is denied?</p> <p><i>This vendor performs medical claim reviews, claims administration and victims of crime data management. These services are critical to this agency and a lapse in service could potentially jeopardize our ability to compensate victims of crime.</i></p>

Purchasing Use Only:	
Approval #:	459@

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Katrina Nielsen
Signature of Agency Representative Initiating Request

Katrina Nielsen
Print Name of Agency Representative Initiating Request

April 21, 2022
Date

[Signature]
Signature of Agency Head Authorizing Request

Cindy Pitlock
Print Name of Agency Head Authorizing Request

4/21/2022
Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

**** NOTE: Agency must include TIN Update approval as an attachment in CETS ****

Signed:

* Kevin O. Osty
Administrator, Purchasing Division or Designee

5/10/22
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: **26025**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3711-21**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Pershing County School District**Contractor Name: **Pershing County School District**Address: **PO Box 389**City/State/Zip: **Lovelock, NV 89419**Contact/Phone: **Neil Gallagher 7752734994**Vendor No.: **T40234400**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2021**Anticipated BOE meeting date **06/2022**Retroactive? **Yes**

If "Yes", please explain

As a continuation of the current program, funding for this retroactive contract requires that NDOC apply annually to NDE to receive the pass-through funding for the program. The application is submitted to NDE in collaboration with LEA sub-recipient(s). NDOC received approval from NDE for the Youthful Offender Program's SFY22 budget. Once approved by NDE, these funds have to be approved by the Pershing County School Board before NDOC can acknowledge this award, delaying the contract.

3. Termination Date: **09/30/2022**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing educational and vocational services for youthful offenders incarcerated at Lovelock Correctional Center assisting them in obtaining a high school equivalency or high school diploma.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$108,020.00**

Other basis for payment: Paid to vendor as documentation is submitted to verify funds spent.

II. JUSTIFICATION

7. What conditions require that this work be done?

NDOC houses over 2,400 inmates from the ages of 16-26. The vast majority of these inmates have not obtained a High School Equivalency or High School Diploma. This contract will provide the necessary education and tools for employment upon release from incarceration.

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

NDOC is contracting with Pershing County School District to obtain the teachers required to provide educational services to the youthful offenders. No other State agency offers this service with accessibility to Lovelock Correctional Center, and NDOC does not employ personnel certified to teach these courses.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

The Nevada Department of Education awarded the Department of Corrections with the Title 1-Part D Grant program funds to be used for the purpose of this contract.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

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

No

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

Not Applicable

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

No

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

No

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

No

If "Yes", please explain

Not Applicable

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

Yes

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

NDOC - CETS #23715 07/01/20-09/30/21 Work 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:
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	ksalm	04/14/2022 15:12:29 PM
Division Approval	ksalm	04/14/2022 15:12:33 PM
Department Approval	ksalm	04/14/2022 15:12:39 PM
Contract Manager Approval	krey nol3	04/26/2022 18:34:14 PM
Budget Analyst Approval	vmilazz1	05/16/2022 09:51:57 AM
BOE Agenda Approval	myoun3	05/19/2022 11:05:35 AM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Charles Daniels
Director

Lisa Lucas
Deputy Director, Support
Services



Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 977-5500

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(725) 216-6000

STATE OF NEVADA Department of Corrections

MEMORANDUM

Date: April 12, 2022

To: Budd Milazzo, Executive Branch Budget Officer,
Governor's Finance Office

A handwritten signature in blue ink, appearing to read "Budd", is written over the name "Budd Milazzo" in the "To:" field.

Subject: Retroactive Interlocal Contract / CETS# 26025 Pershing County School District

Nevada Department of Corrections (NDOC) respectfully requests approval for the retroactive inter-local contract between NDOC and Pershing County School District. NDOC is requesting a retroactive effective date of October 1, 2021, for ongoing educational and/or vocational services to youthful offenders incarcerated at High Desert State Prison, in the amount of \$108,020.00.

The partnership between NDE and NDOC developed as a result of a 2017 United States Department of Education (USDOE) audit of NDE. The audit finding concluded that grant payment activities required corrective action in order to comply with federal and state statutes, regulations, program plans and the administration of the program. NDE sought partnership with NDOC for administration of its federal Title I Part D Youthful Offender Program (YOP) through the creation of interlocal agreement(s) between NDOC, serving as the pass-through agency for NDE, and the respective Local Education Associations (LEAs).

As a continuation of the current program, NDE sent the Notice of Award to NDOC. NDOC notified the participating school districts of the award amount of \$108,020.00 and requested budgets with backup for submittal to and approval by NDE. NDOC received response from NDE regarding Pershing County School District's submitted budget. Pershing County School District requires contract approval by the school board which can delay contract submittal to the Board of Examiners by at least 2 months.

Should you have any questions please contact me at (775) 977-5670 or by email at ksalm@doc.nv.gov.

Thank you for your consideration.

A handwritten signature in blue ink, appearing to read "Karen Salm", is written over the name "Karen Salm" in the signature block.

Karen Salm, Acting Chief of Fiscal Services
Nevada Department of Corrections

Attachments: Contract #26025

cc: Kathryn Reynolds, Contracts Manager, Nevada Department of Corrections

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: **25889**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **4546-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BUREAU OF LAND MANAGEMENT**Contractor Name: **BUREAU OF LAND MANAGEMENT**Address: **1340 FINANCIAL BLVD.**City/State/Zip: **RENO, NV 89502**Contact/Phone: **MARTIN BARRAZA 775-861-6440**Vendor No.: **T80964941**NV Business ID: **GOVERNMENTAL AGENCY**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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

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

Agency Reference #: **#22R-03**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/14/2023**Contract term: **317 days**4. Type of contract: **Revenue Contract**Contract description: **GNA Interlocal**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide an ongoing cattle roundup in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Bureau of Land Management has agreed to provide the Nevada Department of Agriculture with this funding to achieve their goals of removing the estray cattle. Without their funding it would be impossible for the agency to complete this roundup.

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

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

NRS 277.180

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	tdoucett	04/05/2022 16:38:42 PM
Division Approval	tdoucett	04/05/2022 16:38:45 PM
Department Approval	tdoucett	04/05/2022 16:38:48 PM
Contract Manager Approval	melli2	04/05/2022 16:54:59 PM
Budget Analyst Approval	dspeed1	05/04/2022 14:06:17 PM
BOE Agenda Approval	laaron	05/21/2022 00:01:42 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: **13175**Amendment
Number: **8**Agency Name: **DPS-RECORDS & TECHNOLOGY**Legal Entity
Name: **IDEMIA IDENTITY & SECURITY USA,
LLC**Agency Code: **655**Contractor Name: **IDEMIA IDENTITY & SECURITY USA,
LLC**Appropriation Unit: **4709-26**Address: **LLC
5515 E LA PALMA AVE STE 100**Is budget authority
available?: **Yes**City/State/Zip **ANAHEIM, CA 92807-2116**

If "No" please explain: Not Applicable

Contact/Phone: 714-238-2000

Vendor No.: T29030834C

NV Business ID: NV20121363420

To what State Fiscal Year(s) will the contract be charged? **2012-2026**

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 % Civil Applicant / Fingerprint
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 **07/01/2011**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **15 years and 3 days**4. Type of contract: **Contract**Contract description: **Service Contract**

5. Purpose of contract:

This is the eighth amendment to the original contract which provides ongoing maintenance and repair of the LiveScan fingerprint machines in various law enforcement agencies. This amendment extends the termination date from June 30, 2022 to June 30, 2026 and increases the maximum amount of the contract from \$1,973,700.24 to \$2,490,376.74 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:	\$463,830.04	\$463,830.04	\$463,830.04	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
c. Amendment 3:	\$839,510.44	\$839,510.44	\$839,510.44	Yes - Action
d. Amendment 4:	\$0.00	\$0.44	\$0.44	No
e. Amendment 5:	\$455,715.76	\$455,716.20	\$455,716.20	Yes - Action
f. Amendment 6:	\$0.00	\$0.00	\$0.00	No
g. Amendment 7:	\$214,644.00	\$214,644.00	\$214,644.00	Yes - Action
2. Amount of current amendment (#8):	\$516,676.50	\$516,676.50	\$516,676.50	Yes - Action
3. New maximum contract amount:	\$2,490,376.74			

II. JUSTIFICATION

7. What conditions require that this work be done?

The LiveScan machines are required to provide fingerprints in compliance with FBI requirements.

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

These are proprietary machines that require the servicing be done by the vendor in order to maintain the warranty.

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 #: 111205

Approval Date: 12/14/2011

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

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 contractor was the original vendor of these services to DPS since 2007 and the 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	jkolenut	05/12/2022 15:26:32 PM
Division Approval	twollan1	05/12/2022 15:27:57 PM
Department Approval	jdekoekk	05/12/2022 16:14:35 PM
Contract Manager Approval	jdekoekk	05/17/2022 10:05:23 AM
Budget Analyst Approval	vmilazz1	05/19/2022 15:00:10 PM
BOE Agenda Approval	jrodrig9	05/23/2022 14:02:37 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: George Togliatti, Director, DPS
Jason Kolenut, Administrative Services Officer, DPS
Melissa Costa, Management Analyst, DPS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DPS – TIN 504 – *LiveScan*
Maintenance/Support/Purchase – BA 4709

DATE: May 6, 2022

We have completed our review for the Department of Public Safety – *LiveScan*
Maintenance/Support/Purchase – TIN 504.

The submitted TIN, for an estimated value of \$227,247.13 in the FY22/FY23 biennium and \$ 262,000.00 in the FY24/FY25 biennium (100% Fingerprint Fees), is for continued maintenance/support and purchasing of LiveScan machines throughout the State.

If a maintenance and support contract is not continued, there is a risk that background checks will be delayed for criminals in jail and citizens applying for employment and/or licenses resulting in poor service to the public and increased risk to law enforcement personnel.

The agency considers the investment and final implementation to have an ongoing moderate security risk, as the solution will transport, store and/or process Personal Identification Information (PII) and is subject to federal security standards, in addition to being accessed outside of SilverNet.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **17828**Amendment Number: **4**Agency Name: **DPS-GENERAL SERVICES**Legal Entity Name: **Scott Norberg W. DBA NorSoft Consulting**Agency Code: **655**Contractor Name: **Scott Norberg 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? **2017-2024**

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 % Various Repository 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 **09/13/2016**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **7 years and 110 days**4. Type of contract: **Contract**Contract description: **Technology/Software**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides ongoing 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, 2022 to December 31, 2023 and increases the maximum amount from \$2,890,536 to \$3,699,355 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
c. Amendment 3:	\$1,024,276.00	\$1,024,276.00	\$1,024,276.00	Yes - Action
2. Amount of current amendment (#4):	\$808,819.00	\$808,819.00	\$808,819.00	Yes - Action
3. New maximum contract amount:	\$3,699,355.00			
and/or the termination date of the original contract has changed to:	12/31/2023			

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 ongoing 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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Contractor has been under contract with the State since approximately 1999 with satisfactory performance.

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

Budget Account Approval

User

jkolenut

Signature Date

05/12/2022 15:27:13 PM

Division Approval	twollan1	05/12/2022 15:28:47 PM
Department Approval	jdekoekk	05/12/2022 16:13:40 PM
Contract Manager Approval	jdekoekk	05/19/2022 11:34:36 AM
Budget Analyst Approval	vmilazz1	05/19/2022 14:56:14 PM
BOE Agenda Approval	jrodrig9	05/23/2022 14:02:10 PM



Purchasing Use Only:	
Approval #:	456 @

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

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Department of Public Safety – Records, Communications and Compliance Division</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Melissa Costa, Management Analyst</i>	<i>775.684.6259</i>	<i>mcosta@dps.state.nv.us</i>
	<i>Erica Souza-Llamas, Administrator</i>	<i>775.684.6241</i>	<i>esouza@dps.state.nv.us</i>
	<i>John Dekoekkoek, Admin. Serv. Officer 1</i>	<i>775.684.4698</i>	<i>jdekoekkoek@dps.state.nv.us</i>

2	Contractor Information:	
	Contractor Name:	<i>NorSoft Consulting</i>
	Contact Name:	<i>Scott Norberg // John Turcich</i>
	Complete Address: City, State and Zip Code	<i>8452 133rd Court // Apple Valley MN 55124</i>
	Phone Number:	<i>(952) 997-3888</i>
	Email Address:	<i>john@norsoftconsulting.com</i>

3	List <u>all previous</u> Contract Information:			
	Solicitation Type, if applicable:	---	#:	---
	CETS #:	Initial Contract Amount:	Contract Term:	
			Start Date:	End Date:
	<i>#CONV133</i>	<i>\$35,200.00</i>	<i>12/09/03</i>	<i>06/30/04</i>
	<i>#CONV231</i>	<i>\$9,500.00</i>	<i>01/13/04</i>	<i>06/30/04</i>
	<i>#CONV431</i>	<i>\$96,000.00</i>	<i>05/11/04</i>	<i>05/10/05</i>
	<i>#CONV674</i>	<i>\$43,000.00</i>	<i>07/13/04</i>	<i>07/13/05</i>
	<i>#CONV1431</i>	<i>\$86,800.00</i>	<i>05/10/05</i>	<i>09/30/08</i>
	<i>#CONV2493</i>	<i>\$255,000.00</i>	<i>01/10/06</i>	<i>06/30/06</i>
	<i>#CONV2494</i>	<i>\$35,000.00</i>	<i>01/10/06</i>	<i>06/30/06</i>
	<i>#CONV2596</i>	<i>\$99,999.00</i>	<i>02/14/06</i>	<i>06/30/07</i>
	<i>#CONV3094</i>	<i>\$661,500.00</i>	<i>07/11/06</i>	<i>06/30/08</i>
<i>#CONV3352</i>	<i>\$512,500.00</i>	<i>09/07/06</i>	<i>06/30/08</i>	
<i>#CONV5423/#080510</i>	<i>\$4,300.00</i>	<i>06/24/08</i>	<i>06/30/08</i>	

Redacted 06/06/22

Purchasing Use Only:	
Approval #:	456 @

#CONV5814/#090706, #080614	\$35,600.00	10/14/08	06/30/09
#CONV6898	\$100,000.00	03/10/09	06/30/09
#12142/#110308	\$183,000.00	09/13/11	06/30/13

Current Contract Information:				
Solicitation Type, if applicable:		---	#:	---
4	Enter CETS Number:	#17828		
	Initial Contract Amount:	\$1,886,260.00		
	Contract Term:	Start Date:	09/13/16	End Date: 06/30/20

Amendment Information – List <u>all previously</u> approved amendments:				
	Amd #:	Brief Synopsis of What Amendment Accomplished:	Dollar Change in Contract Amount	Change in End Date
5	1	Time Extension	\$0	06/30/20
	2	Outlines Maintenance Costs thru June 2020	\$0	06/30/20
	3	Outlines Maintenance Costs thru June 2022 to cover maintenance through the period of implementation of new software/system being procured via an RFP with State Purchasing.	\$1,024,276.00	06/30/22

<u>Proposed Amendment Information:</u>				
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	<u>Dollar Change in Contract Amount</u>	<u>Change in End Date</u>
6	4	Adds money and time to cover required maintenance through the period of implementation of new software/system under a contract resulting from RFP #65DPS-S763 (Unisys Corporation, CETS #23205).	\$808,818.00	12/31/23

What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?	
7	<p>NorSoft is the owner of the proprietary code for the existing criminal justice information and civil application systems and NorSoft should not be expected to share the code with competing vendors in order to continue required maintenance. Approximately 4 years ago, the owner of NorSoft advised RCCD that it is his intent to retire and could do so at any time; he did not provide an actual date. With that NorSoft has stated they are agreeable to working and remaining in contract with RCCD during RCCD's transition to a new solution which is anticipated to be completed by June 2025.</p> <p>Note: Contract Extension Approval #306 for Amendment #3 was originally requested to go through the implementation date of the new system/software. Upon Purchasing's review of the RFP, the agency's request and supporting documentation, Purchasing requested a termination date of June 2022 be established for Amendment #3 with the understanding an extension may be needed.</p>

Purchasing Use Only:	
Approval #:	4500

8	<p>What are the potential consequences to the State if the contract extension request is denied?</p> <p><i>In the event the contract extension request is not approved, the State risks losing access to criminal history and other criminal justice information that is vital to officer and public safety as well as employment, licensing, volunteering among other civil purposes, not only statewide but nationwide. Losing access would also result in Nevada being non-compliant with the FBI's security policies governing access to and use of criminal history during the transition to the new system which is sanctionable. One of the systems is the message switch which is the only source of connection for communication for criminal justice agencies to access state and national criminal justice information necessary to carry out their critical missions on a daily basis. Having the message switch down or inoperable for any length of time places our officers and communities at risk, statewide and nationwide. Additionally, Nevada would be out of compliance with the National Crime Prevention and Privacy Compact set forth in NRS 179A.800 as well as 28 CFR Part 20 (federal regulations) should the message switch lose its functionality for an extended length of time. This means that entities that license, employee and utilize volunteers wouldn't have access to fingerprint based criminal history record information necessary to make determinations to license, employee or utilize volunteers thus putting the vulnerable population at risk of harm. The message switch is vital and necessary for accessing the FBI's National Crime Information Center (NCIC), the National Instant Criminal background Check System (NICS) for firearms transfers and the Interstate Identification Index containing national criminal history records as well as accessing Nlets – The International Justice and Public Safety Network used to access other state criminal justice information files. In summary, failure of any of these systems would cause the entire State of Nevada's criminal justice agencies and civil applicant agencies businesses to cease leaving them unable to comply with laws and regulations governing their operations and ultimately would place everyone at risk of harm up to and including the loss of life.</i></p>
---	---

~continued
Approvals on page 5

Purchasing Use Only:	
Approval #:	4562

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Erica Souza-Llamas

Digitally signed by Erica Souza-Llamas
Date: 2022.03.10 08:46:47 -08'00'

Signature of Agency Representative Initiating Request

Erica Souza-Llamas, Administrator

3/10/2022

Print Name of Agency Representative Initiating Request

Date

Curtis Palmer, ASO IV, MS, CPM

Digitally signed by Curtis Palmer, ASO IV, MS, CPM
Date: 2022.03.10 14:12:25 -08'00'

Signature of Agency Head Authorizing Request

Curtis Palmer, Administrative Services Officer IV

3/10/2022

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin O. Doty

Administrator, Purchasing Division or Designee

3/15/22

Date

Purchasing Use Only:	
Approval #:	456 @

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Erica Souza-Llamas

Digitally signed by Erica Souza-Llamas
Date: 2022.03.10 08:46:47 -08'00'

Signature of Agency Representative Initiating Request

Erica Souza-Llamas, Administrator

Print Name of Agency Representative Initiating Request

3/10/2022

Date

Curtis Palmer, ASO IV, MS, CPM

Digitally signed by Curtis Palmer, ASO IV, MS, CPM
Date: 2022.03.10 14:12:25 -08'00'

Signature of Agency Head Authorizing Request

Curtis Palmer, Administrative Services Officer IV

Print Name of Agency Head Authorizing Request

3/10/2022

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Osty

Administrator, Purchasing Division or Designee

5/10/22

Date

Steve Sisolak
Governor



CER # 4560

Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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

MEMORANDUM

TO: George Togliatti, Director, DPS
Jason Kolenut, Administrative Services Officer, DPS
Melissa Costa, Management Analyst, DPS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DPS – TIN 518 – *NorSoft Consulting Continued Maintenance* – BA 4709

DATE: May 6, 2022

We have completed our review for the Department of Public Safety's (DPS) – *NorSoft Consulting Continued Maintenance* – TIN 518.

The submitted TIN, for an estimated value of \$1,051,429 in the FY22/FY23 biennium and \$274,945 in the FY24/FY25 biennium (100% various repository funding), is for continued maintenance of proprietary NorSoft software until it is replaced by the NCJIS Modernization Project.

Without continued maintenance, the State risks losing access to criminal histories and other criminal justice information that is vital to officer and public safety. Losing access would also result in non-compliance with the Nevada Revised Statutes and the FBI's security policies which is sanctionable.

The agency considers the investment and final implementation to have an ongoing moderate security risk, as the solution transports, stores and/or processes Personal Identification Information and is subject to federal and/or other security standards. The Office of Information Security (OIS) will be asked to conduct pre- and post-implementation security reviews for the investment.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **26267**Agency Name: **DPS-FIRE MARSHAL**Agency Code: **656**Appropriation Unit: **4729-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **IDS INTERNATIONAL, INC.**Contractor Name: **IDS INTERNATIONAL, INC.**Address: **2125 CENTER AVE STE 611**City/State/Zip: **FORT LEE, NJ 07024-5874**Contact/Phone: **201-302-9494**Vendor No.: **T29009655**NV Business ID: **nv20131135239**To what State Fiscal Year(s) will the contract be charged? **2023-2027**

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	60.00 %	Hazardous Materials
Federal Funds	0.00 %		Bonds	0.00 %	
X Highway Funds	40.00 %		Other funding	0.00 %	

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **HazMat System Mntnce**

5. Purpose of contract:

This is a new contract to provide ongoing technical support and service for the Online Hazardous Materials Reporting System.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$288,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Federal Emergency Preparedness and Community Right-to-Know Act (EPCRA) requires facilities to report extremely hazardous materials to the State Emergency Response Commission (SERC) and NRS requires payment of permit and storage fees. This is accomplished through the Nevada Online Hazardous Materials Reporting System maintained by the SERC. This contract provides for the ongoing support of this automated system.

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

This database is a customized, off-the-shelf solution trademarked by this Vendor. For this reason State Employees or another State agency can provided the ongoing support.

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. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? 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:

Tami Beauregard, MA II Ph: 775 684-7516

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tbeaureg	05/09/2022 13:30:38 PM
Division Approval	tbeaureg	05/09/2022 13:30:42 PM
Department Approval	jdekoekk	05/10/2022 10:18:51 AM
Contract Manager Approval	jdekoekk	05/10/2022 10:18:55 AM
EITS Approval	daxtel1	05/10/2022 13:00:47 PM
Budget Analyst Approval	jrodrig9	05/13/2022 02:35:35 AM
BOE Agenda Approval	jrodrig9	05/13/2022 02:35:40 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#:	220504 (u)

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 <u>ONLY</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME HERE:		State Fire Marshal / State Emergency Response Commission
	Contact Name and Title	Phone Number	Email Address
	Tami Beauregard / Management Analyst II	(775) 684-7516	tbeauregard@dps.state.nv.us

1b	Vendor Information:	
	Vendor Name:	IDSi International, Inc.
	Contact Name:	Shilpa Mohan
	Complete Address:	2125 Center Avenue, Suite 611
	City, State, and Zip Code	Fort Lee, NJ 07024
	Telephone Number:	(201) 302-9494
	Email Address:	shilpamo@hazconnect.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	
	Professional Service Exemption:	XXXXXX

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	XXXXXX	No:
	If 'No' Enter Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	08/01/2022	End Date:
				XXXXXX
				07/31/2026

1f	Funding:	
	State Appropriated:	Highway Funds = \$115,200
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	SERC Hazmat Funds = \$172,800

Purchasing Use Only:

Approval #:

220540

1g

Total Estimated Value of this Service Contract, Amendment or Purchase:

\$288,000

2

Provide a description of work/services to be performed or commodity/good to be purchased:

This maintenance contract is to maintain, support, and provide hosting services for the original Online Hazmat Reporting System that was designed and implemented on the previous contract.

3

What are the unique features/qualifications required for this service or good that are not available from any other vendor:

This maintenance, support, and hosting services contract is required to continue the seamless operation of the Hazardous Materials Reporting Database for the First Responders. The Online Hazmat Reporting System stores information on all the facilities in Nevada that store hazardous materials, including the type and quantity of each material. In the event of an incident, First Responders can use the database and look up the details of types and quantities of hazardous materials are on site.

4

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

The existing System was developed by this vendor in 2007 for the SERC to be in compliance with the following federal laws; 42 U.S.C. 11001 and 49 U.S.C. 5101. Since then, the State Fire Marshal (SFM) has been incorporated into the data base to provide Hazmat Permits to all State of Nevada facilities.

It is critical to Public Safety that First Responders throughout the State must be able to access the database at any in time, as noted above in #3.

The Hazardous Materials Reporting Database is proprietary software to IDSi. IDSi designed the system specifically for SERC and SFM and continue to maintain, support, and provide hosting services for the system. At this time, it would cost the State much more to develop and implement a new system.

Were alternative services or commodities evaluated?

Check One:

Yes

No

XXXXX

a. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

5

b. If not, why were alternatives not evaluated?

As noted in #4, no alternatives were evaluated due to the current database enabling the SERC to be in compliance with Federal Law, First Responders need to continue to have access to critical Hazardous Material information when needed, and the cost to the State would be much more to develop and implement a new database than to continue to maintain and support the existing system.

Purchasing Use Only:

Approval #:

220504(2)

Has the agency purchased this service or commodity in the past? Check One:

Yes

No

NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.

XXX

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, the following information must be provided:

6	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #
	Start Date	End Date			
	07/10/18	07/31/22	\$265,500	Provide ongoing technical support and service to the System developed by this vendor.	RFP 18-SFM-01
	04/09/13	03/02/18	\$185,400	Software Support to the System developed by this vendor.	Waiver #130104
	09/10/09	06/30/10	\$15,985	Functional enhancements to the System developed by this vendor.	Waiver #090712
	06/08/06	12/31/08	\$308,590	Functional enhancements to the System developed by this vendor.	Waiver #070426

What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?

7

If this waiver request is denied, the SERC/SFM would still be required to continue its relationship with the current vendor, until such time a vendor is awarded the contract and if a different vendor is selected, the system is built and available for use. The System cannot be taken offline as noted in #4. If Nevada does not have this database in operation for any amount of time, Nevada, SERC, and SFM would be out of compliance with Federal Law and First Responders could potentially be placed in additional danger if there is a facility experiencing an emergency with hazardous materials and the First Responders are unable to find out the type and quantity of materials are inside the facility.

What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?

8

This contract is to continue the maintenance, support, and hosting of an existing database system. The vendor, IDSi, created and is currently maintaining, supporting, hosting the system which is proprietary to the vendor.

Will this purchase obligate the State to this vendor for future purchases? Check One:

Yes

No

9

Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.

XX

a. If yes, please provide details regarding future obligations or needs.

Purchasing Use Only:	
Approval #:	2205040

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.

T. Beauregard
Signature of Agency Representative Initiating Request

Tami Beauregard
Print Name of Agency Representative Initiating Request

4.20.2022
Date

Mike Dzyak
Signature of Agency Head Authorizing Request

Mike Dzyak
Print Name of Agency Head Authorizing Request

4/24/22
Date

FOR PURCHASING USE ONLY – 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 memo must be included as an attachment in CETS **

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 A. Doty
Administrator, Purchasing Division or Designee

5/4/22
Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Tami Beauregard, Management Analyst II, DPS
Danny Brennan, Business Process Analyst III, DPS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DPS – 341 – *IDSi International, Inc. 2022 4 Year Maintenance Contract* – BA 4729 (Corrected to include FY26/27 biennium)

DATE: April 25, 2022

We have completed our review for the Department of Public Safety (DPS), State Fire Marshal's Division (SFM) – *IDSi International, Inc. 2022 4 Year Maintenance Contract* – TIN 341.

The submitted TIN, for an estimated value of \$72,000 in the FY22/FY23 biennium and \$144,000 in the FY24/FY25 biennium (and an additional \$72,000 for the FY26/FY27 biennium) (40% Highway Fund, 60% Contingency Account for Hazardous Materials – 4729/Cat. 16), is for the continuation of an existing contract with IDSi for the use and support of their Hazconnect Enterprise cloud-based service. The current contract expires July 31, 2022.

Per state and federal laws, the State Emergency Response Commission (SERC) and State Fire Marshal Division (SFM) must maintain a hazardous materials facility database. The SERC supervises Appointed Local Emergency Planning Committees (LEPCs) and assists them financially with grant funds per NRS 459.742. These grant funds are to be used for the planning, training, equipment, operations, and community right-to-know activities as they relate to hazardous materials. NRS Chapter 477 allows the State Fire Marshal Division to collect fees and surcharges from certain facilities to fund its training program. The solution affects all Nevada businesses that store or use hazardous materials in the State and is considered by the agency to be mission critical.

IDSi plans to upgrade the Hazconnect Enterprise system within the next five years, therefore this TIN may need to be amended if there are changes to the scope, content, or cost of the solution that exceed 5%.

#220509(2)

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **23637**Amendment Number: **2**Agency Name: **DPS-TRAFFIC SAFETY**Legal Entity Name: **TYLER TECHNOLOGIES, INC.**Agency Code: **658**Contractor Name: **TYLER TECHNOLOGIES, INC.**Appropriation Unit: **4688-42**Address: **5101 Tennyson Pkwy**Is budget authority available?: **Yes**City/State/Zip: **Plano, TX 75024**

If "No" please explain: Not Applicable

Contact/Phone: **Mike McAleer 806-791-8200**Vendor No.: **T32001084A**NV Business ID: **NV20051167615**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
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 **10/01/2020**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2024**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **eCitation/Crash App**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing software support, maintenance and hosting of the Electronic Citation and Accident Report System. This amendment increases the maximum amount from \$4,000,000 to \$4,310,000 due to changes required with the passage of Assembly Bill 116 from the 2021 Legislative Session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$4,000,000.00	\$4,000,000.00	\$4,000,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$310,000.00	\$310,000.00	\$310,000.00	Yes - Action
3. New maximum contract amount:	\$4,310,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Department of Public Safety (DPS) must update its current Nevada Citation and Accident Tracking System (NCATS) to keep up with new safety requirements.

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

DPS or the State does not have the staff, expertise or equipment to support this safety requirement.

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?

Pursuant to RFP #65DPS-S1173, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 05/22/2020 Anticipated re-bid date: 05/01/2024

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided services for the past five years and those 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	cjackson	04/25/2022 15:05:44 PM
Division Approval	cjackson	04/25/2022 15:12:08 PM
Department Approval	mcosenti	04/27/2022 14:27:20 PM
Contract Manager Approval	jdekoekk	05/19/2022 16:43:00 PM
EITS Approval	ljean	05/20/2022 06:58:45 AM
Budget Analyst Approval	jrodrig9	05/24/2022 11:45:43 AM



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: Amy Davey, Administrator, TSD, DPS
Michelle Farmer, Administrative Services Officer, TSD, DPS
Kevin Tice, Traffic Records Program Manager, TSD, DPS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DPS – TIN 537 – *Tyler-Brazos* – BA 4687

DATE: May 19, 2022

We have completed our review for the Department of Public Safety (DPS), Traffic Safety Division's (TSD) – *Tyler-Brazos* – TIN 537.

The submitted TIN, for an estimated value of \$2,210,365 in the FY22/FY23 biennium and \$838,704 in the FY24/FY25 biennium (100% Highway Fund), is to add an additional \$310,000 for *Tyler-Brazos* system updates provided in the passage of AB116 of the 81st Legislative Session.

This request is for a contract renewal for the continued support, maintenance, and operation of the *Brazos* solution. The current contract amendment/extension expires on 9/30/2024, therefore contract renewal is needed to avoid a lapse in service.

The agency considers the investment and final implementation to have an ongoing low security risk because *Brazos* has been in place for many years and complies with FBI and NCJIS requirements.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **26196**Agency Name: **DCNR - CONSERVATION & NATURAL RESOURCES**Agency Code: **700**Appropriation Unit: **4150-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **UNITED STATES DEPARTMENT OF THE INTERIOR**Contractor Name: **U.S. GEOLOGICAL SURVEY**Address: **800 BUSINESS PARK DR**City/State/Zip: **DIXON, CA 95620**Contact/Phone: **Peter Coates 530-669-5073**Vendor No.: **PUR0000332D**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **213 days**4. Type of contract: **Interlocal Agreement**Contract description: **USGS/SETT FY22**

5. Purpose of contract:

This is a new interlocal agreement to provide sagebrush ecosystem habitat quantification tools using Greater Sage-grouse as an indicator species.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$129,680.00**

Other basis for payment: Full amount payable upon receipt of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency uses contracts and cooperative agreements to fund science-based studies in support of work done in the sagebrush ecosystem. As adopted, the Nevada Greater Sage-Grouse Conservation Plan and Conservation Credit System adaptively managed through the development and incorporation of new science and corresponding tools. The tools anticipated for development will provide greater support to implement mitigation more strategically within the sagebrush ecosystem.

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

The agency does not have the expertise to develop analytical planning tools based on field data and GIS information. The agency coordinates with the USGS in their mission to provide natural resource managers with scientific knowledge to address challenges to ecosystem function and information about sage-grouse habitats, populations and sustaining populations.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions. This is a cooperative agreement with a federal agency in support of work they are doing in support of the sagebrush ecosystem.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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

Contractor is Federal Government Agency

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 Federal Government Agency who cooperates with many State of Nevada agencies.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Kelly McGowan, MA IV Ph: 775-687-2001

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kwilliam	04/29/2022 14:14:17 PM
Division Approval	kwilliam	04/29/2022 14:14:19 PM
Department Approval	kwilliam	04/29/2022 14:14:21 PM
Contract Manager Approval	kwilliam	04/29/2022 14:15:59 PM
Budget Analyst Approval	rjacob3	05/13/2022 14:24:46 PM
BOE Agenda Approval	laaron	05/21/2022 09:39:32 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **24748**Amendment Number: **1**Agency Name: **DEPARTMENT OF WILDLIFE**Legal Entity Name: **Amplex Corporation**Agency Code: **702**Contractor Name: **Amplex Corporation**Appropriation Unit: **4461-10**Address: **1100 Fountain Parkway**Is budget authority available?: **No**City/State/Zip: **Grand Prairie, TX 75050**

If "No" please explain: C58772, June IFC

Contact/Phone: **Tammy Wright 214-672-0638**Vendor No.: **T81039194**NV Business ID: **NV20161409760**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Federal eDuck Stamp
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **22-10**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2021**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **1 year and 197 days**4. Type of contract: **Contract**Contract description: **E-Stamp Service**

5. Purpose of contract:

This is the first amendment to the original contract which provides processing services for the Federal Electronic Duck Stamp Program. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$150,000 to \$332,856 due to the continued need for these services. THIS CONTRACT IS CONTINGENT UPON IFC APPROVAL OF WORK PROGRAM #C58772.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$150,000.00	\$150,000.00	\$150,000.00	Yes - Action
2. Amount of current amendment (#1):	\$182,856.00	\$182,856.00	\$182,856.00	Yes - Action
3. New maximum contract amount:	\$332,856.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

In July 2021, the US Fish and Wildlife Service Federal Duck Stamp Office provided a renewed Memorandum of Understanding stating that the Nevada Department of Wildlife will continue to participate in the Federal Electronic Duck Stamp Program. This MOU will continue past FY23. The current contract must be extended to cover the anticipated expenses of the next fiscal year as well as unanticipated expenses for the current fiscal year.

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

Amplex Corporation is the designated vendor responsible for receiving payment from states who participate in the E-Stamp program and for fulfilling the delivery of the physical stamp to the purchaser.

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 #: 210802

Approval Date: 08/10/2021

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

This is the only vendor that can provide this service, as outlined in the MOU. Amplex must be utilized to fulfill the conditions of the MOU.

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 Wildlife from 2015-2021 - Work 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 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?

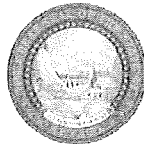
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	02/04/2022 16:37:35 PM
Division Approval	jneubau2	02/08/2022 13:34:07 PM
Department Approval	bvale1	04/20/2022 14:52:34 PM
Contract Manager Approval	cprasa1	05/05/2022 16:01:29 PM
Budget Analyst Approval	dspeed1	05/16/2022 17:21:09 PM
BOE Agenda Approval	laaron	05/23/2022 15:07:49 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#:

216802 (4)

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>Nevada Department of Wildlife</i>	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Cynthia Prasad, Contract Manager</i>	<i>775-688-1526</i>	<i>cprasad@ndow.org</i>
	<i>Bonnie Long, Deputy Director</i>	<i>775-688-1982</i>	<i>bonnie.long@ndow.org</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Amplex Corporation</i>
	Contact Name:	<i>1100 Fountain Parkway</i>
	Complete Address:	<i>Grand Prairie, Texas 75050</i>
	Telephone Number:	<i>214-672-0638</i>
Email Address:	<i>Tammy Wright</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:	<i>N/A</i>		
	CETS:	<i>24748</i>		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>Upon Approval</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	
Other (Explain):	<i>Federal E-Duck Stamp and Fees</i>	

08/05/21 Red-Cg

Purchasing Use Only:

Approval #:

210802@

1g

Total Estimated Value of this Service Contract, Amendment or Purchase:

\$864,000.00

2

Provide a description of work/services to be performed or commodity/good to be purchased:

The vendor is the fulfillment center for the purchase of Duck Stamps. The vendor will provide an electronic version of the duck stamp to the purchaser and will also fulfill the delivery of the actual stamp to the purchaser.

3

What are the unique features/qualifications required for this service or good that are not available from any other vendor:

This is vendor chosen by the U.S. Fish and Wildlife Services to fulfill the e-Duck stamp orders. States who have elected to participate in the e-Duck stamp program must do so through this vendor.

4

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

This is vendor chosen by the U.S. Fish and Wildlife Services to fulfill the e-Duck stamp orders. States who have elected to participate in the e-Duck stamp program must do so through this vendor.

Were alternative services or commodities evaluated? Check One.

Yes:

No:

X

5

a. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

b. If not, why were alternatives not evaluated?

This is the only vendor who can provide this service as they are the vendor used by the U.S. Fish and Wildlife Services to handle the fulfillment of the e-Duck stamps.

Purchasing Use Only:

Approval #:

210802-2

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 #)			
	July 1, 2015	August 31, 2021	\$76,000.00	Fulfillment center for the delivery of the Duck Stamp to the purchaser.	N/A			

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 agency would have to opt out of providing the e-Duck stamp if we are not able to contract with this vendor to pass through the funds needed to fulfill orders.</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>None, there are no other vendors who can provide these services.</i>

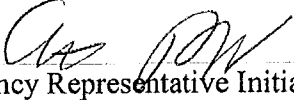
9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. If yes, please provide details regarding future obligations or needs.				

Purchasing Use Only:

Approval #:


210802-2

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


Agency Representative Initiating Request

Cynthia Prasad
Print Name of Agency Representative Initiating Request

8/5/21
Date


Signature of Agency Head Authorizing Request

Bonnie Long
Print Name of Agency Head Authorizing Request

8/4/21
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

8/10/21
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: **26225**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4165-18**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Trailhead Labs, Inc.

Contractor Name: **Trailhead Labs, Inc.**Address: **75 Broadway****Suite 202-1905**City/State/Zip: **San Francisco, CA 94114**

Contact/Phone: Ryan Branciforte 415.890.5575

Vendor No.: T27044788

NV Business ID: NV20222430439

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/12/2025**Contract term: **3 years and 12 days**4. Type of contract: **Contract**Contract description: **mobile app**

5. Purpose of contract:

This is a new contract to provide services for a mobile application for park visitors' use across Nevada state parks.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$125,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The mobile app would offer visitors access to up to date information while having a safe, enjoyable experience.

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

Nevada State Park employees do not have the time or expertise to create a mobile app.

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):

Smart IT Pros
TimeLooper
Nextekk Solutions, LLC
Trailhead Labs, Inc

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #70CNR-S1814, 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: 12/15/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

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

Yes

19. Agency Field Contract Monitor:

Jonathan Brunjes, Deputy Administrator Ph: 775.684.2778

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	05/13/2022 09:28:43 AM
Division Approval	kcopelan	05/13/2022 09:28:45 AM
Department Approval	kcopelan	05/13/2022 09:28:47 AM
Contract Manager Approval	kcopelan	05/13/2022 09:28:49 AM
EITS Approval	tgalluzi	05/16/2022 09:13:46 AM
Budget Analyst Approval	rjacob3	05/19/2022 06:56:38 AM
BOE Agenda Approval	laaron	05/23/2022 09:57:03 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: Bradley Crowell, Director, DCNR
Jonathan Brunjes, Deputy Administrator, PARKS
Jennifer Idema, ASO, PARKS

CC: Alan Cunningham, State CIO, EITS, DOA
Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DCNR - 305 - Mobile App-State Parks - 4162

DATE: October 27, 2021

We have completed the review for DCNR's – Mobile App-State Parks TIN 305.

The submitted TIN for an estimated value of \$100,000.00 in the current biennium and \$25,000.00 next biennium (50% Gift Shop Grant and 50% Pine Creek Funds) to implement a new technology, a new automated solution, and/or new equipment not previously in use by the agency.

Nevada State Parks desires to provide a mobile app for park visitors to utilize while exploring any of the parks, recreation areas, or historic sites across the state.

The mobile app will provide visitors with park information, trail maps, interpretive nodes, and up to date emergency information as posted by park staff.

The intent is for the app to link/interface with the park reservation system (still in negotiations) at some point in time and have links to the official Nevada State Parks website (www.parks.nv.gov) for additional information.

The mobile app would be functional with both IOS and Android systems. The app will provide both online and offline capabilities.

External users would be able to provide information via a webpage or text message.

Park staff would work with the awarded vendor to create and update content.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25891**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3193-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SILVER STATE ANALYTICAL LABORATORIES, INC.**Contractor Name: **SILVER STATE ANALYTICAL LABORATORIES, INC.**Address: **1135 FINANCIAL BLVD**City/State/Zip: **RENO, NV 89502-2348**Contact/Phone: **Joe Nava 775-857-2400**Vendor No.: **T29004820A**NV Business ID: **NV20041414954**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Analysis of Water**

5. Purpose of contract:

This is a new contract to provide analysis of water, sediment and biota samples to characterize the chemical, physical and biological conditions of surface waters in support of the statewide surface water quality monitoring program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$630,000.00**

Payment for services will be made at the rate of \$157,500.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?

The federal Clean Water Act section 106 and 40 code of federal regulations 130.4 (a) require states to develop and implement a surface water quality monitoring program to characterize the water quality status of waters of the state. The U.S. Environmental Protection Agency provides federal 106 funding to the Division of Environmental Protection to carry out the monitoring programs.

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

Nevada Division of Environmental Protection does not have the laboratory facilities necessary to analyze water samples.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):

Sundance Consulting
120 Water
NOVA
Silver State Analytical

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP# 70CNR-S1893, 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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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 has a laboratory contract with the Division of Environmental Protection and has been satisfactory.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mhiik1	04/11/2022 08:04:11 AM
Division Approval	pcomba	04/18/2022 07:46:08 AM
Department Approval	pcomba	04/18/2022 07:46:12 AM
Contract Manager Approval	mhiik1	04/18/2022 08:16:28 AM
Budget Analyst Approval	rjacob3	05/13/2022 15:00:45 PM
BOE Agenda Approval	laaron	05/21/2022 10:30:36 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 CONTRACT

1. Contract Number: **22144** Amendment Number: **1**

Legal Entity Name: **United States Department of the Interior**

Agency Name: **DCNR - ENVIRONMENTAL PROTECTION** Contractor Name: **U.S. Geological Survey**

Agency Code: **709** Address: **2730 N. Deer Run Road**

Appropriation Unit: **3193-06** City/State/Zip: **Carson City, NV 89701**

Is budget authority available?: **Yes** Contact/Phone: **Helen Houston 775-887-7655**

If "No" please explain: **Not Applicable** Vendor No.: **PUR0000332D**

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 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Joint Funding Agreement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/09/2019**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years and 327 days**4. Type of contract: **Other (include description): Joint Funding Agreement**Contract description: **Turbidity Monitoring**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides a collection of continuous stream turbidity and temperature from two streams with significant sediment contributions to Lake Tahoe. This amendment extends the termination date from June 30, 2022 to June 30, 2024 and increases the maximum amount from \$99,400 to \$202,002 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:	\$99,400.00	\$99,400.00	\$99,400.00	Yes - Action
2. Amount of current amendment (#1):	\$102,602.00	\$102,602.00	\$102,602.00	Yes - Action
3. New maximum contract amount:	\$202,002.00			
and/or the termination date of the original contract has changed to:	06/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Federal Clean Water Act and the Nevada Water Pollution Control Law (NRS 445A) requires the State to Monitor and assess waterbodies to ensure maintenance and protection of designated beneficial uses. Since 1980's as part of the Lake Tahoe Interagency Monitoring Program (LTIMP) the United States Geological Survey (USGS) has monitored streamflow, nutrients, and suspended sediment concentration (SSC) at 7 primary stream inflow sites to Lake Tahoe. In 2016 monitoring was expanded to include continuous turbidity and water temperature at 5 of 7 primary monitoring sites. For efficiency and consistency USGS is the best choice to install and maintain the remaining two sites.

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

The NDEP Bureau of Water Quality Planning has Environmental Scientists on staff who monitor water quality across the state. However NDEP does not install, operate or maintain a network of stream gages across the state.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mhlk1	04/18/2022 06:55:57 AM
Division Approval	pcomba	04/18/2022 07:41:28 AM

Department Approval	pcomba	04/18/2022 07:41:35 AM
Contract Manager Approval	mhilk1	04/18/2022 09:02:15 AM
Budget Analyst Approval	rjacob3	05/23/2022 13:40:26 PM
BOE Agenda Approval	laaron	05/23/2022 13:53:12 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: **25922**

Agency Name: DETR - REHABILITATION DIVISION	Legal Entity Name: Alliance Enterprises, Inc. of Washington
Agency Code: 901	Contractor Name: Alliance Enterprises, Inc. of Washington
Appropriation Unit: 3265-27	Address: 2980 Center Dr Suite 200
Is budget authority available?: Yes	City/State/Zip: Dupont, WA 98327-7806
If "No" please explain: Not Applicable	Contact/Phone: Meilyn Diaz 360-456-7000
	Vendor No.: T29039304
	NV Business ID: NV20121142268

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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

X General Funds	21.30 %	Fees	0.00 %
X Federal Funds	78.70 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 3579-26-REHAB

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Alliance AWARE**

5. Purpose of contract:

This is a new contract to provide ongoing licensing and professional services for the Aware Case Management System.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,825,458.00**

Other basis for payment: \$423,484/Year 1 (SFY2023), \$444,657/Year 2 (SFY2024), \$467,087/Year 3 (SFY2025) and \$490,230/Year 4 (SFY2026). Invoices payable, at the beginning of each State Fiscal Year (July), only upon approval by authorized REHAB personnel. Total Contract Not to Exceed: \$1,825,458.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

AWARE allows Vocational Rehabilitation to fully comply with federal and state program processing and reporting requirements, shorten the system modification timeframe required to be in compliance, and reduce overall systems effort and cost while improving functionality and capability for the program.

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

State employees do not have the resources or the software capabilities to perform these analytics required through the AWARE system.

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 #: 211006

Approval Date: 10/26/2021

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

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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 provided satisfactory services to Vocational Rehabilitation since September 2017.

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

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

Not Applicable

15. The contractor is 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	jmarhevk	05/09/2022 14:18:48 PM
Division Approval	jmarhevk	05/09/2022 14:18:51 PM
Department Approval	jmarhevk	05/09/2022 14:18:54 PM
Contract Manager Approval	jwixon	05/09/2022 14:19:58 PM
EITS Approval	ljean	05/09/2022 14:35:55 PM
Budget Analyst Approval	vfajota	05/16/2022 12:06:47 PM
BOE Agenda Approval	dlenzner	05/21/2022 20:04:30 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#:

211006

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 <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Department of Employment, Training and Rehabilitation</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Walter Cuneo, Management Analyst II</i>	<i>775-687-6864</i>	<i>wlcuneo@detr.nv.gov</i>

1b	Vendor Information:	
	Vendor Name:	<i>Alliance Enterprises Inc.</i>
	Contact Name:	<i>Meilyn Diaz</i>
	Complete Address: City, State, and Zip Code	<i>2980 Center Drive, Suite 200, DuPont, WA 98327</i>
	Telephone Number:	<i>(360) 456-7000</i>
	Email Address:	<i>meilyn.diaz@allianceenterprises.com</i>

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

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	<i>XX</i>	No:
	Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	<i>07/01/2022</i>	End Date:
			<i>06/30/2026</i>	

1f	Funding:	
	State Appropriated:	<i>21.3%</i>
	Federal Funds:	<i>78.7%</i>
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

2/1006

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$1,825,458.00

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>Alliance Enterprises Inc. is the owner and developer of Aware VR (AWARE), which the Bureau of Vocational Rehabilitation (VR) purchased in 2017 and used to upgrade the previous Case management System (Rehabilitation Automated Information System of Nevada or RAISON). This contract is for the licensing of the AWARE cloud-based system for the next four (4) State Fiscal Years. This contract will also provide for maintenance and support allowing Nevada to meet Federal data and reporting requirements, assuring the viability of the VR program and its continued federal funding. Additionally, the contract provides for Nevada specific enhancements (customizations) to meet the State of Nevada and Rehabilitation Division business needs such as completing the interface changes needed to support Smart21.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>AWARE allows VR to fully comply with federal and state program processing and reporting requirements, shorten the system modification timeframe required to be in compliance, and reduce overall systems effort and cost while improving functionality and capability for the program. Alliance is also the only vendor who can provide programing expertise since the program is proprietary.</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>Alliance is also the only vendor who can provide programing expertise to the AWARE system since the program is proprietary. The selection of another vendor would require the replacement of the AWARE system and the costs would be prohibitive for the transition from AWARE to the new system. Currently, there are no other known systems, on the market, that are as integrated as AWARE.</i>

5	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
			XX
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.		
	b. <u>If not</u> , why were alternatives not evaluated?	<i>Alliance is the only vendor who can provide programing expertise to the AWARE system since the program is proprietary. The selection of another vendor would require the replacement of the AWARE system and the costs would be prohibitive for the transition from AWARE to the new system. Currently, there are no other known systems, on the market, that are as integrative as AWARE.</i>	

Purchasing Use Only:

Approval #:

211006 

	Has the agency purchased this service or commodity in the past? Check One:				Yes	No
	NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				XX	
6	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:					
	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #	
	Start Date	End Date				
	09/12/2017	06/30/2022	\$4,148,323	Upgrade Case Mgmt. system and licensing	Waiver#170702	
	03/2012	06/2013	\$178,000	Data collection enhancement	Waiver# 120301	
	04/2002	05/2012	Unknown	Software Design License Agreement	N/A	
			\$			
			\$			
7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?					
	Loss of federal funding due to not meeting federal data and reporting requirements potentially causing the Vocational Rehabilitation program to become unviable, which will drastically reduce our ability to serve Nevadans with a disability.					
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?					
	Staff reached out to other states' Vocational Rehabilitation programs and researched the internet. Many other states are either using Alliance's products or are using custom systems built in-house.					
9	Will this purchase obligate the State to this vendor for future purchases? Check One:				Yes	No
	<u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>				XX	
	a. If yes, please provide details regarding future obligations or needs.					
As long as VR is utilizing AWARE, we must pay for licensing of the product. Also, changing state and federal regulations will require customization of the system, thus requiring the ability to use Alliances professional programming services, since AWARE is proprietary.						

Purchasing Use Only:

Approval #:

211006 @

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.

Walter Cuneo

Agency Representative Initiating Request

Walter Cuneo

10/19/2021

Print Name of Agency Representative Initiating Request

Date

Drazen Elez

Signature of Agency Head Authorizing Request

Drazen Elez

10/19/2021

Print Name of Agency Head Authorizing Request

Date

FOR PURCHASING USE ONLY – 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:

* Note: Be certain to include you TIN approval memo as an
Attachment in CETS *

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

10/26/21

Date

Steve Sisolak
Governor



Laura E. Freed
Director
Matthew Tuma
Deputy Director
Alan Cunningham
State Chief Information Officer
Timothy Galluzi
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: Elisa Cafferata, Director, DETR
Laxmi Bokka, IT Chief Manger, DETR
Walter Cuneo, Management Analyst II, DETR
Drazen Elez, Administrator, DETR

CC: Alan Cunningham, State CIO, EITS, DOA
Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DETR - 299 - Alliance Enterprises AWARE
Licensing - 3265

DATE: October 13, 2021

We have completed the review for DETR's – Alliance Enterprises AWARE Licensing TIN 299.

The submitted TIN for an estimated value of \$423,484.00 in the current biennium and \$911,744.00 next biennium (78.7% Federal Grant and 21.3% General Fund) to renew or update a maintenance, licensing, or consulting agreement already in place.

The Bureau of Vocational Rehabilitation (BVR) and the Bureau of Services to the Blind and Visually Impaired (BSBVI) provides employment assistance and related services to Nevadans with disabilities, which may include, but is not limited to individuals with physical and mental disabilities, intellectual and developmental issues, blind or visually impaired and deaf or hard of hearing.

Each BVR/BSBVI case may contain confidential information such as: medical records, demographic data, list of services already provided, cost and employment data. Eligibility determinations, case services and Individual Plans for Employment (IPE) are prepared and provisioned according to state and federal regulations.

Case related data that is maintained by BVR/BSBVI contains confidential/sensitive information:

- personal data provided by the participants served
- data from external service providers
- data from medical professionals
- data from insurance companies
- data from federal entities, such as Social Security Administration
- data from non BVR/BSBVI community, health, welfare, and rehabilitation counselors

As participants are served, BVR/BSBVI collects, monitors, and manages all the data using the AWARE case management system that was implemented in State Fiscal Year 2019.

Continuing to license for the AWARE case management system will allow BVR/BSBVI to comply with federal reporting requirements including Workforce Innovation and Opportunity Act (WIOA) data capture and reporting requirements.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25509**Agency Name: **DETR - REHABILITATION DIVISION**Agency Code: **901**Appropriation Unit: **3265-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DP VIDEO PRODUCTIONS, LLC**Contractor Name: **DP VIDEO PRODUCTIONS, LLC**Address: **6984 SMILING CLOUD AVE**City/State/Zip: **HENDERSON, NV 89011-5013**Contact/Phone: **Emire Stitt 702/468-9901**Vendor No.: **T29019963A**NV Business ID: **NV20041136819**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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	17.90 %	Fees	0.00 %
X	Federal Funds	75.30 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	6.80 % Business Enterprise Set-Aside

Agency Reference #: **RFP#90DETR-S1716 PSMs Initials: tb**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **2022 DP Video**

5. Purpose of contract:

This is a new contract to provide ongoing services that expand the current multi-media outreach platform to promote the Nevada Vocational Rehabilitation Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00**

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?

To increase awareness with the Vocational Rehabilitation program's two main customer groups, businesses and Nevadan's with disabilities, a comprehensive multi-media campaign is needed to promote the workforce resources available to businesses (existing, new and potential) and to educate businesses about the benefits of hiring individuals with disabilities.

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 and resources to develop and carry out a comprehensive multi-media campaign.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 #90DETR-S1716, 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: 11/09/2021 Anticipated re-bid date: 11/09/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided satisfactory services to DETR since 2014, DHHS from 2012-2020 and Tourism from 2009-2019.

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	jmarhevk	02/03/2022 11:04:19 AM
Division Approval	jmarhevk	02/03/2022 11:04:28 AM
Department Approval	jmarhevk	02/03/2022 11:04:30 AM
Contract Manager Approval	llarki1	02/14/2022 09:58:43 AM
Budget Analyst Approval	vfajota	05/17/2022 10:01:01 AM
BOE Agenda Approval	dlenzner	05/21/2022 14:27:07 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 CONTRACT

1. Contract Number: **23046** Amendment Number: **4**

Agency Name: **DETR - EMPLOYMENT SECURITY** Legal Entity Name: **CARASOFT TECHNOLOGY**

Agency Code: **902** Contractor Name: **CARASOFT TECHNOLOGY**

Appropriation Unit: **4770-11** Address: **CORPORATION**

Is budget authority available?: **Yes** City/State/Zip: **11493 SUNSET HILLS RD STE 100**

If "No" please explain: Not Applicable Contact/Phone: **RESTON, VA 20190-5230**

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.

<input checked="" type="checkbox"/> General Funds	14.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	83.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	3.00 % Business Enterprise Set Aside

Agency Reference #: 3363-24-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/30/2020**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2022**

Contract term: **3 years and 91 days**

4. Type of contract: **Other (include description): MSA Work Plan**

Contract description: **DocuSign**

5. Purpose of contract:

This is the fourth amendment to the original work plan under master service agreement #18855 which provides cloud services. This amendment extends the termination date from June 30, 2022 to June 29, 2023 and increases the maximum amount from \$872,109.71 to \$1,200,304.94 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:	\$920,534.32	\$920,534.32	\$920,534.32	Yes - Action
a. Amendment 1:	\$28,674.00	\$28,674.00	\$28,674.00	Yes - Info
b. Amendment 2:	-\$77,098.61	-\$77,098.61	-\$48,424.61	Yes - Info
c. Amendment 3:	\$0.00	\$0.00	-\$48,424.61	No
2. Amount of current amendment (#4):	\$328,195.23	\$328,195.23	\$279,770.62	Yes - Action
3. New maximum contract amount:	\$1,200,304.94			
and/or the termination date of the original contract has changed to:	06/29/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

Excessive time for document processing impacts the availability of services to all Nevadans. Reducing this time in process, reduces the burden our clients experience, especially during this extremely challenging period of time.

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

State Employees/Agencies do not have the time, skills or tools to create an electronic signature/routing system.

9. Were quotes or proposals solicited? No

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

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

b. Solicitation Waiver: **Not Applicable**

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

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	jmarhevk	04/21/2022 13:42:47 PM
Division Approval	jmarhevk	04/21/2022 13:42:53 PM

Department Approval	jmarhevk	04/21/2022 13:42:58 PM
Contract Manager Approval	llarki1	04/21/2022 13:58:09 PM
EITS Approval	daxtel1	04/25/2022 23:34:38 PM
Budget Analyst Approval	vfajota	05/23/2022 09:31:05 AM
BOE Agenda Approval	dlenzner	05/23/2022 11:29:09 AM



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: Elisa Cafferata, Director, DETR
Josh Marhevka, Chief Financial Officer, DETR
Scott Jeffries, IT Manager, DETR
Lindsay Thompson, Management Analyst, DETR

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
Jason Benshoof, IT Chief, Agency IT Services, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DETR – TIN 546 – *DETR - DocuSign Licensing* – BA 3272

DATE: May 19, 2022

We have completed our review for the Department of Employment, Training, and Rehabilitation's (DETR) – *DETR - DocuSign Licensing* – TIN 546.

The submitted TIN, for an estimated value of \$1,200,304.94 in the FY22/FY23 biennium (78.7% Federal Grant and 21.3% General Fund), is to digitally transform key forms and processes in a cloud solution to provide electronic signature, workflow routing, and electronic storage, that will directly impact Rehabilitation's clients. This TIN is a revision of T901191122104401 completed on March 24, 2020.

DocuSign proactively employs risk management methods across their enterprise to identify, manage, and mitigate risk. This solution is ISO 27001 certified, SSAE 18 examined, and PCI DSS 3.2 compliant and maintains formal policies and procedures to cover Data Classification. DocuSign is a FedRAMP authorized solution based on the NIST 800-53 control set for Moderate systems.

The agency considers the investment and final implementation to have an ongoing low security risk.

While not yet approved as an enterprise solution, OnBase is a recommended, web-based, eRecords solution that currently is hosted by the State Records Manager in NSLAPR. The agency should consider coordinating with NSLAPR and EITS for their records management and storage needs.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies.

A copy of this memo has 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: **25049**Amendment Number: **1**Agency Name: **DETR - EMPLOYMENT SECURITY**Legal Entity Name: **Melanie S. Arthur**Agency Code: **902**Contractor Name: **Melanie S. Arthur**
Address: **Melanie S. Arthur Consulting**
15 Oakes AveAppropriation Unit: **4770-11**City/State/Zip: **Gloucester, MA 01930**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Contact/Phone: **MELANIEARTHURCONSULTING@GM
AIL.COM 617-834-6696**Vendor No.: **T29044271**NV Business ID: **NV20212143679**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: **90DETR-S1700tb 3584-22-ESD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2021**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **1 year and 197 days**4. Type of contract: **Contract**Contract description: **Policy & Training**

5. Purpose of contract:

This is the first amendment to the original contract which provides an update to existing business services office policies, procedures and training materials for the workforce programs to align with U.S. Department of Labor workforce regulations. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$157,750 to \$315,550 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:	\$157,800.00	\$157,800.00	\$157,800.00	Yes - Action
2. Amount of current amendment (#1):	\$157,750.00	\$157,750.00	\$157,750.00	Yes - Action
3. New maximum contract amount:	\$315,550.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

This vendor is nationally recognized and is recommended by the U.S. Department of Labor for its ability to customize policies, training, and technical assistance for state workforce agencies. Allowing this vendor to update its existing training materials, policies and procedures is the most cost-effective and efficient use of state time and resources. To procure and train a new vendor would require extensive time and support from state personnel; at this juncture, there is not sufficient personnel to provide this level of support and training, and this work needs to expeditiously coincide with the reopening of Nevada's JobConnect offices to the public.

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

Melanie Arthur Consulting is the only vendor who has the prior knowledge, expertise, and ability to update and revise the existing policies and train JobConnect staff in the State management information system (EmployNV) without extensive training efforts and expenditures of resources. Melanie Arthur led this work while employed at the previous vendor that DETR contracted to perform this work, Greg Newton and Associates. During Ms. Arthur tenure at Greg Newton and Associates, she became conversant with federal and state workforce laws, policies, architectures, and specifically DETR's program delivery models, processes and case management information system (EmployNV) and led the development of the policies, procedures and training that DETR is now seeking to update and enhance.

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?

Having developed this work previously, the vendor has unique knowledge and insight of both federal and state workforce applications, environment and architecture that are requisites to effective and efficiently update the necessary policies, procedures and training materials that are required for the Nevada JobConnect frontline staff.

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

10. a. Does the contract contain any IT components? No

- b. Is the contract part of an IT investment project over \$50,000? 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?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

This vendor is a sole proprietor

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jmarhevk	05/06/2022 10:11:20 AM
Division Approval	jmarhevk	05/06/2022 10:11:24 AM
Department Approval	jmarhevk	05/06/2022 10:11:28 AM
Contract Manager Approval	llarki1	05/12/2022 09:09:50 AM
Budget Analyst Approval	vfajota	05/19/2022 08:40:33 AM
BOE Agenda Approval	dlenzner	05/20/2022 20:06:15 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: **26009**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4770-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WORKFORCE CONNECTIONS**Contractor Name: **WORKFORCE CONNECTIONS**Address: **6330 W CHARLESTON BLVD STE 150**City/State/Zip: **LAS VEGAS, NV 89146-1183**Contact/Phone: **702/638-8750**Vendor No.: **T81079028**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: 3639-23-WISS

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 29 days**4. Type of contract: **Interlocal Agreement**Contract description: **CCSD Voc Equipment**

5. Purpose of contract:

This is a new interlocal agreement to provide the equipment needed to launch information technology and culinary vocational programs in four at-risk schools in the Clark County School District.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$164,964.00**

Payment for services will be made at the rate of \$164,964.00 per Upon receipt

II. JUSTIFICATION

7. What conditions require that this work be done?

Workforce Innovation and Opportunity Act (WIOA) of 2014

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

The Governor's Workforce Investment Board designated the Local Workforce Investment Boards to facilitate training services and the required equipment in compliance with WIOA.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?

Governor's Designated Agency - Interlocal contract
CFR Part 652 et al

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jmarhevk	05/04/2022 16:45:50 PM
Division Approval	jmarhevk	05/04/2022 16:45:52 PM
Department Approval	jmarhevk	05/04/2022 16:45:54 PM
Contract Manager Approval	jwixon	05/05/2022 07:56:11 AM
Budget Analyst Approval	vfajota	05/17/2022 14:05:06 PM
BOE Agenda Approval	dlenzner	05/20/2022 20:54:13 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: **23103**Amendment Number: **5**Agency Name: **DETR - EMPLOYMENT SECURITY**Legal Entity Name: **GEOGRAPHIC SOLUTIONS, INC.**Agency Code: **902**Contractor Name: **GEOGRAPHIC SOLUTIONS, INC.**Appropriation Unit: **4772-22**Address: **1001 OMAHA CIR**Is budget authority available?: **Yes**City/State/Zip: **PALM HARBOR, FL 34683-4036**

If "No" please explain: Not Applicable

Contact/Phone: **Deane Toler 831-206-1858**Vendor No.: **T27039926**NV Business ID: **NV20161382911**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 %

Agency Reference #: **3421-21-ESD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/09/2020**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2022**

Termination Date:

Contract term: **4 years and 83 days**4. Type of contract: **Contract**Contract description: **PUA software**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides software and user training for the Pandemic Unemployment Assistance Benefits System. This amendment extends the termination date from June 30, 2022 to June 30, 2024 and increases the maximum amount from \$6,622,315 to \$9,334,843 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:	\$3,995,145.00	\$3,995,145.00	\$3,995,145.00	Yes - Action
a. Amendment 1:	\$30,350.00	\$30,350.00	\$30,350.00	Yes - Info
b. Amendment 2:	\$1,386,950.00	\$1,386,950.00	\$1,417,300.00	Yes - Action
c. Amendment 3:	\$44,190.00	\$44,190.00	\$44,190.00	Yes - Info
d. Amendment 4:	\$1,165,680.00	\$1,165,680.00	\$1,209,870.00	Yes - Action
2. Amount of current amendment (#5):	\$2,712,528.00	\$2,712,528.00	\$2,712,528.00	Yes - Action
3. New maximum contract amount:	\$9,334,843.00			
and/or the termination date of the original contract has changed to:	06/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

A new emergency program included in the Federal Coronavirus Aid Relief, and Economic Security act, the Pandemic Unemployment Compensation program, requires a technology solution to properly administer.

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

State employees lack the necessary expertise.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

Emergency contract approved per NAC 333.114

Geographic Solutions is the only vendor the Department is aware of that has developed a solution for this program at this time.

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

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Vendor currently provides Unemployment Insurance technology solutions for DETR satisfactorily.

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

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

Not Applicable

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

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	jmarhevk	04/25/2022 14:11:48 PM
Division Approval	jmarhevk	04/25/2022 14:11:54 PM
Department Approval	jmarhevk	04/25/2022 14:12:01 PM
Contract Manager Approval	llarki1	04/25/2022 14:12:27 PM
EITS Approval	daxtel1	04/25/2022 23:35:50 PM
Budget Analyst Approval	vfajota	05/19/2022 10:19:00 AM
BOE Agenda Approval	dlenzner	05/21/2022 20:45:43 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

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

Purchasing Use Only:	
Approval #:	443 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

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

1	Agency Contact Information – Note: Approved copy will be sent to <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: DETR		
	Contact Name and Title	Phone Number	Email Address
	Lindsay Thompson	775-684-3967	lnthompson@detr.nv.gov
	Brian Deem	775-684-3947	b-deem@detr.nv.gov

2	Contractor Information:	
	Contractor Name:	Geographic Solutions, Inc.
	Contact Name:	Deane Toler
	Complete Address: City, State and Zip Code	1001 Harbor, FL 34683-4036
	Phone Number:	813-206-1858
	Email Address:	dtoler@geosolinc.com

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):			
	Solicitation Type, if applicable: RFP		#:	3199
	Enter CETS Number:	#18376		
	Contract Amount:	\$4,238,320		
	Contract Term:	Start Date:	2/14/2017	End Date:

Rec'd 04/04/22 // auto ✓

Purchasing Use Only:

Approval #:

443 @

4	Current Contract Information:			
	Solicitation Type, if applicable:		Waiver	#:
	Enter CETS Number:	#23103		
	Initial Contract Amount:	\$3,995,145		
	Contract Term:	Start Date:	4/9/2020	End Date:

5	Amendment Information – List <u>all previously</u> approved amendments:			
	Amd #:	Brief Synopsis of What Amendment Accomplished:	Dollar Change in Contract Amount	Change in End Date
	1	Increased maximum amount and added needed interfaces with outside data sources.	\$30,350	None
	2	Increased maximum amount, added additional fraud detection and prevention tools and extended end date.	\$1,386,950	12/31/2021
	3	Increased maximum amount and added banking related items due to a change in vendor of the UI debit cards.	\$44,190	None
	4	Removed modules no longer necessary with the program no longer paying claimants, increased the maximum and extended the end date.	\$1,213,380	6/30/2022

6	<u>Proposed</u> Amendment Information:			
	Amd #:	Brief Synopsis of What the Requested Amendment will Accomplish	Dollar Change in Contract Amount	Change in End Date
	5	Increases maximum and extends the end date.	\$4,661,520.00	6/30/2024

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?			
	The Geographic Solutions Inc (GSI) system houses all the Pandemic Unemployment Assistance (PUA) claims, pending appeals and program integrity (fraud) cases for thousands of Nevada claimants. This program not only stores the data but has working logic and functionality that allows users to process their requests and claims. Currently, the Department of Employment, Training and Rehabilitation (DETR) also has thousands of backlogged fraudulent investigations and claimants potentially still needing to be paid on their claims. GSI's case management profile gives DETR the ability to navigate through the extensive caseload. This program manages and initiates all payments and collection of overpayments. This program also automates necessary markers, removes human error, and reduces manual processes to allow more time and staff to work on the backlogs DETR has experienced as a result of the Covid-19 pandemic.			

DETR is currently procuring a new full Unemployment Insurance (UI) computer system that will include the above abilities as well as many others. The remainder of the procurement process and implementation of this system is projected to go into 2024 and although PUA is an emergency federal program that is no longer available, DETR must continue its appeals and fraud work going forward. Obtaining a new system solely for a federal program no longer in active operation when a new comprehensive solution is being procured is not a viable option.

DETR is requesting this extension through 6/30/2024, however if implementation goes longer another extension request would be submitted.

What are the potential consequences to the State if the contract extension request is denied?

DETR would have to attempt to perform its Appeals and Integrity duties without the proper tools, further slowing down the process which would be detrimental to claimants of the state who are in the PUA program awaiting resolution. A critical element of functionality customized by GSI is the case management portion of the system. It allows staff to review filed claims, over payment collection payable to Nevada, track fraudulent activities and the required appeal rights set forth by law. This would also increase the backlogs and workload to staff, as well as create a disadvantage to claimants for eligible benefits and appeal rights. This program manages and initiates all payments and collection of overpayments, fraudulent investigations, and the collection of overpayments to be paid back to DETR by claimants who are deemed ineligible.

Purchasing Use Only:

Approval #:

#4430

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.

Melissa Potter

Signature of Agency Representative Initiating Request

Melissa Potter

Print Name of Agency Representative Initiating Request

3/30/22
Date

Nancy St. Clair

Signature of Agency Head Authorizing Request

NANCY STCLAIR

Print Name of Agency Head Authorizing Request

3-30-22
Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

Signed:

Kevin D. Osty

Administrator, Purchasing Division or Designee

4/5/22
Date

Steve Sisolak
Governor



#443②

Laura E. Freed
Director

Matthew Tuma
Deputy Director

Timothy Galluzi
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: Elisa Cafferata, Director, DETR
Carl Stanfield, IDP Administrator, DETR
Tracy Lynn Zehner, Contract Manager, DETR
Laxmi Bokka, IT Chief, DETR
Josh Marhevka, Management Analyst IV, DETR

CC: Tim Galluzi, Administrator, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, Business Process Analyst III, EITS, DOA

SUBJECT: TIN Completion Memo – DETR – 137 – *Pandemic Unemployment Assistance (PUA) Benefits System* – BA 4772 –Update C

DATE: March 29, 2022

We have completed an updated review for the Department of Employment, Training, and Rehabilitation's (DETR) – *Pandemic Unemployment Assistance (PUA) Benefits System* – TIN 137.

The submitted TIN, for an estimated value of \$5,837,640 this biennium (an additional \$2,330,760) and \$2,330,760 in the next biennium (100% Federal Grant funding), is for continued administration of the PUA Benefits System, established as part of the CARES act, and usage of the Geographic Solutions modules so that claimants who do not qualify for Unemployment Insurance can be paid PUA benefits.

This technology investment is mission critical as it ensures federal compliance and affects daily business transactions used by Nevada's constituents.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

#443④

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: **18376**Amendment Number: **6**Agency Name: **DETR - ADMINISTRATIVE SERVICES**Legal Entity Name: **Geographic Solutions, Inc.**Agency Code: **908**Contractor Name: **Geographic Solutions, Inc.**Appropriation Unit: **3274-22**Address: **1001 Omaha Circle**Is budget authority available?: **Yes**City/State/Zip **Palm Harbor, FL 34683-4036**

If "No" please explain: Not Applicable

Contact/Phone: **Paul Toomey 727-786-7955**Vendor No.: **T27039926**NV Business ID: **NV20161382911**To what State Fiscal Year(s) will the contract be charged? **2017-2023**

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 #: **RFP# 3199**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/14/2017**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **5 years and 228 days**4. Type of contract: **Contract**Contract description: **Automated Workforce**

5. Purpose of contract:

This is the sixth amendment to the original contract which provides an automated reporting and management information system that includes hardware, software, implementation, maintenance and support to provide various self-service jobseeker and employer system modules for workforce agency offices. This amendment extends the termination date from June 30, 2022 to September 30, 2022 and increases the maximum amount from \$4,238,320 to \$4,446,283 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:	\$3,393,464.00	\$3,393,464.00	\$3,393,464.00	Yes - Action
a. Amendment 1:	\$28,590.00	\$28,590.00	\$28,590.00	Yes - Info
b. Amendment 2:	\$51,940.00	\$51,940.00	\$80,530.00	Yes - Action
c. Amendment 3:	\$29,270.00	\$29,270.00	\$29,270.00	Yes - Info
d. Amendment 4:	\$39,996.00	\$39,996.00	\$69,266.00	Yes - Action
e. Amendment 5:	\$695,060.00	\$695,060.00	\$695,060.00	Yes - Action
2. Amount of current amendment (#6):	\$207,963.00	\$207,963.00	\$207,963.00	Yes - Action
3. New maximum contract amount:	\$4,446,283.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Upgrading the current Statewide Automated Workforce System (SAWS) will provide improved program services to Nevada's jobseekers, employers, trainers and staff, reduce manual effort and inefficiencies, increase Federal and State compliance and upgrade antiquated technologies through the modernization of the current system.

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

No state agencies or employees have the equipment or the experience to provide these services.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3199, 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: 10/16/2015 Anticipated re-bid date: 09/01/2020

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	jmarhevk	05/11/2022 10:09:36 AM
Division Approval	jmarhevk	05/11/2022 10:09:43 AM
Department Approval	jmarhevk	05/11/2022 10:09:51 AM
Contract Manager Approval	llarki1	05/16/2022 11:29:09 AM
EITS Approval	daxtel1	05/16/2022 12:52:19 PM
Budget Analyst Approval	vfajota	05/18/2022 09:05:07 AM
BOE Agenda Approval	dlenzner	05/22/2022 20:56:47 PM



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M E M O R A N D U M

TO: Elisa Cafferata, Director, DETR
Kitty DeSocio, Chief Financial Officer, DETR
Laxmi Bokka, IT Chief Manager, DETR
Katie Wellman, ESD Program Specialist II, DETR

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DETR – TIN 243 – *State Automated Workforce System (SAWS)* – BA 4770 – Update A

DATE: May 6, 2022

We have completed our review for the Department of Employment, Training and Rehabilitation's (DETR) – *State Automated Workforce System (SAWS)* – TIN 243, Update A.

The submitted TIN, for an estimated value of \$2,097,963 in the FY22/FY23 biennium (for an increase of \$207,963) and \$2,286,900 in the FY24/FY25 biennium (Workforce Innovation and Opportunity Act (WIOA) grant funds; Rapid Response specific funding), is to extend the existing contract with Geographic Solutions until 9/30/22.

This mission critical extension is needed to avoid disruption of the employment and training services to Nevada businesses and jobseekers.

The agency considers the investment to have an ongoing moderate security risk, as Personal Identification Information is transported, stored, and/or processed by this system and it is subject to federal security and/or other security standards.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid

integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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: **23128**Amendment
Number: **1**Agency Name: **BDC LICENSING BOARDS &
COMMISSIONS**Legal Entity
Name: **MCDONALD CARANO, LLP**Agency Code: **BDC**Contractor Name: **MCDONALD CARANO, LLP**Appropriation Unit: **B011 - All Categories**Address: **100 West Liberty Street,
Tenth Floor**Is budget authority
available?: **Yes**City/State/Zip **RENO, NV 89501**

If "No" please explain: Not Applicable

Contact/Phone: **Matthew C. Addison, Esq 775/788-2000**Vendor No.: **T81073509B**NV Business ID: **NV19961000027**To what State Fiscal Year(s) will the contract be charged? **2021-2026**

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 % 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 **07/14/2020**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **07/13/2022**

Termination Date:

Contract term: **5 years**4. Type of contract: **Contract**Contract description: **LEGAL**

5. Purpose of contract:

This is the first amendment to the original contract which provides administrative law judge services. This amendment extends the termination date from July 13, 2022 to July 13, 2025 and increases the maximum amount from \$160,000 to \$400,000 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:	\$160,000.00	\$160,000.00	\$160,000.00	Yes - Action
2. Amount of current amendment (#1):	\$240,000.00	\$240,000.00	\$240,000.00	Yes - Action
3. New maximum contract amount:	\$400,000.00			
and/or the termination date of the original contract has changed to:	07/13/2025			

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's expertise.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 Contracts Board. 04/2018 thru 03/31/2020. 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 registered with the Nevada Secretary of State's Office as a:

LLP

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dlumbert	05/13/2022 11:33:03 AM
Division Approval	dlumbert	05/13/2022 11:33:06 AM
Department Approval	dlumbert	05/13/2022 11:33:09 AM
Contract Manager Approval	dlumbert	05/13/2022 11:33:19 AM
Budget Analyst Approval	hfield	05/20/2022 13:13:47 PM
BOE Agenda Approval	hfield	05/20/2022 13:13:51 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: **26337**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: **2260 CORPORATE CIRCLE, STE 490**City/State/Zip: **HENDERSON, NV 89074**

Contact/Phone: NOAH ALLISON 702-933-4444

Vendor No.:

NV Business ID: NV20141626730

To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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 % 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2024**Contract term: **2 years**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**

Other basis for payment: \$235.00 - \$295.00 PER HOUR FOR ATTORNEYS/\$75.00 - \$125.00 PER HOUR FOR PARALEGAL.

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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

HAS CONTRACTED WITH THE NEVADA STATE CONTRACTORS BOARD WITH VERY SATISFACTORY WORK.

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	05/13/2022 11:11:33 AM
Division Approval	dlumbert	05/13/2022 11:11:35 AM
Department Approval	dlumbert	05/13/2022 11:11:38 AM
Contract Manager Approval	dlumbert	05/13/2022 11:11:41 AM
Budget Analyst Approval	hfield	05/20/2022 13:34:46 PM
BOE Agenda Approval	hfield	05/20/2022 13:34:48 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	ABE'S CARE HOME FOR DISABILITY	OTHER: VARIOUS AGENCIES	\$6,000,000	
	Contract Description:	This is a new contract to provide ongoing supportive living arrangement services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 25954		
2.		VARIOUS STATE AGENCIES	ALLIANCE THERAPIES, PLLC	OTHER: VARIOUS AGENCIES	\$7,300,000	
	Contract Description:	This is a new contract to provide ongoing services for occupational therapy, physical therapy, rehabilitation, speech pathology, therapy and counseling, applied behavioral analysis, assistive technology, autism treatment assistance programs, and early intervention.				
	Term of Contract:	Upon Approval - 06/30/2026		Contract # 26198		
3.		VARIOUS STATE AGENCIES	ASCENT AUDIOLOGY & HEARING	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing audiology services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26186		
4.		VARIOUS STATE AGENCIES	ASPIRING TO JUSTICE & FAIRNESS, LLC	OTHER: VARIOUS AGENCIES	\$1,100,000	
	Contract Description:	This is a new contract to provide ongoing services for marriage and family therapy, mental health, psychology, and social worker.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26075		
5.		VARIOUS STATE AGENCIES	AT HOME CAREGIVERS, LLC	OTHER: VARIOUS AGENCIES	\$2,500,000	
	Contract Description:	This is a new contract to provide ongoing personal care and respite care services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26141		
6.		VARIOUS STATE AGENCIES	ATTAIN VOCATIONAL SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing disabilities support, employment support and pre-employment services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26232		
7.		VARIOUS STATE AGENCIES	ALTEA RESEARCH INSTITUTE KUNOVAC P.C.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for disability support, medical services, mental health, psychiatry, radiology, and psychology.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 25958		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
8.		VARIOUS STATE AGENCIES	AUDIOLOGY SERVICES COMPANY USA, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing audiology services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26140		
9.		VARIOUS STATE AGENCIES	BAMBOO SUNRISE, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for early intervention, mental health, behavioral support, case management, counseling, emergency shelter care, foster care, marriage and family therapy, rehabilitation, and residential provider.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26078		
10.		VARIOUS STATE AGENCIES	BEACON HOPE CORPORATION	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26160		
11.		VARIOUS STATE AGENCIES	BEHAVIORAL INNOVATION AND GUIDANCE, LLC	OTHER: VARIOUS AGENCIES	\$4,500,000	
	Contract Description:	This is a new contract to provide ongoing applied behavioral analysis, autism treatment assistance programs, and behavioral support services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26242		
12.		VARIOUS STATE AGENCIES	BRAIN RECOVERY ASSISTANTS	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for the blind and visually impaired support, community work experience programs, counseling, customized employment, disabilities support, early intervention, educational tutoring and education support, employment support, job development, personal care, physical therapy, pre-employment, rehabilitation, and respite care.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26139		
13.		VARIOUS STATE AGENCIES	CALL TO COMPASSION, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for case management, community-based living arrangements, foster care, and supportive living arrangements.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26161		
14.		VARIOUS STATE AGENCIES	CHOICES FOR ALL, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing community work experience programs, disabilities support and pre-employment services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26178		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
15.		VARIOUS STATE AGENCIES	CIRCLE OF LIFE, INC.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for behavioral support, community-based living arrangements, disabilities support, personal care, residential provider, respite care, safe-housing provider, senior care, and supportive living arrangements.				
	Term of Contract:	Upon Approval - 06/30/2026	Contract # 26191			
16.		VARIOUS STATE AGENCIES	COLLABORATIVE AUTISM RESOURCES & EDUCATION, LLC	OTHER: VARIOUS AGENCIES	\$6,200,000	
	Contract Description:	This is a new contract to provide ongoing services for applied behavioral analysis, autism treatment assistance programs, behavioral support, early intervention, and home health care.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26129			
17.		VARIOUS STATE AGENCIES	COMMUNITY COUNSELING CENTER	OTHER: VARIOUS AGENCIES	\$6,600,000	
	Contract Description:	This is a new contract to provide ongoing services for behavioral support, case management, counseling, marriage and family therapy, mental health, social work, and substance abuse counseling.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26157			
18.		VARIOUS STATE AGENCIES	COMTECH COMMUNICATIONS	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 26203			
19.		VARIOUS STATE AGENCIES	CONWAY COMMUNICATIONS, INC.	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 26205			
20.		VARIOUS STATE AGENCIES	CHARTER COMMUNICATIONS OPERATING, LLC	OTHER: VARIOUS AGENCIES	\$2,000,000	
	Contract Description:	This is a new contract to provide ongoing telecommunication services, including voice, data and transport.				
	Term of Contract:	Upon Approval - 06/30/2024	Contract # 26120			
21.		VARIOUS STATE AGENCIES	DISCOVERY MIND AND WELLNESS KIDS TURN, LLC	OTHER: VARIOUS AGENCIES	\$4,900,000	
	Contract Description:	This is a new contract to provide ongoing services for case management, mental health, counseling, marriage and family therapy, and substance abuse counseling.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 25966			

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
22.		VARIOUS STATE AGENCIES	DIVERSIFIED COMMUNICATIONS SOLUTIONS, INC., LTD	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.				
	Term of Contract:	07/01/2022 - 06/30/2026		Contract # 26206		
23.		VARIOUS STATE AGENCIES	EAGLE COMMUNICATIONS, LLC	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.				
	Term of Contract:	07/01/2022 - 06/30/2026		Contract # 26224		
24.		VARIOUS STATE AGENCIES	ELIZABETH M. JAMES, INC.	OTHER: VARIOUS AGENCIES	\$600,000	
	Contract Description:	This is a new contract to provide ongoing mental health and psychology services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 25967		
25.		VARIOUS STATE AGENCIES	EMERGENCY LIFELINE WEST	OTHER: VARIOUS AGENCIES	\$400,000	
	Contract Description:	This is a new contract to provide ongoing assistive technology and personal emergency response system services.				
	Term of Contract:	Upon Approval - 06/30/2026		Contract # 26336		
26.		VARIOUS STATE AGENCIES	ELLIPSE THERAPY GROUP, LLC	OTHER: VARIOUS AGENCIES	\$6,700,000	
	Contract Description:	This is a new contract to provide ongoing services for speech pathology therapy and counseling, autism treatment assistance program, behavioral support, early intervention, and occupational therapy.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26166		
27.		VARIOUS STATE AGENCIES	FAMILY COUNSELING SERVICE OF NORTHERN NEVADA, INC.	OTHER: VARIOUS AGENCIES	\$2,100,000	
	Contract Description:	This is a new contract to provide ongoing services for counseling, marriage and family therapy, mental health, social worker, and substance abuse counseling.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 25941		
28.		VARIOUS STATE AGENCIES	FAMILY PERSONAL CARE, LLC	OTHER: VARIOUS AGENCIES	\$2,500,000	
	Contract Description:	This is a new contract to provide ongoing personal care and respite care services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26181		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
29.		VARIOUS STATE AGENCIES	FIVE SANDS TREATMENT SYSTEM, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for acute medical, assisted living, case management, general medicine, home health care, medical, mental health, occupational therapy, pediatric, psychiatry, rehabilitation, assisted living, autism treatment assistance programs, behavioral support, counseling, early intervention, psychology, social worker, and substance abuse counseling.				
	Term of Contract:	Upon Approval - 06/30/2026		Contract # 26188		
30.		VARIOUS STATE AGENCIES	FUNCTIONAL PATHWAYS OF TN, LLC	OTHER: VARIOUS AGENCIES	\$3,800,000	
	Contract Description:	This is a new contract to provide ongoing occupational therapy, physical therapy and speech pathology, therapy and counseling services.				
	Term of Contract:	Upon Approval - 06/30/2026		Contract # 26194		
31.		VARIOUS STATE AGENCIES	GOLDEN CROSS HOME CARE, LLC	OTHER: VARIOUS AGENCIES	\$500,000	
	Contract Description:	This is a new contract to provide ongoing personal care services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26142		
32.		VARIOUS STATE AGENCIES	GRACEFUL TOUCH, LLC	OTHER: VARIOUS AGENCIES	\$500,000	
	Contract Description:	This is a new contract to provide ongoing personal care services.				
	Term of Contract:	Upon Approval - 06/30/2026		Contract # 26313		
33.		VARIOUS STATE AGENCIES	GRAEAGLE CONSTRUCTION, LLC	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing home modification services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26312		
34.		VARIOUS STATE AGENCIES	HAUGEN & KECK, INC.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for community work experience programs, customized employment, disabilities support, educational tutoring and support, employment support, job development, and pre-employment.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 25960		
35.		VARIOUS STATE AGENCIES	HEATHER FOWLER	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing mental health services.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 26165		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
36.		VARIOUS STATE AGENCIES	HELGA L. JEROME	OTHER: VARIOUS AGENCIES	\$7,500,000	
	Contract Description:	This is a new contract to provide ongoing residential provider and supportive living arrangement services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26133			
37.		VARIOUS STATE AGENCIES	HELPING HAND HOME HEALTHCARE	OTHER: VARIOUS AGENCIES	\$2,700,000	
	Contract Description:	This is a new contract to provide ongoing home health care, personal care and respite care services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26062			
38.		VARIOUS STATE AGENCIES	HELPING HAND SLA SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$6,000,000	
	Contract Description:	This is a new contract to provide ongoing supportive living arrangement services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26179			
39.		VARIOUS STATE AGENCIES	HOPE HEALTHCARE SERVICES	OTHER: VARIOUS AGENCIES	\$6,000,000	
	Contract Description:	This is a new contract to provide ongoing supportive living arrangement services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26163			
40.		VARIOUS STATE AGENCIES	HAZEL HEALTH SERVICES	OTHER: VARIOUS AGENCIES	\$4,800,000	
	Contract Description:	This is a new contract to provide ongoing services for acute medical, case management, general medicine, mental health, pediatric services, and counseling.				
	Term of Contract:	Upon Approval - 06/30/2026	Contract # 26214			
41.		VARIOUS STATE AGENCIES	IN TOUCH RESIDENTIAL CARE	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing group home services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26183			
42.		VARIOUS STATE AGENCIES	INNOVATION BEHAVIORAL HEALTH SOLUTIONS, LLC	OTHER: VARIOUS AGENCIES	\$5,400,000	
	Contract Description:	This is a new contract to provide ongoing services for mental health, behavioral support, counseling, marriage and family therapy, psychology, and social work.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26269			
43.		VARIOUS STATE AGENCIES	JAMES A. CALLENDER	OTHER: VARIOUS AGENCIES	\$1,500,000	
	Contract Description:	This is a new contract to provide ongoing job development services.				
	Term of Contract:	Upon Approval - 04/30/2026	Contract # 26079			

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
44.		VARIOUS STATE AGENCIES	JC FAMILY SERVICES	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for behavioral support, case management, community-based living arrangements, counseling, foster care, group home, marriage and family therapy, mental health, residential provider, substance abuse counseling, and supportive living arrangements.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26177		
45.		VARIOUS STATE AGENCIES	JOHNSON GROUP CARE 1	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing group home services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26116		
46.		VARIOUS STATE AGENCIES	KLAS ENTERPRISE, LLC	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26127		
47.		VARIOUS STATE AGENCIES	LEE SOO HOO M.A., INC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing audiology services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26143		
48.		VARIOUS STATE AGENCIES	LIFESKILLS UNLIMITED, INC.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for behavioral support, case management, disabilities support, host home and homeless youth, respite care, and supportive living arrangements.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26130		
49.		VARIOUS STATE AGENCIES	LUBRITZ & NASRI, PLLC	OTHER: VARIOUS AGENCIES	\$600,000	
	Contract Description:	This is a new contract to provide ongoing audiology and medical services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26199		
50.		VARIOUS STATE AGENCIES	MARIA G. DONCASTER, PH.D	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing psychology services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26128		
51.		VARIOUS STATE AGENCIES	MAXIM HEALTHCARE SERVICES, INC.	OTHER: VARIOUS AGENCIES	\$5,200,000	
	Contract Description:	This is a new contract to provide ongoing services for home health care, pediatric, personal care, respite care, and applied behavioral analysis.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26144		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
52.	Contract Description:	VARIOUS STATE AGENCIES	MOA FAMILY CARE, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
		This is a new contract to provide ongoing group home services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26102		
53.	Contract Description:	VARIOUS STATE AGENCIES	MORRIS S. GALLAGHER DDS, LTD	OTHER: VARIOUS AGENCIES	\$200,000	
		This is a new contract to provide ongoing dental services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26180		
54.	Contract Description:	VARIOUS STATE AGENCIES	MACY'S FLYING SERVICE, INC.	OTHER: VARIOUS AGENCIES	\$1,705,000	
		This is a new contract to provide fire fuel, vegetation reduction and forest management services.				
		Term of Contract:	Upon Approval - 06/07/2025	Contract # 26320		
55.	Contract Description:	VARIOUS STATE AGENCIES	MINDFUL MATTERS	OTHER: VARIOUS AGENCIES	\$300,000	
		This is a new contract to provide ongoing marriage and family therapy services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26074		
56.	Contract Description:	VARIOUS STATE AGENCIES	NIRVANA HEALTH, LLC	OTHER: VARIOUS AGENCIES	\$3,000,000	
		This is a new contract to provide ongoing community-based living arrangements services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26156		
57.	Contract Description:	VARIOUS STATE AGENCIES	OLYMPUS HEALTH NEVADA, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
		This is a new contract to provide ongoing general medicine services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26118		
58.	Contract Description:	VARIOUS STATE AGENCIES	PROGRESSUS THERAPY, LLC	OTHER: VARIOUS AGENCIES	\$1,100,000	
		This is a new contract to provide ongoing services for applied behavioral analysis, behavioral support, case management, counseling, early intervention, marriage and family therapy, mental health, psychology, and social worker services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26083		
59.	Contract Description:	VARIOUS STATE AGENCIES	PREMIER MEDICAL, INC.	OTHER: VARIOUS AGENCIES	\$25,000,000	
		This is a new contract to provide COVID-19 testing services for state agencies and other governmental entities.				
		Term of Contract:	Upon Approval - 12/31/2024	Contract # 25330		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
60.		VARIOUS STATE AGENCIES	RENO BEHAVIORAL HEALTHCARE HOSPITAL, LLC	OTHER: VARIOUS AGENCIES	\$600,000	
	Contract Description:	This is a new contract to provide ongoing mental health and psychiatry services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26184		
61.		VARIOUS STATE AGENCIES	RENO-TAHOE THERAPY GROUP	OTHER: VARIOUS AGENCIES	\$1,700,000	
	Contract Description:	This is a new contract to provide ongoing occupational therapy and speech pathology, therapy and counseling services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 25955		
62.		VARIOUS STATE AGENCIES	RITE OF PASSAGE ADOLESCENT TREATMENT CENTERS & SCHOOL, INC.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for behavioral support, case management, counseling, employment support, mental health, and safe-housing providers.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26187		
63.		VARIOUS STATE AGENCIES	RITE OF PASSAGE, INC.	OTHER: VARIOUS AGENCIES	\$1,500,000	
	Contract Description:	This is a new contract to provide ongoing applied behavioral analysis and autism treatment assistance program services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26158		
64.		VARIOUS STATE AGENCIES	ROBERT STUYVESANT	OTHER: VARIOUS AGENCIES	\$1,800,000	
	Contract Description:	This is a new contract to provide ongoing mental health, counseling and social worker services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 25969		
65.		VARIOUS STATE AGENCIES	SERGIO A. GUZMAN OPTOMETRY, LTD	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing optometry services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26192		
66.		VARIOUS STATE AGENCIES	SILVER STATE HEARING & BALANCE, INC.	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing audiology services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26190		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
67.		VARIOUS STATE AGENCIES	SPRING MOUNTAIN TREATMENT CENTER	OTHER: VARIOUS AGENCIES	\$1,300,000	
	Contract Description:	This is a new contract to provide ongoing counseling and mental health services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26101		
68.		VARIOUS STATE AGENCIES	ST. FRANCIS GROUP HOME III	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide ongoing group home services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26065		
69.		VARIOUS STATE AGENCIES	STEP 2, INC.	OTHER: VARIOUS AGENCIES	\$7,600,000	
	Contract Description:	This is a new contact to provide ongoing mental health, rehabilitation, behavioral support, counseling, marriage and family therapy, psychology, residential provider, substance abuse counseling and related services.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 26316		
70.		VARIOUS STATE AGENCIES	SAINT BENEDICT GROUP HOME, LLC	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26072		
71.		VARIOUS STATE AGENCIES	TAHOE YOUTH & FAMILY SERVICES	OTHER: VARIOUS AGENCIES	\$4,200,000	
	Contract Description:	This is a new contract to provide ongoing services for mental health, behavioral support, marriage and family therapy, and substance abuse counseling.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 25968		
72.		VARIOUS STATE AGENCIES	TANNERWOOD HOME, LLC	OTHER: VARIOUS AGENCIES	\$6,000,000	
	Contract Description:	This is a new contract to provide ongoing supportive living arrangement services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26131		
73.		VARIOUS STATE AGENCIES	THE SHADE TREE, INCORPORATED	OTHER: VARIOUS AGENCIES	\$4,000,000	
	Contract Description:	This is a new contract to provide ongoing services for case management, emergency shelter care, job development, and personal care.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 26195		
74.		VARIOUS STATE AGENCIES	THERESAINE ADULT GROUP HOME	OTHER: VARIOUS AGENCIES	\$3,800,000	
	Contract Description:	This is a new contract to provide ongoing assisted living, group home and residential provider services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26159		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
75.		VARIOUS STATE AGENCIES	TURNING POINT FAMILY CARE, INC.	OTHER: VARIOUS AGENCIES	\$4,800,000	
	Contract Description:	This is a new contract to provide ongoing behavioral support, mental health and residential provider services.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 26284		
76.		VARIOUS STATE AGENCIES	TEAM EEI-NV, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing services for assistive technology, supportive services for the blind and visually impaired, community work experience programs, disabilities support, employment support, job development, and pre-employment.				
		Term of Contract:	Upon Approval - 04/30/2026	Contract # 25957		
77.		VARIOUS STATE AGENCIES	WMK, LLC DBA MOBILITY WORKS	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing employment support services.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 26193		

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: **25954**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: **ABRAHAM D. NOCELO, LLC**Contractor Name: **ABE'S CARE HOME FOR DISABILITY**Address: **1266 SKYLARK ST**City/State/Zip: **SPARKS, NV 89434-0767**Contact/Phone: **Abraham Nocelo 775-356-8114**Vendor No.: **T27042249**NV Business ID: **NV20181211675**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

DHHS, Agency is 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:

LLC

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

No b. If "No", please explain:

This vendor provides service under the DBA Abe's Care Home for Disability

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	gdavi6	04/01/2022 11:11:14 AM
Division Approval	gdavi6	04/01/2022 11:11:20 AM
Department Approval	ldeloach	04/04/2022 16:34:33 PM
Contract Manager Approval	gdavi6	04/07/2022 16:46:37 PM
Budget Analyst Approval	dspeed1	05/03/2022 12:18:48 PM
BOE Agenda Approval	laaron	05/10/2022 16:47:12 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: **26198**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: **ALLIANCE THERAPIES PLLC**Contractor Name: **ALLIANCE THERAPIES, PLLC**Address: **LETS TALK! THERAPY SERVICES
3101 W CHARLESTON BLVD**City/State/Zip: **LAS VEGAS, NV 89102**Contact/Phone: **ADRIENNE WILLIAMS 702/831-6670**Vendor No.: **T29043502**NV Business ID: **NV20121687732**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for occupational therapy, physical therapy, rehabilitation, speech pathology, therapy and counseling, applied behavioral analysis, assistive technology, autism treatment assistance programs, and early intervention.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$7,300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
LLC

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

No b. If "No", please explain:

VENDOR PROVIDES SERVICES USING DBA

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/30/2022 20:43:04 PM
Division Approval	gdavi6	04/30/2022 20:43:07 PM
Department Approval	ldeloach	05/06/2022 11:36:20 AM
Contract Manager Approval	rvradenb	05/09/2022 13:59:49 PM
Budget Analyst Approval	nhovden	05/18/2022 14:28:55 PM
BOE Agenda Approval	nhovden	05/18/2022 14:28:57 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **26186**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: **BEAU TAGGART ENGLAND, LLC**Contractor Name: **ASCENT AUDIOLOGY & HEARING**Address: **10470 W CHEYENNE AVE STE 120**City/State/Zip: **LAS VEGAS, NV 89129**Contact/Phone: **KARA KNIGHT-INMAN 850/264-4244**Vendor No.: **T27038137B**NV Business ID: **NV20151212069**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing audiology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

LLC

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

No b. If "No", please explain:

VENDOR PROVIDES SERVICES USING DBA

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/30/2022 20:40:07 PM
Division Approval	gdavi6	04/30/2022 20:40:09 PM
Department Approval	ldeloach	05/05/2022 16:54:55 PM
Contract Manager Approval	rvradenb	05/06/2022 10:24:43 AM
Budget Analyst Approval	nhovden	05/18/2022 13:50:41 PM
BOE Agenda Approval	nhovden	05/18/2022 13:50:44 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: **26075**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: **INSIGHT THERAPY SOLUTIONS, LLC**Contractor Name: **ASPIRING TO JUSTICE & FAIRNESS, LLC**Address: **5631 S PECOS RD**City/State/Zip: **LAS VEGAS, NV 89120-1961**Contact/Phone: **SUZANNE FOSS 702-685-0877**Vendor No.: **T29037952**NV Business ID: **NV20121570862**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Servic**

5. Purpose of contract:

This is a new contract to provide ongoing services for marriage and family therapy, mental health, psychology, and social worker.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,100,000.00****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? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
LLC

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

No b. If "No", please explain:

dba

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/28/2022 13:31:37 PM
Division Approval	gdavi6	04/28/2022 13:31:40 PM
Department Approval	ldeloach	05/05/2022 11:36:04 AM
Contract Manager Approval	rvradenb	05/05/2022 16:59:15 PM
Budget Analyst Approval	dspeed1	05/06/2022 16:29:18 PM
BOE Agenda Approval	laaron	05/20/2022 23:24:35 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: **26141**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	AT HOME CAREGIVERS, LLC
Agency Code:	MSA	Contractor Name:	AT HOME CAREGIVERS, LLC
Appropriation Unit:	9999 - All Categories	Address:	3017 W CHARLESTON BLVD STE 12
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89102-1927
If "No" please explain:	Not Applicable	Contact/Phone:	702/240-3800
		Vendor No.:	T29038483
		NV Business ID:	NV20041176117

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing personal care and respite care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,500,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/28/2022 13:58:57 PM
Division Approval	gdavi6	04/28/2022 13:58:59 PM
Department Approval	ldeloach	05/05/2022 15:26:20 PM
Contract Manager Approval	rvradenb	05/06/2022 10:16:19 AM
Budget Analyst Approval	nhovden	05/18/2022 13:43:55 PM
BOE Agenda Approval	nhovden	05/18/2022 13:43:59 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: **26232**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: **ATTAIN VOCATIONAL SERVICES, LLC**Contractor Name: **ATTAIN VOCATIONAL SERVICES, LLC**Address: **3983 S. McCarran Blvd.
Suite 480**City/State/Zip: **Reno, NV 89502**Contact/Phone: **Skylar DePedro 775-384-6387**Vendor No.: **T29043409**NV Business ID: **NV20191621368**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing disabilities support, employment support and pre-employment services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

DETR, Agency is 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:

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	mstar2	05/05/2022 13:24:07 PM
Division Approval	mstar2	05/05/2022 13:24:10 PM
Department Approval	ldeloach	05/06/2022 14:32:50 PM
Contract Manager Approval	rvradenb	05/09/2022 14:01:13 PM
Budget Analyst Approval	nhovden	05/19/2022 15:48:27 PM
BOE Agenda Approval	nhovden	05/19/2022 15:48:29 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: **25958**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: Altea Research Institute Kunovac, P.C.

Contractor Name: **Altea Research Institute Kunovac, P.C.**Address: **3012 W. Charleston Blvd. Suite 100**City/State/Zip: **Las Vegas, NV 89102**

Contact/Phone: Barbara Young 518-527-8487

Vendor No.: T27044205

NV Business ID: NV20111305979

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for disabilities support, medical services, mental health, psychiatry, radiology, and psychology.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	gdavi6	04/01/2022 11:41:22 AM
Division Approval	gdavi6	04/01/2022 11:41:26 AM
Department Approval	ldeloach	04/04/2022 16:39:58 PM
Contract Manager Approval	gdavi6	04/07/2022 16:47:12 PM
Budget Analyst Approval	dspeed1	05/04/2022 10:46:52 AM
BOE Agenda Approval	laaron	05/10/2022 16:17:43 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: **26140**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: **Audiology Services Company USA, LLC**Contractor Name: **Audiology Services Company USA, LLC**Address: **2501 Cottontail Lane, Suite 10**City/State/Zip: **Somerset, NJ 08873**Contact/Phone: **609/285-9978**Vendor No.: **T32011508**NV Business ID: **NV20161237875**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing audiology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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	gdavi6	04/28/2022 13:58:34 PM
Division Approval	gdavi6	04/28/2022 13:58:37 PM
Department Approval	ldeloach	05/11/2022 09:25:11 AM
Contract Manager Approval	rvradenb	05/11/2022 11:20:07 AM
Budget Analyst Approval	nhovden	05/19/2022 17:07:33 PM
BOE Agenda Approval	nhovden	05/19/2022 17:08:53 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: **26078**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: **BAMBOO SUNRISE, LLC**Contractor Name: **BAMBOO SUNRISE, LLC**Address: **98 E LAKE MEAD PARKWAY SUITE 201**City/State/Zip: **HENDERSON, NV 89015**Contact/Phone: **MICHAEL FLYNN 702-433-3038**Vendor No.: **T32005036**NV Business ID: **NV20111717709**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for early intervention, mental health, behavioral support, case management, counseling, emergency shelter care, foster care, marriage and family therapy, rehabilitation, and residential provider.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/28/2022 13:32:42 PM
Division Approval	gdavi6	04/28/2022 13:32:44 PM
Department Approval	ldeloach	05/05/2022 11:40:37 AM
Contract Manager Approval	rvradenb	05/06/2022 09:56:22 AM
Budget Analyst Approval	dspeed1	05/06/2022 17:00:48 PM
BOE Agenda Approval	laaron	05/20/2022 23:42:44 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: **26160**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: **BEACON HOPE CORPORATION**Contractor Name: **BEACON HOPE CORPORATION**Address: **6298 Mesohere Ct**City/State/Zip: **LAS VEGAS, NV 89110**Contact/Phone: **Restina Angat 702-581-3487**Vendor No.: **T27042392**NV Business ID: **NV20181187620**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing community based living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/30/2022 20:33:56 PM
Division Approval	gdavi6	04/30/2022 20:33:58 PM
Department Approval	ldeloach	05/05/2022 16:15:15 PM
Contract Manager Approval	rvradenb	05/06/2022 10:20:52 AM
Budget Analyst Approval	dspeed1	05/16/2022 10:58:30 AM
BOE Agenda Approval	laaron	05/19/2022 14:04:42 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: **26242**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: **BEHAVIORAL INNOVATION AND GUIDANCE, LLC**Contractor Name: **BEHAVIORAL INNOVATION AND GUIDANCE, LLC**Address: **1213 Jan Ct.**City/State/Zip: **SPARKS, NV 89434**Contact/Phone: **Christina Lydon 775-525-0244**Vendor No.: **T27031808**NV Business ID: **NV20111693530**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing applied behavioral analysis, autism treatment assistance programs and behavioral support services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,500,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	05/10/2022 13:29:11 PM
Division Approval	gdavi6	05/10/2022 13:29:14 PM
Department Approval	ldeloach	05/11/2022 11:58:07 AM
Contract Manager Approval	rvradenb	05/16/2022 10:11:15 AM
Budget Analyst Approval	nhovden	05/19/2022 15:27:01 PM
BOE Agenda Approval	nhovden	05/19/2022 15:27:04 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: **26139**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: **INSTITUTES OF NEVADA, LLC**Contractor Name: **BRAIN RECOVERY ASSISTANTS**Address: **1325 AIRMOTIVE WAY
Suite 175R**City/State/Zip: **RENO, NV 89502**Contact/Phone: **775-771-1540**Vendor No.: **T27037763**NV Business ID: **NV20141345662**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for community work experience programs, supportive services for the blind and visually impaired, counseling, customized employment, disabilities support, early intervention, educational tutoring and support, employment support, job development, personal care, physical therapy, pre-employment, rehabilitation, and respite care.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

Nevada Corporation

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

No b. If "No", please explain:

Vendor provides services under two DBA's.

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	gdavi6	04/28/2022 13:58:13 PM
Division Approval	gdavi6	04/28/2022 13:58:15 PM
Department Approval	ldeloach	05/05/2022 15:23:25 PM
Contract Manager Approval	rvradenb	05/06/2022 10:16:06 AM
Budget Analyst Approval	nhovden	05/18/2022 14:05:50 PM
BOE Agenda Approval	nhovden	05/18/2022 14:05:53 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: **26161**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: **CALL TO COMPASSION, LLC**Contractor Name: **CALL TO COMPASSION, LLC**Address: **3100 Mill St.
Suite 204**City/State/Zip: **Reno, NV 89502**Contact/Phone: **Lupe Green 775-232-3590**Vendor No.: **T32008117**NV Business ID: **NV20151264443**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for case management, community based living arrangements, foster care, and supportive living arrangements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:34:45 PM
Division Approval	gdavi6	04/30/2022 20:34:47 PM
Department Approval	ldeloach	05/05/2022 16:17:08 PM
Contract Manager Approval	rvradenb	05/06/2022 10:21:47 AM
Budget Analyst Approval	laaron	05/23/2022 10:43:54 AM
BOE Agenda Approval	laaron	05/23/2022 10:43:56 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: **26178**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: **CHOICES FOR ALL, LLC**Contractor Name: **CHOICES FOR ALL, LLC**Address: **3189 MILL ST**City/State/Zip: **RENO, NV 89502**Contact/Phone: **BRAD MCFARLAND 775-324-2322**Vendor No.: **T27027935**NV Business ID: **NV20101872933**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing community work experience programs, disabilities support and pre-employment services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/02/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:36:37 PM
Division Approval	gdavi6	04/30/2022 20:36:40 PM
Department Approval	ldeloach	05/05/2022 16:40:17 PM
Contract Manager Approval	rvradenb	05/17/2022 11:34:34 AM
Budget Analyst Approval	nhovden	05/18/2022 11:07:11 AM
BOE Agenda Approval	nhovden	05/18/2022 11:07:14 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: **26191**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: **CIRCLE OF LIFE, INC.**Contractor Name: **CIRCLE OF LIFE, INC.**Address: **6334 CAMINO DEL LAGO**City/State/Zip: **RANCHO MURIETA, CA 95683**Contact/Phone: **OLIVER OANIA 619-289-6495**Vendor No.: **T32009742**NV Business ID: **NV20201696091**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for behavioral support, community based living arrangements, disabilities support, personal care, residential provider, respite care, safe-housing provider, senior care, and supportive living arrangements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:41:45 PM
Division Approval	gdavi6	04/30/2022 20:41:48 PM
Department Approval	ldeloach	05/06/2022 11:25:48 AM
Contract Manager Approval	rvradenb	05/09/2022 13:57:53 PM
Budget Analyst Approval	dspeed1	05/16/2022 10:25:32 AM
BOE Agenda Approval	laaron	05/17/2022 11:20:28 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: **26129**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: **COLLABORATIVE AUTISM RESOURCES & EDUCATION, LLC**Contractor Name: **COLLABORATIVE AUTISM RESOURCES & EDUCATION, LLC**Address: **7181 N. HUALAPAI WAY SUITE 975**City/State/Zip: **LAS VEGAS, NV 89166**Contact/Phone: **JANET SCHAEFER 702-561-9192**Vendor No.: **T27044382A**NV Business ID: **NV20021095350**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for applied behavioral analysis, autism treatment assistance programs, behavioral support, early intervention, and home health care.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

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

Yes

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/28/2022 13:54:12 PM
Division Approval	gdavi6	04/28/2022 13:54:14 PM
Department Approval	ldeloach	05/05/2022 15:14:39 PM
Contract Manager Approval	rvradenb	05/06/2022 10:14:14 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:39:34 AM
BOE Agenda Approval	laaron	05/19/2022 17:26:48 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: **26157**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: **COMMUNITY COUNSELING CENTER**Contractor Name: **COMMUNITY COUNSELING CENTER**Address: **714 E SAHARA AVE STE 103**City/State/Zip: **LAS VEGAS, NV 89104**Contact/Phone: **702/369-8700**Vendor No.: **T80943219**NV Business ID: **NV19901018045**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for behavioral support, case management, counseling, marriage and family therapy, mental health, social work, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,600,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:
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	gdavi6	04/30/2022 20:33:44 PM
Division Approval	gdavi6	04/30/2022 20:33:47 PM
Department Approval	ldeloach	05/05/2022 16:09:46 PM
Contract Manager Approval	rvradenb	05/06/2022 10:19:39 AM
Budget Analyst Approval	nhovden	05/18/2022 13:18:11 PM
BOE Agenda Approval	nhovden	05/18/2022 13:18:13 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: **26203**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: **COMTECH COMMUNICATIONS**Contractor Name: **COMTECH COMMUNICATIONS**Address: **3013 N RANCHO DR
SUITE 113**City/State/Zip: **LAS VEGAS, NV 89130**Contact/Phone: **THOMAS HOLDMANN II 702-221-9221**Vendor No.: **PUR0004539**NV Business ID: **NV19911016899**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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-S1879**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Wiring, Cabling**

5. Purpose of contract:

This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

Other basis for payment: Upon receipt of invoice, subject to agency approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies do not have the expertise to install communications wiring, cabling and fiber.

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

The State does not have the staffing capacity, technical expertise or resources to fulfill this work requirement. This contract will be managed by Enterprise Information Technology Services (EITS). Agencies will submit a ticket through the EITS help desk to request services included under this contract.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):

Comtech Communications
Teledata Technologies
Eagle Communications
Diversified Communications
Conway Communications

b. Solicitation Waiver: **Not Applicable**

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

This RFP was a multiple awarded contract. Comtech Communications was one of the four contractors with the highest evaluation score.

d. Last bid date: 03/02/2022 Anticipated re-bid date: 12/15/2025

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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-Purchasing-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	gdavi6	05/10/2022 13:25:54 PM
Division Approval	gdavi6	05/10/2022 13:25:55 PM
Department Approval	ldeloach	05/10/2022 13:46:19 PM
Contract Manager Approval	jsmedes	05/10/2022 15:33:42 PM
EITS Approval	ljeon	05/11/2022 09:59:57 AM
Budget Analyst Approval	laaron	05/23/2022 15:04:11 PM
BOE Agenda Approval	laaron	05/23/2022 15:04:13 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: **26205**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: **CONWAY COMMUNICATIONS, INC.**Contractor Name: **CONWAY COMMUNICATIONS, INC.**Address: **3370 EXECUTIVE POINTE WAY
SUITE 40**City/State/Zip: **CARSON CITY, NV 89706**Contact/Phone: **ADAM CONWAY 775-883-6610**Vendor No.: **PUR0001876**NV Business ID: **NV19901023176**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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-S1879**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Wiring, Cabling**

5. Purpose of contract:

This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

Other basis for payment: Upon receipt of invoice, subject to agency approval

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies do not have the expertise to install communications wiring, cabling and fiber.

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

The State does not have the staffing capacity, technical expertise or resources to fulfill this work requirement. This contract will be managed by Enterprise Information Technology Services (EITS). Agencies will submit a ticket through the EITS help desk to request services included under this contract.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):

Eagle Communications
Teledata Technologies
Conway Communications
Diversified Communications
Comtech Communications

b. Solicitation Waiver: **Not Applicable**

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

This RFP was a multiple awarded contract. Conway Communications was one of the four contractors with the highest evaluation score.

d. Last bid date: 03/02/2022 Anticipated re-bid date: 12/15/2025

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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-Purchasing-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	gdavi6	05/10/2022 13:27:06 PM
Division Approval	gdavi6	05/10/2022 13:27:08 PM
Department Approval	ldeloach	05/10/2022 13:48:30 PM
Contract Manager Approval	jsmedes	05/10/2022 15:33:25 PM
EITS Approval	ljeon	05/11/2022 10:00:09 AM
Budget Analyst Approval	laaron	05/23/2022 14:58:03 PM
BOE Agenda Approval	laaron	05/23/2022 14:58:05 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: **26120**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: Charter Communications Operating, LLC

Contractor Name: **Charter Communications Operating, LLC**Address: **12405 Powerscourt Drive**City/State/Zip: **St. Louis, MO 63131**Contact/Phone: **Geno Maestas 562-677-0358**Vendor No.: **PUR0005697**NV Business ID: **NV20141631158**To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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-S804 - tb

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years and 30 days**4. Type of contract: **MSA**Contract description: **Telecom Services**

5. Purpose of contract:

This is a new contract to provide ongoing telecommunication services, including voice, data and transport.

6. NEW CONTRACT

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

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?

State employees need access to local telephone services in order to do their jobs

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

Telecommunications are a regulated service and must be provided by a company certified by the Nevada Public Utilities Commission

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):

**AT&T
Cox Communications**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #99SWC-S804, 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: 09/18/2019 Anticipated re-bid date: 09/21/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 holds statewide contract

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	gdavi6	04/28/2022 13:51:55 PM
Division Approval	gdavi6	04/28/2022 13:51:58 PM
Department Approval	ldeloach	05/06/2022 11:19:44 AM
Contract Manager Approval	tbeck1	05/06/2022 11:21:36 AM
Budget Analyst Approval	laaron	05/23/2022 13:35:53 PM
BOE Agenda Approval	laaron	05/23/2022 13:35:55 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: **25966**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: **DISCOVERY MIND AND WELLNESS KIDS TURN, LLC**Contractor Name: **DISCOVERY MIND AND WELLNESS KIDS TURN, LLC**Address: **4625 W. Checker Way**City/State/Zip: **North Las Vegas, NV 89031**Contact/Phone: **Katie Amos 702-551-9521**Vendor No.: **T29044007**NV Business ID: **NV20201679245**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for case management, mental health, counseling, marriage and family therapy, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,900,000.00****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 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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/01/2022 11:42:52 AM
Division Approval	gdavi6	04/01/2022 11:42:55 AM
Department Approval	ldeloach	04/04/2022 16:53:31 PM
Contract Manager Approval	gdavi6	04/07/2022 16:47:51 PM
Budget Analyst Approval	dspeed1	05/03/2022 16:37:51 PM
BOE Agenda Approval	laaron	05/10/2022 16:08:09 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: **26206**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: **DIVERSIFIED COMMUNICATIONS SOLUTIONS, INC., LTD.**Contractor Name: **DIVERSIFIED COMMUNICATIONS SOLUTIONS, INC., LTD.**Address: **6213 DESERT HAVEN RD**City/State/Zip: **LAS VEGAS, NV 89130**Contact/Phone: **CHERYL HICKMAN 702-312-6126**Vendor No.: **PUR0004915**NV Business ID: **NV20051671878**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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-S1879**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Wiring, Cabling**

5. Purpose of contract:

This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

Other basis for payment: Upon receipt of invoice, subject to agency approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies do not have the expertise to install communications wiring, cabling and fiber.

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

The State does not have the staffing capacity, technical expertise or resources to fulfill this work requirement. This contract will be managed by Enterprise Information Technology Services (EITS). Agencies will submit a ticket through the EITS help desk to request services included under this contract.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):

Diversified Communications
Teledata Technologies
Comtech Communications
Conway Communications
Eagle Communications

b. Solicitation Waiver: **Not Applicable**

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

This RFP was a multiple awarded contract. Diversified Communications Solutions was one of the four contractors with the highest evaluation score.

d. Last bid date: 03/02/2022 Anticipated re-bid date: 12/15/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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-Purchasing-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	gdavi6	05/10/2022 13:27:26 PM
Division Approval	gdavi6	05/10/2022 13:27:28 PM
Department Approval	ldeloach	05/10/2022 13:51:15 PM
Contract Manager Approval	jsmedes	05/10/2022 15:34:16 PM
Budget Analyst Approval	laaron	05/23/2022 14:42:08 PM
BOE Agenda Approval	laaron	05/23/2022 14:42:12 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: **26224**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: **EAGLE COMMUNICATIONS, LLC**Contractor Name: **EAGLE COMMUNICATIONS, LLC**Address: **180 RIVER SREET
SUITE A**City/State/Zip: **ELKO, NV 89801**Contact/Phone: **PADEN HILYARD 775-738-4055**Vendor No.: **PUR0004945**NV Business ID: **NV20101615737**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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-S1879**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Wiring, Cabling**

5. Purpose of contract:

This is a new contract to provide ongoing repairs and installation of state-owned communications infrastructure including wiring, cabling, fiber optic, and telephone equipment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

Other basis for payment: Upon receipt of invoice, subject to agency approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies do not have the expertise to install communications wiring, cabling and fiber.

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

The State does not have the staffing capacity, technical expertise or resources to fulfill this work requirement. This contract will be managed by Enterprise Information Technology Services (EITS). Agencies will submit a ticket through the EITS help desk to request services included under this contract.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):

Conway Communications
Diversified Communications
Eagle Communications
Teledata Technologies
Comtech Communications

b. Solicitation Waiver: **Not Applicable**

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

This RFP was a multiple awarded contract. Eagle Communications was one of the four contractors with the highest evaluation score.

d. Last bid date: 03/02/2022 Anticipated re-bid date: 12/15/2025

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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-Purchasing-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	gdavi6	05/10/2022 13:27:56 PM
Division Approval	gdavi6	05/10/2022 13:27:58 PM
Department Approval	ldeloach	05/10/2022 13:58:09 PM
Contract Manager Approval	jsmedes	05/10/2022 15:34:00 PM
EITS Approval	ljeon	05/11/2022 10:00:24 AM
Budget Analyst Approval	laaron	05/23/2022 14:05:20 PM
BOE Agenda Approval	laaron	05/23/2022 14:05:23 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: **25967**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: **ELIZABETH M. JAMES, INC.**Contractor Name: **ELIZABETH M. JAMES, INC.**Address: **9510 W SAHARA AVE
SUITE 110**City/State/Zip: **LAS VEGAS, NV 89117-8804**Contact/Phone: **Elizabeth James 702-641-2422**Vendor No.: **T81050642**NV Business ID: **NV19991297480**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing mental health and psychology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/01/2022 11:43:10 AM
Division Approval	gdavi6	04/01/2022 11:43:13 AM
Department Approval	ldeloach	04/04/2022 16:55:25 PM
Contract Manager Approval	gdavi6	04/07/2022 16:48:10 PM
Budget Analyst Approval	dspeed1	05/03/2022 16:19:45 PM
BOE Agenda Approval	laaron	05/10/2022 16:22:39 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: **26336**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	EMERGENCY LIFELINE WEST
Agency Code:	MSA	Contractor Name:	EMERGENCY LIFELINE WEST
Appropriation Unit:	9999 - All Categories	Address:	7929 CORAL POINT AVE
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89128-6756
If "No" please explain:	Not Applicable	Contact/Phone:	Adina Rae 702-900-7543
		Vendor No.:	T29032150
		NV Business ID:	NV20081041689

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing assistive technology and personal emergency response system services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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, agency is 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:

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	gdavi6	05/16/2022 10:06:04 AM
Division Approval	gdavi6	05/16/2022 10:06:06 AM
Department Approval	ldeloach	05/16/2022 10:34:19 AM
Contract Manager Approval	rvradenb	05/16/2022 11:05:48 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:23:07 AM
BOE Agenda Approval	laaron	05/17/2022 11:10:54 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: **26166**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: **Ellipse Therapy Group, LLC**Contractor Name: **Ellipse Therapy Group, LLC**Address: **5150 Mae Ann Ave
Suite 405, 1018**City/State/Zip: **Reno, NV 89523**Contact/Phone: **Adalice Gonzalez Melendez 787-203-7900**Vendor No.: **Pending**NV Business ID: **NV20212121629**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for speech pathology, therapy, and counseling, autism treatment assistance programs, behavioral support, early intervention, and occupational therapy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,700,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:36:09 PM
Division Approval	gdavi6	04/30/2022 20:36:12 PM
Department Approval	ldeloach	05/05/2022 16:33:30 PM
Contract Manager Approval	rvradenb	05/06/2022 10:22:17 AM
Budget Analyst Approval	nhovden	05/19/2022 15:55:57 PM
BOE Agenda Approval	nhovden	05/19/2022 15:56:00 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: **25941**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: **FAMILY COUNSELING SERVICE OF NORTHERN NEVADA, INC.**Contractor Name: **FAMILY COUNSELING SERVICE OF NORTHERN NEVADA, INC.**Address: **1475 TERMINAL WAY SUITE D**City/State/Zip: **RENO, NV 89502-3225**Contact/Phone: **Stuart Gordon 775-329-0623**Vendor No.: **T80166020**NV Business ID: **NV19591000682**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for counseling, marriage and family therapy, mental health, social worker, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,100,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/01/2022 11:08:52 AM
Division Approval	gdavi6	04/01/2022 11:08:56 AM
Department Approval	ldeloach	04/04/2022 16:01:58 PM
Contract Manager Approval	gdavi6	04/07/2022 16:45:43 PM
Budget Analyst Approval	dspeed1	05/16/2022 09:46:46 AM
BOE Agenda Approval	laaron	05/17/2022 16:26:01 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 CONTRACT1. Contract Number: **26181**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	FAMILY PERSONAL CARE, LLC
Agency Code:	MSA	Contractor Name:	FAMILY PERSONAL CARE, LLC
Appropriation Unit:	9999 - All Categories	Address:	2415 REYNOLDS AVENUE SUITE 101
Is budget authority available?:	Yes	City/State/Zip	NORTH LAS VEGAS, NV 89102
If "No" please explain:	Not Applicable	Contact/Phone:	JUAN AVILA 702-906-1999
		Vendor No.:	T27041452
		NV Business ID:	NV20111669090

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing personal care and respite care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/30/2022 20:37:45 PM
Division Approval	gdavi6	04/30/2022 20:37:47 PM
Department Approval	ldeloach	05/05/2022 16:47:12 PM
Contract Manager Approval	rvradenb	05/06/2022 10:24:27 AM
Budget Analyst Approval	dspeed1	05/16/2022 10:34:20 AM
BOE Agenda Approval	laaron	05/19/2022 14:19:23 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: **26188**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	FIVE SANDS TREATMENT SYSTEM, LLC
Agency Code:	MSA	Contractor Name:	FIVE SANDS TREATMENT SYSTEM, LLC
Appropriation Unit:	9999 - All Categories	Address:	6171 W CHARLESTON BLVD
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89146
If "No" please explain:	Not Applicable	Contact/Phone:	MORDECHAI BURSZTYN 848/261-1230
		Vendor No.:	PENDING
		NV Business ID:	NV20222403726

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for acute medical, assisted living, case management, general medicine, home health care, medical, mental health, occupational therapy, pediatric, psychiatry, rehabilitation, assisted living, autism treatment assistance programs, behavioral support, counseling, early intervention, psychology, social worker, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:40:41 PM
Division Approval	gdavi6	04/30/2022 20:40:43 PM
Department Approval	ldeloach	05/05/2022 17:01:07 PM
Contract Manager Approval	rvradenb	05/06/2022 10:25:45 AM
Budget Analyst Approval	nhovden	05/18/2022 15:14:19 PM
BOE Agenda Approval	nhovden	05/18/2022 15:14:21 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: **26194**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: **FUNCTIONAL PATHWAYS OF TN, LLC**Contractor Name: **FUNCTIONAL PATHWAYS OF TN, LLC**Address: **10133 SHERRILL BLVD
SUITE 200**City/State/Zip: **KNOXVILLE, TN 37932**Contact/Phone: **CHRIS SNEED 864-986-2377**Vendor No.: **T29026908**NV Business ID: **NV20111085153**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

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

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing occupational therapy, physical therapy and speech pathology, therapy and counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,800,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:42:29 PM
Division Approval	gdavi6	04/30/2022 20:42:32 PM
Department Approval	ldeloach	05/06/2022 11:30:49 AM
Contract Manager Approval	rvradenb	05/09/2022 13:52:16 PM
Budget Analyst Approval	dspeed1	05/16/2022 10:20:29 AM
BOE Agenda Approval	laaron	05/17/2022 16:15:39 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: **26142**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: **GOLDEN CROSS HOME CARE, LLC**Contractor Name: **GOLDEN CROSS HOME CARE, LLC**Address: **7762 W SAHARA AVE**City/State/Zip: **LAS VEGAS, NV 89117-2700**Contact/Phone: **702/240-7711**Vendor No.: **T29036217**NV Business ID: **NV20121287262**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing personal care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/28/2022 13:59:18 PM
Division Approval	gdavi6	04/28/2022 13:59:21 PM
Department Approval	ldeloach	05/05/2022 15:27:49 PM
Contract Manager Approval	rvradenb	05/06/2022 10:17:45 AM
Budget Analyst Approval	nhovden	05/18/2022 13:08:51 PM
BOE Agenda Approval	nhovden	05/18/2022 13:08:55 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: **26313**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: **GRACEFUL TOUCH, LLC**Contractor Name: **GRACEFUL TOUCH, LLC**Address: **800 N RAINBOW BLVD STE 28**City/State/Zip: **LAS VEGAS, NV 89107-1189**Contact/Phone: **CHARLES MITCHELL 702/717-8687**Vendor No.: **T27033236**NV Business ID: **NV20101141308**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing personal care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	05/10/2022 13:45:21 PM
Division Approval	gdavi6	05/10/2022 13:45:24 PM
Department Approval	ldeloach	05/11/2022 16:27:24 PM
Contract Manager Approval	rvradenb	05/16/2022 11:08:54 AM
Budget Analyst Approval	nhovden	05/19/2022 15:31:54 PM
BOE Agenda Approval	nhovden	05/19/2022 15:31:56 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26312**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: **GRAEAGLE CONSTRUCTION & DEVELOPMENT**Contractor Name: **GRAEAGLE CONSTRUCTION, LLC**Address: **5016 CECILE AVE**City/State/Zip: **LAS VEGAS, NV 89115-3446**Contact/Phone: **VICKIE SALCEDO 702-248-0170**Vendor No.: **T81200201**NV Business ID: **NV20011062218**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing home modification services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

VENDOR PROVIDES SERVICES USING DBA.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	05/10/2022 13:45:01 PM
Division Approval	gdavi6	05/10/2022 13:45:03 PM
Department Approval	ldeloach	05/11/2022 16:25:56 PM
Contract Manager Approval	rvradenb	05/16/2022 11:09:48 AM
Budget Analyst Approval	laaron	05/23/2022 10:06:39 AM
BOE Agenda Approval	laaron	05/23/2022 10:06:41 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: **25960**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: **HAUGEN & KECK, INC.**Contractor Name: **HAUGEN & KECK, INC.**Address: **1135 WISTERIA DR**City/State/Zip: **MINDEN, NV 89423-5138**Contact/Phone: **Sandra Haugen Keck 775-781-6336**Vendor No.: **T29017429**NV Business ID: **NV20081296561**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for community work experience programs, customized employment, disabilities support, educational tutoring and support, employment support, job development, and pre-employment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/01/2022 11:41:51 AM
Division Approval	gdavi6	04/01/2022 11:41:54 AM
Department Approval	ldeloach	04/04/2022 16:41:12 PM
Contract Manager Approval	gdavi6	04/07/2022 16:47:27 PM
Budget Analyst Approval	dspeed1	05/04/2022 12:02:32 PM
BOE Agenda Approval	laaron	05/10/2022 15:49:35 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: **26165**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	HEATHER FOWLER
Agency Code:	MSA	Contractor Name:	HEATHER FOWLER
Appropriation Unit:	9999 - All Categories	Address:	2386 E. ASPEN HILLS PL
Is budget authority available?:	Yes	City/State/Zip	SANDY, UT 84092
If "No" please explain:	Not Applicable	Contact/Phone:	Heather Fowler 801-209-6691
		Vendor No.:	T29039690
		NV Business ID:	NV20171352938

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing mental health services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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 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	gdavi6	04/30/2022 20:35:52 PM
Division Approval	gdavi6	04/30/2022 20:35:54 PM
Department Approval	ldeloach	05/05/2022 16:29:02 PM
Contract Manager Approval	rvradenb	05/06/2022 10:21:33 AM
Budget Analyst Approval	dspeed1	05/16/2022 10:51:01 AM
BOE Agenda Approval	laaron	05/19/2022 14:09:29 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: **26133**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	HELGA L. JEROME
Agency Code:	MSA	Contractor Name:	HELGA L. JEROME
Appropriation Unit:	9999 - All Categories	Address:	1100 BRIDLEWOOD PATH
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89509
If "No" please explain:	Not Applicable	Contact/Phone:	HELGA JEROME 775-348-7155
		Vendor No.:	T81099871
		NV Business ID:	NV20151423078

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing residential provider and supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$7,500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 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	gdavi6	04/28/2022 13:57:45 PM
Division Approval	gdavi6	04/28/2022 13:57:48 PM
Department Approval	ldeloach	05/05/2022 15:20:42 PM
Contract Manager Approval	rvradenb	05/06/2022 10:17:13 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:20:22 AM
BOE Agenda Approval	laaron	05/19/2022 14:38:01 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 CONTRACT1. Contract Number: **26062**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: A Helping Hand Home Health Care, Inc.

Contractor Name: **HELPING HAND HOME HEALTHCARE**Address: **INC, A
3101 W CHARLESTON BLVD**City/State/Zip: **LAS VEGAS, NV 89102-1931**

Contact/Phone: Tracie Wolf 702/286-1980

Vendor No.: T27012864

NV Business ID: NV20051317164

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing home health care, personal care and respite care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,700,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Vendor provides services under a DBA.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/28/2022 13:28:37 PM
Division Approval	gdavi6	04/28/2022 13:28:40 PM
Department Approval	ldeloach	05/04/2022 16:45:32 PM
Contract Manager Approval	rvradenb	05/05/2022 16:57:20 PM
Budget Analyst Approval	nhovden	05/19/2022 15:08:25 PM
BOE Agenda Approval	nhovden	05/19/2022 15:08:27 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: **26179**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: **HELPING HAND SLA SERVICES, LLC**Contractor Name: **HELPING HAND SLA SERVICES, LLC**Address: **1301 CORDONE AVENUE
SUITE 180**City/State/Zip: **RENO, NV 89502**Contact/Phone: **CAROLINA A BEARDSLEY 775-343-8618**Vendor No.: **T32002247**NV Business ID: **NV20131139850**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	gdavi6	04/30/2022 20:37:15 PM
Division Approval	gdavi6	04/30/2022 20:37:18 PM
Department Approval	ldeloach	05/05/2022 16:43:00 PM
Contract Manager Approval	rvradenb	05/06/2022 10:23:47 AM
Budget Analyst Approval	laaron	05/23/2022 10:13:48 AM
BOE Agenda Approval	laaron	05/23/2022 10:13:51 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: **26163**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: **HOPE HEALTHCARE SERVICES**Contractor Name: **HOPE HEALTHCARE SERVICES**Address: **1155 West 4th Street, STE 224**City/State/Zip: **RENO, NV 89503**Contact/Phone: **Felix Igbekoyi 775/333-5222**Vendor No.: **T27000183**NV Business ID: **NV20021444421**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/30/2022 20:34:59 PM
Division Approval	gdavi6	04/30/2022 20:35:02 PM
Department Approval	ldeloach	05/09/2022 13:54:28 PM
Contract Manager Approval	rvradenb	05/16/2022 10:05:01 AM
Budget Analyst Approval	nhovden	05/18/2022 14:34:45 PM
BOE Agenda Approval	nhovden	05/18/2022 14:34:47 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: **26214**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: **Telehealth Services USA**Contractor Name: **Hazel Health Services**Address: **10775 Pioneer Trailer Suite 215**City/State/Zip: **Truckee, CA 96161**Contact/Phone: **530-863-0338**Vendor No.: **T29045320**NV Business ID: **NV20191115448**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for acute medical, case management, general medicine, mental health, pediatric, and counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,800,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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?

No b. If "No", please explain:

Vendor is providing services under two DBA's.

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	mstar2	05/05/2022 13:20:49 PM
Division Approval	mstar2	05/05/2022 13:20:52 PM
Department Approval	ldeloach	05/06/2022 12:22:55 PM
Contract Manager Approval	rvradenb	05/09/2022 14:00:03 PM
Budget Analyst Approval	nhovden	05/19/2022 16:07:25 PM
BOE Agenda Approval	nhovden	05/19/2022 16:07:27 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: **26183**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: **TERESITA C. ENRIQUEZ**Contractor Name: **IN TOUCH RESIDENTIAL CARE**Address: **4131 SATINWOOD DR**City/State/Zip: **LAS VEGAS, NV 89147-4904**Contact/Phone: **TERESITA ENRIQUEZ 702-362-1970**Vendor No.: **T81089699**NV Business ID: **NV20131301798**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing group home services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 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:

VENDOR PROVIDES SERVICES USING DBA

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	gdavi6	04/30/2022 20:38:02 PM
Division Approval	gdavi6	04/30/2022 20:38:04 PM
Department Approval	ldeloach	05/09/2022 13:57:05 PM
Contract Manager Approval	rvradenb	05/09/2022 13:58:48 PM
Budget Analyst Approval	dspeed1	05/16/2022 09:32:45 AM
BOE Agenda Approval	laaron	05/18/2022 11:00:33 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26269**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: **INNOVATION BEHAVIORAL HEALTH SOLUTIONS, LLC**Contractor Name: **INNOVATION BEHAVIORAL HEALTH SOLUTIONS, LLC**Address: **6655 W SAHARA AVE
SUITE C203**City/State/Zip: **LAS VEGAS, NV 89146-2812**

Contact/Phone: Sandra Leon-Villa 702-541-3563

Vendor No.: T27041798

NV Business ID: NV20101073285

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for mental health, behavioral support, counseling, marriage and family therapy, psychology, and social work.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$5,400,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:
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	gdavi6	05/10/2022 13:33:54 PM
Division Approval	gdavi6	05/10/2022 13:33:57 PM
Department Approval	ldeloach	05/11/2022 14:34:52 PM
Contract Manager Approval	rvradenb	05/16/2022 10:16:18 AM
Budget Analyst Approval	nhovden	05/19/2022 15:18:31 PM
BOE Agenda Approval	nhovden	05/19/2022 15:18:33 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: **26079**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: **JAMES A. CALLENDER**Contractor Name: **JAMES A. CALLENDER**Address: **1647 FIELDCREST DR**City/State/Zip: **SPARKS, NV 89434**Contact/Phone: **JAMES A. CALLENDER 775-722-3135**Vendor No.: **T29030843**NV Business ID: **NV20121669949**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing job development services.

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?

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 vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 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	gdavi6	04/28/2022 13:33:49 PM
Division Approval	gdavi6	04/28/2022 13:33:51 PM
Department Approval	ldeloach	05/05/2022 11:42:12 AM
Contract Manager Approval	rvradenb	05/06/2022 09:57:11 AM
Budget Analyst Approval	dspeed1	05/06/2022 16:21:31 PM
BOE Agenda Approval	laaron	05/20/2022 23:28:39 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: **26177**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: **JC LIGHTHOUSE**Contractor Name: **JC FAMILY SERVICES**Address: **6490 S MCCARRAN BLVD
BUILDING C, SUITE D33**City/State/Zip: **RENO, NV 89509**Contact/Phone: **CHANDRA WILLIAMS 775-825-7500**Vendor No.: **T27043298**NV Business ID: **NV20191657175**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for behavioral support, case management, community based living arrangements, counseling, foster care, group home, marriage and family therapy, mental health, residential provider, substance abuse counseling, and supportive living arrangements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

VENDOR PROVIDES SERVICES AS DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/30/2022 20:36:23 PM
Division Approval	gdavi6	04/30/2022 20:36:26 PM
Department Approval	ldeloach	05/05/2022 16:35:53 PM
Contract Manager Approval	rvradenb	05/06/2022 10:22:33 AM
Budget Analyst Approval	dspeed1	05/16/2022 12:01:47 PM
BOE Agenda Approval	laaron	05/19/2022 14:26:59 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: **26116**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: Johnson Group Care, Inc.

Contractor Name: **Johnson Group Care 1**Address: **1895 Carville Dr.**City/State/Zip: **Reno, NV 89512**

Contact/Phone: Peggy Montgomery 775-240-0130

Vendor No.: T80942316

NV Business ID: NV20101882160

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing group home services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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?

No b. If "No", please explain:

This vendor provides services using the DBA Johnson Group Care 1

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	gdavi6	04/28/2022 13:50:19 PM
Division Approval	gdavi6	04/28/2022 13:50:22 PM
Department Approval	ldeloach	05/04/2022 16:37:32 PM
Contract Manager Approval	rvradenb	05/06/2022 10:10:44 AM
Budget Analyst Approval	dspeed1	05/06/2022 17:15:37 PM
BOE Agenda Approval	laaron	05/20/2022 23:37:57 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26127**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	KLAS ENTERPRISE, LLC
Agency Code:	MSA	Contractor Name:	KLAS ENTERPRISE, LLC
Appropriation Unit:	9999 - All Categories	Address:	6561 JENNY LAKE AVE
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89110-4010
If "No" please explain:	Not Applicable	Contact/Phone:	ANNA LIZETTE ANGAT 702-505-1208
		Vendor No.:	T32007073
		NV Business ID:	NV20141355029

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to providing ongoing community based living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/28/2022 13:53:55 PM
Division Approval	gdavi6	04/28/2022 13:53:58 PM
Department Approval	ldeloach	05/05/2022 15:04:39 PM
Contract Manager Approval	rvradenb	05/06/2022 10:13:58 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:47:06 AM
BOE Agenda Approval	laaron	05/19/2022 17:19:04 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: **26143**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: **LEE SOO HOO M.A., INC**Contractor Name: **LEE SOO HOO M.A., INC**Address: **4760 S PECOS RD STE 103**City/State/Zip: **LAS VEGAS, NV 89121-5828**Contact/Phone: **702/363-8460**Vendor No.: **T27038497**NV Business ID: **NV20081591546**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing audiology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/28/2022 13:59:42 PM
Division Approval	gdavi6	04/28/2022 13:59:44 PM
Department Approval	ldeloach	05/05/2022 15:29:29 PM
Contract Manager Approval	rvradenb	05/06/2022 10:20:01 AM
Budget Analyst Approval	nhovden	05/18/2022 13:04:31 PM
BOE Agenda Approval	nhovden	05/18/2022 13:04:40 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: **26130**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: **LIFESKILLS UNLIMITED, INC.**Contractor Name: **LIFESKILLS UNLIMITED, INC.**Address: **4330 W CHEYENNE AVE**City/State/Zip: **NORTH LAS VEGAS, NV 89032-2484**Contact/Phone: **MARY MORGAN-THOMPSON 702-364-0211**Vendor No.: **T80976181**NV Business ID: **NV19931096364**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for behavioral support, case management, disabilities support, host home and homeless youth, respite care, and supportive living arrangements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/28/2022 13:56:08 PM
Division Approval	gdavi6	04/28/2022 13:56:10 PM
Department Approval	ldeloach	05/05/2022 15:16:16 PM
Contract Manager Approval	rvradenb	05/06/2022 10:14:55 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:34:15 AM
BOE Agenda Approval	laaron	05/19/2022 17:36:14 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: **26199**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: **LUBRITZ & NASRI, PLLC**Contractor Name: **LUBRITZ & NASRI, PLLC**Address: **3201 S MARYLAND PKWY STE 300**City/State/Zip: **LAS VEGAS, NV 89109**Contact/Phone: **GINGER SMITH 702/732-4491**Vendor No.: **T11707400**NV Business ID: **NV19971000141**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing audiology and medical services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/30/2022 20:43:18 PM
Division Approval	gdavi6	04/30/2022 20:43:20 PM
Department Approval	ldeloach	05/06/2022 11:38:19 AM
Contract Manager Approval	rvradenb	05/09/2022 14:00:33 PM
Budget Analyst Approval	nhovden	05/18/2022 11:35:16 AM
BOE Agenda Approval	nhovden	05/18/2022 11:35:19 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: **26128**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: **MARIA G. DONCASTER, PH.D**Contractor Name: **MARIA G. DONCASTER, PH.D**Address: **3450 E RUSSELL RD
Suite 103**City/State/Zip: **LAS VEGAS, NV 89120-2201**Contact/Phone: **Maria Doncaster 702-550-3900**Vendor No.: **T81201104**NV Business ID: **NV19971250282**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing psychology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2021

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/28/2022 13:54:34 PM
Division Approval	gdavi6	04/28/2022 13:54:36 PM
Department Approval	ldeloach	05/05/2022 15:06:47 PM
Contract Manager Approval	rvradenb	05/06/2022 10:14:37 AM
Budget Analyst Approval	laaron	05/23/2022 11:09:14 AM
BOE Agenda Approval	laaron	05/23/2022 11:09:16 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: **26144**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: **MAXIM HEALTHCARE SERVICES, INC.**Contractor Name: **MAXIM HEALTHCARE SERVICES, INC.**Address: **7227 LEE DEFOREST DRIVE**City/State/Zip: **COLUMBIA, MD 21046**Contact/Phone: **410/910-6170**Vendor No.: **T27038973**NV Business ID: **NV19961184841**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for home health care, pediatric, personal care, respite care, and applied behavioral analysis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$5,200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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	gdavi6	04/28/2022 14:00:03 PM
Division Approval	gdavi6	04/28/2022 14:00:05 PM
Department Approval	ldeloach	05/05/2022 15:31:55 PM
Contract Manager Approval	rvradenb	05/06/2022 10:19:20 AM
Budget Analyst Approval	nhovden	05/18/2022 13:24:48 PM
BOE Agenda Approval	nhovden	05/18/2022 13:24:56 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26102**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: **MOA FAMILY CARE, LLC**Contractor Name: **MOA FAMILY CARE, LLC**Address: **6561 JENNY LAKE AVE**City/State/Zip: **LAS VEGAS, NV 89110-4010**Contact/Phone: **Anna Angat 702-505-1208**Vendor No.: **T27032925**NV Business ID: **NV20121375381**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing group home services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/28/2022 13:43:18 PM
Division Approval	gdavi6	04/28/2022 13:43:20 PM
Department Approval	ldeloach	05/05/2022 14:06:57 PM
Contract Manager Approval	rvradenb	05/06/2022 10:05:24 AM
Budget Analyst Approval	dspeed1	05/16/2022 12:36:07 PM
BOE Agenda Approval	laaron	05/19/2022 17:00:39 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: **26180**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: **MORRIS S. GALLAGHER DDS, LTD.**Contractor Name: **MORRIS S. GALLAGHER DDS, LTD.**Address: **810 COURT ST**City/State/Zip: **ELKO, NV 89801-3380**Contact/Phone: **AMIE SHIELDS 775-738-6122**Vendor No.: **T27039922**NV Business ID: **NV20001497079**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing dental services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	gdavi6	04/30/2022 20:37:31 PM
Division Approval	gdavi6	04/30/2022 20:37:34 PM
Department Approval	ldeloach	05/05/2022 16:44:21 PM
Contract Manager Approval	rvradenb	05/06/2022 10:24:03 AM
Budget Analyst Approval	dspeed1	05/16/2022 10:41:08 AM
BOE Agenda Approval	laaron	05/19/2022 14:14:24 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: **26320**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: Macy's Flying Service, Inc.

Contractor Name: **Macy's Flying Service, Inc.**Address: **530 Co. Road 176**City/State/Zip: **Tulelake, CA 96134**

Contact/Phone: Nick Macy 530-664-2661

Vendor No.: T32012375

NV Business ID: NV20201701073

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**

Agency Reference #: RFP 99SWC-S1426 NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/07/2025**Contract term: **3 years and 7 days**4. Type of contract: **MSA**Contract description: **Fire Fuels Reductio**

5. Purpose of contract:

This is a new contract to provide fire fuel, vegetation reduction and forest management services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,705,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

To reduce the risk of wildfires, fuels reduction and other services must be completed in various locations. This contract is awarded for the following scopes of work:
pesticide application, aerial seeding, rotorcraft aerial seed, and herbicide.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This contract provides fuels reduction services for agencies that do not have capability to do the work, and to assist when the volume of reduction services is such that staff cannot accomplish all work in a timely manner.

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):

Bordges Timber
RK Contractors
Paleo West

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This RFQ is being awarded to 29 vendors that qualified in the various scopes of work.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 II Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	05/10/2022 13:28:25 PM
Division Approval	gdavi6	05/10/2022 13:28:28 PM
Department Approval	ldeloach	05/10/2022 13:43:00 PM
Contract Manager Approval	nfese1	05/10/2022 13:47:42 PM
Budget Analyst Approval	laaron	05/23/2022 13:48:06 PM
BOE Agenda Approval	laaron	05/23/2022 13:48:08 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: **26074**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: Amber Timberlake

Contractor Name: **Mindful Matters**Address: **40 East Center St. Suite 17**City/State/Zip: **Fallon, NV 89406**

Contact/Phone: Amber Timberlake 775-391-5271

Vendor No.: Pending

NV Business ID: NV20212184977

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing marriage and family therapy services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/28/2022 13:29:40 PM
Division Approval	gdavi6	04/28/2022 13:29:43 PM
Department Approval	ldeloach	05/05/2022 11:34:05 AM
Contract Manager Approval	rvradenb	05/05/2022 16:57:50 PM
Budget Analyst Approval	dspeed1	05/06/2022 16:52:45 PM
BOE Agenda Approval	laaron	05/20/2022 23:51:08 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: **26156**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: **NIRVANA HEALTH, LLC**Contractor Name: **NIRVANA HEALTH, LLC**Address: **4120 FOSSATELLO AVE**City/State/Zip: **NORTH LAS VEGAS, NV 89084**Contact/Phone: **702/379-7571**Vendor No.: **T29044886**NV Business ID: **NV20212098269**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing community based living arrangements services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:

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	gdavi6	04/30/2022 20:33:25 PM
Division Approval	gdavi6	04/30/2022 20:33:28 PM
Department Approval	ldeloach	05/05/2022 16:07:25 PM
Contract Manager Approval	rvradenb	05/06/2022 10:18:45 AM
Budget Analyst Approval	nhovden	05/18/2022 14:40:26 PM
BOE Agenda Approval	nhovden	05/18/2022 14:40:28 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: **26118**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: **OLYMPUS HEALTH NEVADA, LLC**Contractor Name: **OLYMPUS HEALTH NEVADA, LLC**Address: **3813 EAST OASIS CIRCLE**City/State/Zip: **MESA, AZ 85215**Contact/Phone: **Lindsey Mackey 317-654-1649**Vendor No.: **T27025643**NV Business ID: **NV20121196517**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing general medicine services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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	gdavi6	04/28/2022 13:50:44 PM
Division Approval	gdavi6	04/28/2022 13:50:46 PM
Department Approval	ldeloach	05/05/2022 14:53:47 PM
Contract Manager Approval	rvradenb	05/06/2022 16:24:07 PM
Budget Analyst Approval	dspeed1	05/06/2022 16:34:02 PM
BOE Agenda Approval	laaron	05/20/2022 23:20:25 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: **26083**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: **PROGRESSUS THERAPY, LLC**Contractor Name: **PROGRESSUS THERAPY, LLC**Address: **2003 S EASTON RD
SUITE 308**City/State/Zip: **DOYLESTOWN, PA 18901**Contact/Phone: **MATT STRINGER 800-892-0640**Vendor No.: **T29027857**NV Business ID: **NV20071147716**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for applied behavioral analysis, behavioral support, case management, counseling, early intervention, marriage and family therapy, mental health, psychology, and social worker.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,100,000.00****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?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/28/2022 13:36:17 PM
Division Approval	gdavi6	04/28/2022 13:36:19 PM
Department Approval	ldeloach	05/05/2022 12:00:35 PM
Contract Manager Approval	rvradenb	05/06/2022 09:58:23 AM
Budget Analyst Approval	dspeed1	05/06/2022 16:12:38 PM
BOE Agenda Approval	laaron	05/20/2022 23:33:01 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 CONTRACT1. Contract Number: **25330**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: Premier Medical, Inc.

Contractor Name: **Premier Medical, Inc.**Address: **6000A Pelham Rd**City/State/Zip: **Greenville, SC 29615**

Contact/Phone: Michael Conroy 864-679-2900

Vendor No.: Pending

NV Business ID: NV20222447320

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**

Agency Reference #: 99SWC-S1777 GD

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2024**Contract term: **2 years and 214 days**4. Type of contract: **MSA**Contract description: **COVID-19 Testing**

5. Purpose of contract:

This is a new contract to provide COVID-19 testing services for state agencies and other governmental entities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,000,000.00**

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?

State agencies and local governments are currently providing COVID-19 testing using a combination of National Guard staff, employees, temporary staff, and volunteers. These contracts will give entities additional options to provide test collection services if additional sites are needed or if current sites need to be transition to a contracted model.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Some using agencies do not have staffing resources or proper training to operate test collection sites, others are operating sites but need additional resources in preparation for a surge in COVID-19 cases.

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):

Visit Healthcare
SJM Premier Medical Group LLC
RedTag-19 LLC
OptumServ Health Services, Inc
Ambulnz Holdings
AMBL-IEM LLC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The Statewide solicitation is a request for qualifications, and all qualified vendors are awarded contracts. Using entities can solicit proposals from multiple contracted vendors.

d. Last bid date: 10/06/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

Vendor Registration in progress.

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

Vendor Registration in progress.

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

No b. If "NO", please explain.

Vendor Registration in progress.

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	05/10/2022 09:48:49 AM
Division Approval	gdavi6	05/10/2022 09:48:52 AM
Department Approval	ldeloach	05/10/2022 16:06:58 PM

Contract Manager Approval	jsmedes	05/13/2022 12:57:01 PM
Budget Analyst Approval	laaron	05/23/2022 16:14:26 PM
BOE Agenda Approval	laaron	05/23/2022 16:14:28 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: **26184**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: **RENO BEHAVIORAL HEALTHCARE HOSPITAL, LLC**Contractor Name: **RENO BEHAVIORAL HEALTHCARE HOSPITAL, LLC**Address: **6940 SIERRA CENTER PKWY**City/State/Zip: **RENO, NV 89511-2209**Contact/Phone: **DON BUTTERFIELD 775/393-2200**Vendor No.: **T29041557**NV Business ID: **NV20161473226**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing mental health and psychiatry services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/30/2022 20:39:50 PM
Division Approval	gdavi6	04/30/2022 20:39:52 PM
Department Approval	ldeloach	05/05/2022 16:51:31 PM
Contract Manager Approval	rvradenb	05/06/2022 10:26:12 AM
Budget Analyst Approval	nhovden	05/18/2022 12:54:21 PM
BOE Agenda Approval	nhovden	05/18/2022 12:54:23 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: **25955**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: **PLAY ON WORDS, LLC**Contractor Name: **RENO-TAHOE THERAPY GROUP**Address: **675 Fairview Dr.
Suite 207**City/State/Zip: **Carson City, NV 89701**Contact/Phone: **Edyl Zarah Peck 775-400-2322**Vendor No.: **T27043757A**NV Business ID: **NV20191418281**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing occupational therapy and speech pathology, therapy and counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,700,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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?

No b. If "No", please explain:

The vendor provides services under the DBA of Reno-Tahoe Therapy Group.

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	gdavi6	04/01/2022 11:11:41 AM
Division Approval	gdavi6	04/01/2022 11:11:46 AM
Department Approval	ldeloach	04/04/2022 16:36:14 PM
Contract Manager Approval	gdavi6	04/07/2022 16:46:50 PM
Budget Analyst Approval	dspeed1	05/03/2022 12:26:02 PM
BOE Agenda Approval	laaron	05/10/2022 16:40:29 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: **26187**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	RITE OF PASSAGE ADOLESCENT TREATMENT CENTERS & SCHOOL, INC.
Agency Code:	MSA	Contractor Name:	RITE OF PASSAGE ADOLESCENT TREATMENT CENTERS & SCHOOL, INC.
Appropriation Unit:	9999 - All Categories	Address:	2560 BUSINESS PKWY STE B
Is budget authority available?:	Yes	City/State/Zip	MINDEN, NV 89423-8961
If "No" please explain:	Not Applicable	Contact/Phone:	MAKAYA SWAIN 702/460-8286
		Vendor No.:	T80991487
		NV Business ID:	NV19861015378

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for behavioral support, case management, counseling, employment support, mental health, and safe-housing providers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	gdavi6	04/30/2022 20:40:25 PM
Division Approval	gdavi6	04/30/2022 20:40:27 PM
Department Approval	ldeloach	05/05/2022 16:56:34 PM
Contract Manager Approval	rvradenb	05/06/2022 10:25:02 AM
Budget Analyst Approval	nhovden	05/19/2022 15:02:23 PM
BOE Agenda Approval	nhovden	05/19/2022 15:02:25 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: **26158**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: **TREATMENT CENTERS & SCHOOL, INC.**Contractor Name: **RITE OF PASSAGE, INC.**Address: **2560 BUSINESS PKWY SUITE A**City/State/Zip: **MINDEN, NV 89423**Contact/Phone: **Nancey Carter 480-987-2053**Vendor No.: **T80991487**NV Business ID: **NV19861019226**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing applied behavioral analysis and autism treatment assistance program services.

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?

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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/28/2022 13:51:29 PM
Division Approval	gdavi6	04/28/2022 13:51:31 PM
Department Approval	ldeloach	05/05/2022 16:11:15 PM
Contract Manager Approval	rvradenb	05/16/2022 12:03:18 PM
Budget Analyst Approval	dspeed1	05/16/2022 12:16:31 PM
BOE Agenda Approval	laaron	05/17/2022 10:34:20 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: **25969**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: **ROBERT STUYVESANT**Contractor Name: **ROBERT STUYVESANT**Address: **177 CADILLAC PLACE**City/State/Zip: **RENO, NV 89509-4355**Contact/Phone: **Robert Stuyvesant 775-827-7500**Vendor No.: **T80948309**NV Business ID: **NV20101487796**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing mental health, counseling and social worker services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,800,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	gdavi6	04/01/2022 11:43:56 AM
Division Approval	gdavi6	04/01/2022 11:44:00 AM
Department Approval	ldeloach	04/04/2022 16:58:10 PM
Contract Manager Approval	gdavi6	04/07/2022 16:48:36 PM
Budget Analyst Approval	dspeed1	05/03/2022 16:11:35 PM
BOE Agenda Approval	laaron	05/23/2022 11:25:08 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26192**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: **SERGIO A. GUZMAN OPTOMETRY, LTD.**Contractor Name: **SERGIO A. GUZMAN OPTOMETRY, LTD.**Address: **1184 COLLEGE AVE**City/State/Zip: **ELKO, NV 89801-3424**Contact/Phone: **SERGIO A GUZMAN 775/777-3937**Vendor No.: **T81036997**NV Business ID: **NV19981269528**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing optometry services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/30/2022 20:42:01 PM
Division Approval	gdavi6	04/30/2022 20:42:04 PM
Department Approval	ldeloach	05/06/2022 11:27:48 AM
Contract Manager Approval	rvradenb	05/09/2022 13:59:02 PM
Budget Analyst Approval	nhovden	05/18/2022 11:40:33 AM
BOE Agenda Approval	nhovden	05/18/2022 11:40:35 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: **26190**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: **SILVER STATE HEARING & BALANCE, INC.**Contractor Name: **SILVER STATE HEARING & BALANCE, INC.**Address: **501 HAMMILL LN**City/State/Zip: **RENO, NV 89511-1004**Contact/Phone: **JACQUELINE ANTONIO 775-682-4000**Vendor No.: **T29019074**NV Business ID: **NV20071671629**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing audiology services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/30/2022 20:41:26 PM
Division Approval	gdavi6	04/30/2022 20:41:29 PM
Department Approval	ldeloach	05/06/2022 11:24:04 AM
Contract Manager Approval	rvradenb	05/09/2022 13:52:03 PM
Budget Analyst Approval	nhovden	05/18/2022 10:51:48 AM
BOE Agenda Approval	nhovden	05/18/2022 10:51:52 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: **26101**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: **UHS OF SPRING MOUNTAIN, INC.**Contractor Name: **SPRING MOUNTAIN TREATMENT CENTER**Address: **7000 W SPRING MOUNTAIN RD**City/State/Zip: **LAS VEGAS, NV 89117-3816**Contact/Phone: **Michael Frye 702-873-2400**Vendor No.: **T81095899**NV Business ID: **NV20041430271**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing counseling and mental health services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,300,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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?

No b. If "No", please explain:

Vendor provides services under both names.

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	gdavi6	04/28/2022 13:43:00 PM
Division Approval	gdavi6	04/28/2022 13:43:02 PM
Department Approval	ldeloach	05/05/2022 14:03:44 PM
Contract Manager Approval	rvradenb	05/06/2022 10:04:32 AM
Budget Analyst Approval	dspeed1	05/16/2022 09:17:31 AM
BOE Agenda Approval	laaron	05/18/2022 10:47:08 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26065**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: **MARIA LUISA A. CAGUICLA**Contractor Name: **ST. FRANCIS GROUP HOME III**Address: **4121 E. BOSTON AVE.**City/State/Zip: **LAS VEGAS, NV 89104**Contact/Phone: **MARIA CAGUICLA 702-457-2378**Vendor No.: **T81075132**NV Business ID: **NV20171825702**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing group home services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies. Agencies are 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 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:

Vendor provides services under DBA.

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	gdavi6	04/28/2022 13:29:26 PM
Division Approval	gdavi6	04/28/2022 13:29:28 PM
Department Approval	ldeloach	05/06/2022 11:42:34 AM
Contract Manager Approval	rvradenb	05/09/2022 13:50:14 PM
Budget Analyst Approval	dspeed1	05/16/2022 09:42:28 AM
BOE Agenda Approval	laaron	05/18/2022 09:57:48 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: **26316**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: **STEP 2, INC.**Contractor Name: **STEP 2, INC.**Address: **3700 SAFE HARBOR WAY**City/State/Zip: **RENO, NV 89512**Contact/Phone: **MARI HUTCHINSON 775-787-9411**Vendor No.: **T80920903**NV Business ID: **NV19861005080**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contact to provide ongoing services for mental health, rehabilitation, behavioral support, counseling, marriage and family therapy, psychology, residential provider, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$7,600,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	05/10/2022 13:45:36 PM
Division Approval	gdavi6	05/10/2022 13:45:39 PM
Department Approval	ldeloach	05/11/2022 16:29:40 PM
Contract Manager Approval	rvradenb	05/16/2022 11:07:36 AM
Budget Analyst Approval	nhovden	05/19/2022 16:57:04 PM
BOE Agenda Approval	nhovden	05/19/2022 16:57:07 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: **26072**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: Saint Benedict Group Home, LLC

Contractor Name: **Saint Benedict Group Home, LLC**Address: **3625 Rosewood Drive**City/State/Zip: **Las Vegas, NV 89121**

Contact/Phone: Roselyn Javier 702-375-8355

Vendor No.: T81007518

NV Business ID: NV20061165236

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: S1737-RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Servic**

5. Purpose of contract:

This is a new contract to provide ongoing community based living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/28/2022 13:30:12 PM
Division Approval	gdavi6	04/28/2022 13:30:14 PM
Department Approval	ldeloach	05/05/2022 11:27:07 AM
Contract Manager Approval	rvradenb	05/05/2022 16:58:07 PM
Budget Analyst Approval	dspeed1	05/06/2022 16:35:58 PM
BOE Agenda Approval	laaron	05/20/2022 23:55:38 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: **25968**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: **TAHOE YOUTH & FAMILY SERVICES**Contractor Name: **TAHOE YOUTH & FAMILY SERVICES**Address: **1512 US HIGHWAY 395 N SUITE 3**City/State/Zip: **GARDNERVILLE, NV 89410-5283**Contact/Phone: **Karen Carey 775-782-4202**Vendor No.: **T29021767**NV Business ID: **NV20021492341**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for mental health, behavioral support, marriage and family therapy, and substance abuse counseling.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/01/2022 11:43:31 AM
Division Approval	gdavi6	04/01/2022 11:43:35 AM
Department Approval	ldeloach	04/04/2022 16:56:56 PM
Contract Manager Approval	gdavi6	04/07/2022 16:48:22 PM
Budget Analyst Approval	dspeed1	05/03/2022 16:15:02 PM
BOE Agenda Approval	laaron	05/10/2022 16:28:01 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 CONTRACT1. Contract Number: **26131**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: **TANNERWOOD HOME, LLC**Contractor Name: **TANNERWOOD HOME, LLC**Address: **5505 TANNERWOOD DR**City/State/Zip: **RENO, NV 89511**Contact/Phone: **LAURA PERRY 775-742-0520**Vendor No.: **T27023028**NV Business ID: **NV20091360104**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvs**

5. Purpose of contract:

This is a new contract to provide ongoing supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:

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	gdavi6	04/28/2022 13:56:39 PM
Division Approval	gdavi6	04/28/2022 13:56:42 PM
Department Approval	ldeloach	05/05/2022 15:17:24 PM
Contract Manager Approval	rvradenb	05/06/2022 10:15:27 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:29:07 AM
BOE Agenda Approval	laaron	05/19/2022 13:58:18 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: **26195**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: **THE SHADE TREE, INC.**Contractor Name: **THE SHADE TREE, INC.**Address: **1 W OWENS AVE**City/State/Zip: **NORTH LAS VEGAS, NV 89030**Contact/Phone: **TYRA MITCHELL 702-563-5795**Vendor No.: **T80987519**NV Business ID: **NV19891036669**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for case management, emergency shelter care, job development, and personal care.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/30/2022 20:42:49 PM
Division Approval	gdavi6	04/30/2022 20:42:52 PM
Department Approval	ldeloach	05/06/2022 11:32:57 AM
Contract Manager Approval	rvradenb	05/09/2022 13:59:33 PM
Budget Analyst Approval	nhovden	05/18/2022 12:45:54 PM
BOE Agenda Approval	nhovden	05/18/2022 12:45:56 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26159**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: **BELMA DIZON**Contractor Name: **THERESAINE ADULT GROUP HOME**Address: **6620 ELLERHURST DR**City/State/Zip: **LAS VEGAS, NV 89103-3128**Contact/Phone: **Belma Dizon 702-324-5099**Vendor No.: **T29025196**NV Business ID: **NV20101195229**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing assisted living, group home and residential provider services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,800,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 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:

Vendor provides services using a DBA.

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	gdavi6	04/30/2022 20:34:12 PM
Division Approval	gdavi6	04/30/2022 20:34:14 PM
Department Approval	ldeloach	05/05/2022 16:12:35 PM
Contract Manager Approval	rvradenb	05/06/2022 10:22:00 AM
Budget Analyst Approval	dspeed1	05/16/2022 11:09:28 AM
BOE Agenda Approval	laaron	05/19/2022 16:55:29 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: **26284**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: **TURNING POINT FAMILY CARE, INC.**Contractor Name: **TURNING POINT FAMILY CARE, INC.**Address: **121 NORTH 1550 WEST**City/State/Zip: **CEDAR CITY, UT 84720**Contact/Phone: **ADAM MILNE 435-867-8168**Vendor No.: **PENDING**NV Business ID: **Utah 5318569-0142**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing behavioral support, mental health and residential provider services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,800,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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 NOT registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

This vendor does not provide services in Nevada.

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

This vendor does not provide services in Nevada.

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

No b. If "NO", please explain.

This vendor does not provide services in Nevada. Vendor is active and in good standing with the State of Utah.

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	05/10/2022 13:36:16 PM
Division Approval	gdavi6	05/10/2022 13:36:19 PM
Department Approval	ldeloach	05/11/2022 15:53:55 PM
Contract Manager Approval	rvradenb	05/16/2022 10:12:43 AM
Budget Analyst Approval	dspeed1	05/16/2022 10:22:19 AM
BOE Agenda Approval	laaron	05/17/2022 11:27:05 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: **25957**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Team EEI-NV, LLC
Agency Code: MSA	Contractor Name: Team EEI-NV, LLC
Appropriation Unit: 9999 - All Categories	Address: P.O. Box 350606
Is budget authority available?: Yes	City/State/Zip: Westminster, CO 80035
If "No" please explain: Not Applicable	Contact/Phone: William Estrada 720-273-3520
	Vendor No.: T29043432A
	NV Business ID: NV20181600699

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 334 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing services for assistive technology, supportive services for the blind and visually impaired, community work experience programs, disabilities support, employment support, job development, and pre-employment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****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-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Multiple Agencies, Agencies are 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:
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	gdavi6	04/01/2022 11:41:00 AM
Division Approval	gdavi6	04/01/2022 11:41:04 AM
Department Approval	ldeloach	04/04/2022 16:37:49 PM
Contract Manager Approval	gdavi6	04/07/2022 16:47:00 PM
Budget Analyst Approval	dspeed1	05/03/2022 16:55:58 PM
BOE Agenda Approval	laaron	05/10/2022 16:02:23 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: **26193**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: **WMK, LLC**Contractor Name: **WMK, LLC DBA MOBILITY WORKS**Address: **3575 W CHEYENNE AVE STE 105**City/State/Zip: **NORTH LAS VEGAS, NV 89032**Contact/Phone: **ANNMARIE BUCKINGHAM 234/200-1379**Vendor No.: **T32004343A**NV Business ID: **NV20161464693**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 30 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing employment support services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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?

No b. If "No", please explain:

VENDOR PROVIDES SERVICES USING DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gdavi6	04/30/2022 20:42:15 PM
Division Approval	gdavi6	04/30/2022 20:42:18 PM
Department Approval	ldeloach	05/06/2022 11:29:27 AM
Contract Manager Approval	rvradenb	05/09/2022 13:59:16 PM
Budget Analyst Approval	nhovden	05/18/2022 12:37:35 PM
BOE Agenda Approval	nhovden	05/18/2022 12:37:38 PM
BOE Final Approval	Pending	

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	010	ATHLETIC COMMISSION	PEDRO J. YPINA	FEE: ATHLETIC COMMISSION GATE 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 10%	\$20,000	
		Contract Description: This is a new contract to provide inspector services during weigh-ins and events.				
		Term of Contract:	05/12/2022 - 05/31/2026	Contract # 25991		
2.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	NATIONAL INSTITUTE FOR STEM EDUCATION	FEDERAL	\$21,725	
		Contract Description: This is a new contract to provide consulting services to create a pilot program for professional development related to science, technology, engineering, and mathematics.				
		Term of Contract:	05/12/2022 - 06/30/2023	Contract # 26172		
3.	040	SECRETARY OF STATE'S OFFICE	PLURALSIGHT, LLC	GENERAL	\$23,968	
		Contract Description: This is a new contract to provide course materials and training on cyber security threats and various database building software.				
		Term of Contract:	04/28/2022 - 06/30/2023	Contract # 26058		
4.	040	SECRETARY OF STATE'S OFFICE	I3LOGIX, INC.	GENERAL	\$57,000	Sole Source
		Contract Description: This is a new contract to provide ballot tracking services to Nevada voters throughout the election process.				
		Term of Contract:	05/12/2022 - 04/30/2026	Contract # 26207		
5.	040	SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM	VOTINGWORKS	FEDERAL	\$18,900	
		Contract Description: This is a new contract to provide planning, implementation and remote support for pilot Risk-Limiting Audits to help election officials scale post-election tabulation audits, validate election outcomes and promote public trust.				
		Term of Contract:	05/11/2022 - 06/30/2023	Contract # 26174		
6.	060	CONTROLLER'S OFFICE	TONY A. PILANT DBA TK SOLUTIONS	GENERAL	\$20,000	Former Employee
		Contract Description: This is a new contract to provide Information Technology support services related to the Advantage Financial System including the Oracle databases.				
		Term of Contract:	05/11/2022 - 06/30/2023	Contract # 26032		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ECONOMY WINDOW CLEANERS	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$50,000	
	Contract Description:	This is a new contract to provide window cleaning on an as-needed basis for state-owned buildings throughout northern Nevada.				
		Term of Contract:	05/19/2022 - 04/15/2026	Contract # 25885		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	EIKELBERGER AWNING & DRAPERY, CO.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$35,000	
	Contract Description:	This is a new contract to provide for the removal and replacement of eight window coverings in the Capitol building.				
		Term of Contract:	05/09/2022 - 07/01/2022	Contract # 25892		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ENTERPRISE JANITORIAL, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$99,865	
	Contract Description:	This is a new contract that provides ongoing janitorial services for the Stewart Facility Cultural Center in Carson City.				
		Term of Contract:	05/10/2022 - 04/30/2026	Contract # 26013		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ENTERPRISE JANITORIAL, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$40,000	
	Contract Description:	This is a new contract to provide ongoing hard floor care for various state-owned buildings in northern Nevada.				
		Term of Contract:	05/09/2022 - 03/22/2026	Contract # 25862		
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	MCNEILS CLEANING SERVICE, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$40,000	
	Contract Description:	This is a new contract to provide ongoing emergency janitorial services for various state-owned buildings in northern Nevada.				
		Term of Contract:	05/10/2022 - 03/17/2026	Contract # 25827		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	MCNEILS CLEANING SERVICE, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$64,104	
	Contract Description:	This is a new contract to provide ongoing janitorial services for the Stewart Facility Cultural Center in Carson City.				
	Term of Contract:	05/19/2022 - 06/30/2026	Contract # 26223			
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	OVERHEAD DOOR CO. OF SIERRA NV RENO	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$10,000	
	Contract Description:	This is the first amendment to the original contract which provides repair and maintenance services for overhead doors installed in state-owned facilities. This amendment increases the maximum amount from \$15,000 to \$25,000 due to unanticipated equipment repairs.				
	Term of Contract:	11/01/2018 - 10/31/2022	Contract # 21013			
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ANA L. PIERROTT	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$40,000	
	Contract Description:	This is a new contract to provide ongoing emergency janitorial services for various state-owned buildings in northern Nevada.				
	Term of Contract:	05/10/2022 - 03/17/2026	Contract # 25836			
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	PUROCLEAN OF SOUTH RENO	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$12,112	
	Contract Description:	This is a new contract to provide for restoration and or remediation services at the State Capitol Building.				
	Term of Contract:	05/05/2022 - 06/30/2022	Contract # 26056			
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	QCS, LLC	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$30,120	
	Contract Description:	This is a new contract to provide ongoing heating, ventilation and air conditioning maintenance and repair services at the Reno Department of Motor Vehicle warehouse.				
	Term of Contract:	05/11/2022 - 01/14/2026	Contract # 25207			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
17.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WISE CONSULTING & TRAINING, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$45,000	
	Contract Description:	This is a new contract that continues ongoing environmental and hazardous waste management services for state-owned buildings in northern Nevada.				
		Term of Contract:	05/04/2022 - 03/28/2026	Contract # 25912		
18.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WOW CLEANING CORPORATION	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$40,000	
	Contract Description:	This is a new contract to provide ongoing emergency janitorial services for state-owned buildings.				
		Term of Contract:	05/04/2022 - 03/16/2026	Contract # 25817		
19.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WOW CLEANING CORPORATION	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$40,000	
	Contract Description:	This is a new contract to provide ongoing hard floor maintenance and care services for state-owned buildings in northern Nevada.				
		Term of Contract:	05/09/2022 - 03/21/2026	Contract # 25861		
20.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WOW CLEANING CORPORATION	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$20,000	
	Contract Description:	This is a new contract to provide window cleaning services for various state-owned buildings in northern Nevada.				
		Term of Contract:	05/09/2022 - 03/23/2026	Contract # 25883		
21.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WOW CLEANING CORPORATION	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME REVENUE	\$34,591	
	Contract Description:	This is a new contract to provide ongoing janitorial services for the purchasing warehouse located in Sparks.				
		Term of Contract:	05/23/2022 - 03/30/2026	Contract # 25976		
22.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	SHEILA MOORE	OTHER: WORKERS' COMPENSATION/ CHARGES FOR SERVICES	\$81,000	Professional Service
	Contract Description:	This is a new contract to provide services as a hearings officer to handle cases related to Workers' Compensation and Victims of Crime appeals as needed.				
		Term of Contract:	05/17/2022 - 05/10/2024	Contract # 26153		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS	GENERAL	\$20,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide facilitation for the development of a clean energy ecosystem strategy.				
		Term of Contract:	05/23/2022 - 09/30/2022	Contract # 26256		
24.	130	DEPARTMENT OF TAXATION	GARTNER, INC.	GENERAL	\$34,228	
	Contract Description:	This is a new service agreement under Master Service Agreement #99SWC-NV21-8568 which provides research and advisory services related to information technology. This service agreement provides access to research and provides advice related to information technology needs.				
		Term of Contract:	07/01/2022 - 06/30/2023	Contract # 26066		
25.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - COMPUTER FACILITY	CASHMAN EQUIPMENT COMPANY	FEE: FACILITY USAGE	\$41,585	
	Contract Description:	This is a new contract to provide ongoing service and repair on an as-needed basis for the generator and associated peripheral equipment.				
		Term of Contract:	05/12/2022 - 06/30/2026	Contract # 25933		
26.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	NAVAL FACILITIES ENGINEERING	OTHER: REVENUE	\$25,561	
	Contract Description:	This is a new revenue contract to provide ongoing microwave rack space at Austin Peak in Lander County.				
		Term of Contract:	07/01/2022 - 06/30/2023	Contract # 26340		
27.	300	DEPARTMENT OF EDUCATION - OFFICE OF THE SUPERINTENDENT	JAMS ADR SERVICES	GENERAL	\$10,000	
	Contract Description:	This is a new contract to provide arbitration and alternative dispute resolution services to resolve a dispute between a member of a school organization team within Clark County School District and Clark County School District.				
		Term of Contract:	04/25/2022 - 06/14/2022	Contract # 26117		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
28.	300	DEPARTMENT OF EDUCATION - STANDARDS AND INSTRUCTIONAL SUPPORT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	GENERAL	\$20,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide the State Educational Technology Needs Assessment.				
		Term of Contract:	04/22/2022 - 06/30/2022	Contract # 26071		
29.	300	DEPARTMENT OF EDUCATION - EDUCATOR LICENSURE	DEPARTMENT OF ADMINISTRATION HEARINGS DIVISION	FEE: LICENSURE	\$25,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide a hearing officer to conduct dispositions and impartial administrative hearings.				
		Term of Contract:	05/13/2022 - 06/30/2025	Contract # 26275		
30.	300	DEPARTMENT OF EDUCATION - COVID -19 FUNDING	INTERNATIONAL INSTITUTE FOR RESTORATIVE PRACTICES	FEDERAL	\$27,750	Exempt
	Contract Description:	This is the first amendment to the original contract which provides virtual statewide training for restorative justice practices for educators. This amendment increases the maximum amount from \$67,795.20 to \$95,545.20 due to the increased need for these services.				
		Term of Contract:	11/30/2021 - 06/30/2023	Contract # 25246		
31.	300	DEPARTMENT OF EDUCATION - COVID -19 FUNDING	NATIONAL EDUCATORS FOR RESTORATIVE PRACTICES	FEDERAL	\$27,000	
	Contract Description:	This is the first amendment to the original contract which provides virtual training for restorative justice practices for campus or district leaders and educators for support and interventions in the classrooms. This amendment increases the maximum amount from \$72,000 to \$99,000 due to the increased need for these services.				
		Term of Contract:	11/09/2021 - 06/30/2023	Contract # 25046		
32.	300	DEPARTMENT OF EDUCATION - COVID -19 FUNDING	TILSON & DIAZ SOLUTIONS, INC.	FEDERAL	\$75,000	Professional Service
	Contract Description:	This is a new contract to provide training that prepares and provides the necessary tools for Nevada paraprofessionals to support career and technical education teachers.				
		Term of Contract:	05/14/2022 - 09/30/2024	Contract # 26321		
33.	332	DEPARTMENT OF ADMINISTRATION - NEVADA STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - STATE LIBRARY	IO3O, LLC DBA WHOFI	FEDERAL	\$70,000	
	Contract Description:	This is a new contract to provide ongoing WiFi analytics solutions.				
		Term of Contract:	04/01/2022 - 03/31/2026	Contract # 25685		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
34.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - HOME AND COMMUNITY-BASED SERVICES	JS NET ASSOCIATES, LLC	GENERAL	\$40,000	
	Contract Description:	This is a new contract to provide ongoing forensic medical specialist services to assist in investigating complex adult abuse exploitation cases.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 26134		
35.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER	SUNRISE SERVICE, INC.	GENERAL 41% OTHER: CLIENT PAYMENTS 1.3% FEDERAL 57.7%	\$31,706	
	Contract Description:	This is a new contract to provide ongoing inspection and repair services for facility air conditioning systems.				
		Term of Contract:	07/01/2022 - 06/30/2024	Contract # 26000		
36.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	CAPTIONS UNLIMITED OF NEVADA, INC.	GENERAL 50% FEDERAL 50%	\$14,500	
	Contract Description:	This is the first amendment to the original contract which provides Communication Access Realtime Translation Services for real-time captioning for employees who are hearing impaired. This amendment extends the termination date from April 30, 2022 to May 31, 2022 and increases the maximum amount from \$24,000 to \$38,500 due to the continued need for these services.				
		Term of Contract:	01/14/2022 - 05/31/2022	Contract # 25421		
37.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	ESMERALDA COUNTY WELFARE	OTHER: REVENUE	\$73,576	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25664		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	EUREKA COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$22,764	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25668		
39.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	STOREY COUNTY	OTHER: REVENUE	\$44,621	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2021 - 06/30/2023	Contract # 25677		
40.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	HANSEN HUNTER & COMPANY	GENERAL	\$36,408	
	Contract Description:	This is a new contract to provide ongoing certified public accounting services to prepare and submit required Medicare cost reports.				
		Term of Contract:	07/01/2022 - 06/30/2024	Contract # 25851		
41.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	ALSCO, INC. DBA AMERICAN LINEN	GENERAL	\$32,000	
	Contract Description:	This is a new contract to provide laundry services.				
		Term of Contract:	05/20/2022 - 06/30/2024	Contract # 26122		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
42.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	HANSEN HUNTER & COMPANY	GENERAL	\$36,408	
	Contract Description:	This is a new contract to provide ongoing certified public accounting services to prepare and submit required Medicare Cost Reports.				
		Term of Contract:	05/10/2022 - 11/09/2024	Contract # 25590		
43.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	MESA ENERGY SYSTEMS INC. DBA EMCOR SERVICES	GENERAL	\$45,000	
	Contract Description:	This is a new contract to provide ongoing heating, ventilation and air conditioning equipment repair and maintenance.				
		Term of Contract:	05/11/2022 - 07/31/2025	Contract # 25712		
44.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	SIERRA VIII, INC. DBA DIVERSIFIED PAINTING	GENERAL	\$30,505	
	Contract Description:	This is a new contract to provide interior painting of walls and ceilings.				
		Term of Contract:	05/17/2022 - 06/30/2023	Contract # 25852		
45.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - OFFICE OF HEALTH ADMINISTRATION	LIGHTSIDE CONSULTING, LLC	FEDERAL	\$10,984	
	Contract Description:	This is a new contract to provide new fiscal policies and procedures, redeveloped a fee analysis for budgets and conduct oversight quality assurances of budget management and development.				
		Term of Contract:	04/22/2022 - 06/30/2022	Contract # 25908		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
46.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	CHURCHILL COUNTY	OTHER: COUNTY 34% FEDERAL 66%	\$68,769	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24909			
47.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	HUMBOLDT COUNTY	OTHER: COUNTY 34% FEDERAL 66%	\$77,400	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24893			
48.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	PERSHING COUNTY	OTHER: COUNTY 34% FEDERAL 66%	\$88,560	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing hearing master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 24916			
49.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - JUVENILE JUSTICE SERVICES	DRB CONSULTING, LLC	GENERAL	\$28,500	
	Contract Description:	This is a new contract to provide ongoing Prison Rape Elimination Act audits at juvenile justice facilities.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25872			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
50.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY ADMINISTRATION	REESHA POWELL	OTHER: COST ALLOCATED	\$49,900	
	Contract Description:	This is a new contract to provide consultative services to implement and monitor legislation passed in the 2021 Legislative Session.				
		Term of Contract:	04/22/2022 - 01/31/2023	Contract # 25856		
51.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	A ADOPTION ADVOCATES OF GEORGIA, INC.	GENERAL 79% FEDERAL 21%	\$24,000	
	Contract Description:	This is a new contract to provide federally mandated monthly visits and monthly visitation reports for children placed outside the State of Nevada.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25886		
52.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	HARMONY FAMILY CENTER	GENERAL 79% FEDERAL 21%	\$50,000	
	Contract Description:	This is a new contract to provide federally mandated monthly visits and monthly visitation reports for children placed in a residential facility outside of the State of Nevada.				
		Term of Contract:	04/20/2022 - 02/28/2026	Contract # 25550		
53.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	KINDRED SPIRITS ADOPTION SERVICES	GENERAL 79% FEDERAL 21%	\$42,668	
	Contract Description:	This is a new contract to provide federally mandated monthly visits and monthly visitation reports for children placed in a residential facility outside of the State of Nevada.				
		Term of Contract:	04/28/2022 - 02/28/2026	Contract # 25665		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
54.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	SLOTHOWER PEDIATRICS	GENERAL	\$44,000	
	Contract Description:	This is a new contract to provide forensic medical examinations in cases of alleged sexual abuse, physical abuse and neglect and to provide a second opinion on any reports or medical records.				
		Term of Contract:	05/17/2022 - 03/31/2026	Contract # 25792		
55.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NEVADA YOUTH TRAINING CENTER	ROSENLUND DRILLING, LLC	GENERAL	\$24,750	
	Contract Description:	This is a new contract to provide installation services for a new water pump and motor located in the water well that supplies all domestic water.				
		Term of Contract:	05/10/2022 - 06/30/2023	Contract # 25937		
56.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	A1 MECHANICAL, INC. DBA A 1 MECHANICAL & ELECTRIC	GENERAL 58% FEDERAL 42%	\$44,000	
	Contract Description:	This is a new contract to provide ongoing electrical inspections, repairs and maintenance services.				
		Term of Contract:	05/23/2022 - 01/31/2026	Contract # 25483		
57.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	ANYTIME PLUMBING, INC	GENERAL 59% FEDERAL 41%	\$46,000	
	Contract Description:	This is a new contract to provide ongoing plumbing services on an as-needed basis.				
		Term of Contract:	05/17/2022 - 03/31/2026	Contract # 25909		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
58.	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, LAS VEGAS	FEDERAL	\$49,868	Exempt
	Contract Description:	This is a new interlocal agreement to provide a review of current services and develop a plan for the structure of services pursuant to Senate Bill 366 of the 2021 Legislative Session.				
		Term of Contract:	04/27/2022 - 11/30/2022	Contract # 25630		
59.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	UNITED LOCK AND SECURITY, INC.	GENERAL 59% FEDERAL 41%	\$40,000	
	Contract Description:	This is a new contract to provide ongoing preventative, general and specialized locksmith and security system services.				
		Term of Contract:	05/17/2022 - 03/31/2026	Contract # 25988		
60.	431	OFFICE OF THE MILITARY	ALL CLEAN TECHNOLOGY, LLC	GENERAL 50% FEDERAL 50%	\$93,000	
	Contract Description:	This is a new contract to provide ongoing concrete services for the facilities in the Las Vegas area.				
		Term of Contract:	05/19/2022 - 05/25/2026	Contract # 26261		
61.	431	OFFICE OF THE MILITARY	BRET ALLEN DBA NEWT CONCRETE CONSTRUCTION	GENERAL 50% FEDERAL 50%	\$87,572	
	Contract Description:	This is a new contract to provide ongoing concrete services for facilities in the Fallon, Las Vegas and Reno areas.				
		Term of Contract:	05/12/2022 - 05/15/2026	Contract # 26212		
62.	431	OFFICE OF THE MILITARY	AMERICAN EQUIPMENT, INC. DBA AMQUIP/AMERICAN CRANE GROUP	GENERAL 50% FEDERAL 50%	\$95,040	
	Contract Description:	This is a new contract to provide ongoing crane repair, maintenance and inspection services for crane equipment used at Guard facilities statewide.				
		Term of Contract:	05/13/2022 - 04/15/2026	Contract # 26014		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
63.	431	OFFICE OF THE MILITARY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, GREAT BASIN COLLEGE	GENERAL 25% FEDERAL 75%	\$14,827	Exempt
	Contract Description:	This is a new interlocal agreement to provide credits for vocational and training skills for students attending the Battle Born Youth Challenge Academy.				
	Term of Contract:	07/01/2021 - 06/30/2022	Contract # 26034			
64.	431	OFFICE OF THE MILITARY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, GREAT BASIN COLLEGE	GENERAL 25% FEDERAL 75%	\$40,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide credits for vocational and training skills for students attending the Battle Born Youth Challenge Academy.				
	Term of Contract:	05/12/2022 - 12/31/2022	Contract # 26035			
65.	431	OFFICE OF THE MILITARY	CASHMAN EQUIPMENT COMPANY	GENERAL 50% FEDERAL 50%	\$74,776	
	Contract Description:	This is a new contract to provide ongoing generator maintenance, repair, inspection and certifications services for the National Guard facility in Carlin.				
	Term of Contract:	05/12/2022 - 05/15/2026	Contract # 26202			
66.	431	OFFICE OF THE MILITARY	COMMERCIAL ROOFERS, INC.	GENERAL 50% FEDERAL 50%	\$90,282	
	Contract Description:	This is a new contract to provide ongoing roofing maintenance, repair and replacement services for facilities in southern Nevada.				
	Term of Contract:	05/13/2022 - 04/25/2026	Contract # 26042			
67.	431	OFFICE OF THE MILITARY	INSIGHTFUL MEDIA, LLC	GENERAL 25% FEDERAL 75%	\$13,637	Professional Service
	Contract Description:	This is a new contract to provide a promotional video for the Battle Born Youth Challenge Academy.				
	Term of Contract:	05/06/2022 - 04/15/2023	Contract # 26176			
68.	431	OFFICE OF THE MILITARY	NEVADA ENERGY SYSTEMS, INC.	GENERAL 50% FEDERAL 50%	\$95,848	
	Contract Description:	This is a new contract to provide ongoing generator maintenance, repair, inspection and certifications services for the National Guard facility in Carson City.				
	Term of Contract:	05/19/2022 - 06/06/2026	Contract # 26341			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
69.	431	OFFICE OF THE MILITARY	PINNACLE HEATING AND AIR CONDITIONING	GENERAL 50% FEDERAL 50%	\$50,387	
	Contract Description:	This is the first amendment to the original contract which provides heating, ventilation and air conditioning services for Nevada National Guard facilities throughout the state. This amendment increases the maximum amount from \$41,167.74 to \$91,555.00 due to unanticipated emergency repair to the air conditioning systems servicing the main building and server room of the Department of Emergency Management building.				
	Term of Contract:	09/09/2021 - 08/31/2025	Contract # 24866			
70.	431	OFFICE OF THE MILITARY	T&M CONTROLS, INC. DBA TM ELECTRICAL SOLUTIONS	GENERAL 50% FEDERAL 50%	\$99,455	
	Contract Description:	This is a new contract to provide ongoing water tower controller maintenance and repair services for facilities in southern Nevada.				
	Term of Contract:	05/12/2022 - 05/15/2026	Contract # 26045			
71.	440	DEPARTMENT OF CORRECTIONS - PRISON DAIRY	NEVADA ORGANICS, LLC	OTHER: RENTAL INCOME	\$43,096	Sole Source
	Contract Description:	This is a new revenue contract to provide for the ongoing reimbursement of the cost of offender labor services, occupational training for offenders and land use in support of compost operations at the Silver State Industries Prison Ranch.				
	Term of Contract:	02/13/2022 - 08/31/2022	Contract # 25996			
72.	550	DEPARTMENT OF AGRICULTURE - VETERINARY MEDICAL SERVICES	MICROTECH SOLUTIONS, LLC	FEE: ASSESSMENTS-DAIRY 8% FEDERAL 92%	\$12,691	
	Contract Description:	This is a new contract to provide annual preventative maintenance and repair to the microscopes in the Animal Disease Laboratory, Dairy Laboratory, Plant Pathology and Entomology Laboratories at the Sparks headquarters.				
	Term of Contract:	04/21/2022 - 12/31/2024	Contract # 25746			
73.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	C&C NEVADA, LLC	OTHER: COST ALLOCATION	\$35,640	
	Contract Description:	This is the first amendment to the original contract which provides ongoing janitorial services for the southern headquarters. This amendment extends the termination date from April 30, 2022 to April 30, 2024 and increases the maximum amount from \$23,760 to \$59,400 due to the continued need for services.				
	Term of Contract:	05/01/2020 - 04/30/2024	Contract # 23080			
74.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	CHEMTREAT, INC.	OTHER: COST ALLOCATION	\$18,324	
	Contract Description:	This is a new contract to provide inspection services, required chemicals and in-house training for the Sparks cooling tower and system.				
	Term of Contract:	04/20/2022 - 01/15/2026	Contract # 25411			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
75.	650	DEPARTMENT OF PUBLIC SAFETY - DIRECTOR'S OFFICE	DR. JAMES TENNEY PSY.D.	GENERAL 37.7% HIGHWAY 53.7% USER FEE: 6.3% OTHER: INTERNAL SERVICE FUND (CP) 2.3%	\$35,000	Professional Service
	Contract Description:	This is a new contract to provide psychological counseling, evaluation and therapy services to sworn and civilian employees.				
		Term of Contract:	05/13/2022 - 01/31/2026	Contract # 26135		
76.	650	DEPARTMENT OF PUBLIC SAFETY - DIRECTOR'S OFFICE	SHIODE PSYCHOTHERAPY, INC.	GENERAL 37.7% HIGHWAY 53.7% USER FEE: 6.3% OTHER: INTERNAL SERVICE FUND (CP) 2.3%	\$46,800	Professional Service
	Contract Description:	This is a new contract to provide psychological counseling, evaluation and therapy services to sworn and civilian employees.				
		Term of Contract:	05/13/2022 - 03/31/2026	Contract # 26136		
77.	654	OFFICE OF THE MILITARY - DIVISION OF EMERGENCY MANAGEMENT	ESI ACQUISITION, INC.	GENERAL 20% FEDERAL 80%	\$90,684	
	Contract Description:	This is a new contract to provide ongoing annual user license agreement and software support.				
		Term of Contract:	05/19/2022 - 06/30/2026	Contract # 25507		
78.	702	DEPARTMENT OF WILDLIFE - CONSERVATION EDUCATION	GOHUNT, LLC	FEE: RESOURCE ENHANCEMENT STAMP	\$60,000	
	Contract Description:	This is the first amendment to the original contract which provides marketing of the Resource Enhancement Stamp and Dream Tap programs. This amendment extends the termination date from June 30, 2022 to June 30, 2025 and increases the maximum amount from \$20,000 to \$80,000 due to the continued need for these services.				
		Term of Contract:	07/19/2021 - 06/30/2025	Contract # 24464		
79.	702	DEPARTMENT OF WILDLIFE - GAME MANAGEMENT	COLORADO STATE UNIVERSITY	FEDERAL	\$20,000	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides sample testing from deer, elk and moose for Chronic Wasting Disease in Nevada. This amendment increases the maximum amount from \$30,000 to \$50,000 due to an increased need for these services.				
		Term of Contract:	01/02/2022 - 12/31/2025	Contract # 24886		
80.	702	DEPARTMENT OF WILDLIFE - HABITAT	ECOCULTURE REFORESTATION NETWORK, LLC	FEE: HABITAT CONSERVATION	\$10,000	
	Contract Description:	The is a new contract to provide insight into the screwbean mesquite (Prosopis pubescens) die-off by monitoring tree health and identifying potential causes of the die-off in southern Nevada and the Amargosa Basin of California.				
		Term of Contract:	04/28/2022 - 06/30/2023	Contract # 25574		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
81.	702	DEPARTMENT OF WILDLIFE - HABITAT	HUMBOLDT WATERSHED COOPERATIVE WEED MANAGEMENT AREA	FEE: HABITAT CONSERVATION	\$50,000	
	Contract Description:	This is the first amendment to the original contract which provides weed infestation treatment on private lands in the Humboldt Watershed. This amendment extends the termination date from September 30, 2022 to January 31, 2025 and increases the maximum amount from \$30,000 to \$80,000 due to the continued need for these services.				
		Term of Contract:	01/09/2021 - 01/31/2025	Contract # 23533		
82.	702	DEPARTMENT OF WILDLIFE - HABITAT	UNITED SITE SERVICES	FEDERAL	\$14,373	
	Contract Description:	This is a new contract to provide portable bathrooms and related services at Wildlife Management Areas for use by the visiting public.				
		Term of Contract:	04/28/2022 - 04/30/2023	Contract # 25635		
83.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	BORGES SLEIGH AND CARRIAGE RIDES	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide winter sleigh rides and narrated programs at Sand Harbor State Park.				
		Term of Contract:	05/19/2022 - 04/30/2023	Contract # 26279		
84.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	LONGORIA SERVICES	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide boat launching services at Cave Rock State Park.				
		Term of Contract:	05/16/2022 - 04/30/2023	Contract # 26171		
85.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	NEVADA ADVENTURES, LLC	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide kayak, paddleboard, snowshoes, hiking and mountain bike tours at Sand Harbor and Spooner Lake State Parks.				
		Term of Contract:	05/16/2022 - 04/30/2023	Contract # 26220		
86.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	OUTDOOR IMMERSIONS, INC.	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide kayak, paddleboard, snowshoe, mountain bike, and hiking tours at Sand Harbor State Park.				
		Term of Contract:	05/19/2022 - 04/30/2023	Contract # 26222		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
87.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	TALBOT TOURS	OTHER: REVENUE	\$10,000	
		Contract Description: This is a new revenue contract to provide guided tours of Sand Harbor State Park.				
		Term of Contract:	05/16/2022 - 04/30/2023	Contract # 26173		
88.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	WALKER MARINE	OTHER: REVENUE	\$10,000	
		Contract Description: This is a new revenue contract to provide boat launching services at Cave Rock State Park.				
		Term of Contract:	05/16/2022 - 04/30/2023	Contract # 26213		
89.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - MAINTENANCE OF STATE PARKS-NON-EXEC	AMBIENT EDGE AIR CONDITIONING	OTHER: MAINTENANCE OF STATE PARKS - SURCHARGE	\$97,000	
		Contract Description: This is a new contract to provide heating, ventilation and air conditioning maintenance, repair or replacement at the southern region state parks.				
		Term of Contract:	05/16/2022 - 03/31/2026	Contract # 25934		
90.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - MAINTENANCE OF STATE PARKS-NON-EXEC	ARTISTIC FENCE COMPANY, INC.	FEE: MAINTENANCE OF STATE PARKS	\$14,969	
		Contract Description: This is a new contract to provide the installation of a new chain-link fence around a park-owned residence located at Lahontan State Park.				
		Term of Contract:	05/19/2022 - 08/01/2022	Contract # 25979		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
91.	705	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES COOPERATIVE PROJECTS- NON-EXEC	US DISTRICT COURT WATER MASTER	OTHER: JOINT FUNDING AGREEMENT - PASS-THROUGH	\$33,177	Exempt
	Contract Description:	This is the second amendment to the original joint funding agreement to administer pass-through funding for the Truckee River Operation Agreement. This amendment extends the termination date from September 30, 2022 to September 30, 2025 and increases the maximum amount from \$1,770,000.00 to \$1,803,176.62 due to the continued need for these services.				
	Term of Contract:	10/01/2019 - 09/30/2025	Contract # 22411			
92.	705	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES - USGS CO-OP- NON-EXEC	UNITED STATES DEPARTMENT OF THE INTERIOR	OTHER: JOINT FUNDING AGREEMENT	\$25,000	Exempt
	Contract Description:	This is the second amendment to the original joint funding agreement to fund a study of the hydraulic connectivity and bulk hydraulic properties of carbonate-rock and basin-fill aquifers in the vicinity of Big Springs and the Johnson Springs Wetland Complex in Goshute Valley. This amendment extends the termination date from September 30, 2022 to June 30, 2023 and increases the maximum amount from \$390,000 to \$415,000 due to the continued need for these services.				
	Term of Contract:	10/09/2018 - 06/30/2023	Contract # 21064			
93.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	JOBS PEAK WEED CONTROL	GENERAL 50% OTHER: SB 508 NV ENERGY 50%	\$45,000	
	Contract Description:	This is a new contract to provide ground applied herbicide application to previously mowed or grubbed areas along powerlines to increase fuel-break conditions.				
	Term of Contract:	04/21/2022 - 04/30/2024	Contract # 26047			
94.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	PESTMASTER SERVICES	GENERAL	\$10,152	
	Contract Description:	This is a new contract to provide pest control services to the Western Region headquarters and nursery.				
	Term of Contract:	05/19/2022 - 06/30/2026	Contract # 26272			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
95.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	RHP MECHANICAL SYSTEMS	GENERAL 87% OTHER: NURSERY FUNDS 13%	\$100,000	
	Contract Description:	This is a new contract to provide ongoing repair and maintenance of heating, ventilation, air conditioning and plumbing systems.				
		Term of Contract:	05/16/2022 - 06/30/2026	Contract # 26197		
96.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	SNYDER SERVICES, INC.	GENERAL	\$100,000	
	Contract Description:	This is a new contract to provide ongoing repair and maintenance of heating, ventilation, air conditioning and plumbing systems.				
		Term of Contract:	05/16/2022 - 06/30/2026	Contract # 26208		
97.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - AIR QUALITY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	FEE: AIR PENALTY	\$25,000	Exempt
	Contract Description:	This is a second amendment to the original interlocal agreement which provides for the management of the Wood Stove Change-Out Program to replace old wood-burning stoves with federally compliant and certified biofuel stoves. This amendment extends the termination date from June 30, 2022 to December 31, 2022 and increases the maximum amount from \$108,715 to \$133,715 due to the continued need for these services.				
		Term of Contract:	11/12/2019 - 12/31/2022	Contract # 22312		
98.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - AIR QUALITY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, DESERT RESEARCH INSTITUTE	FEDERAL	\$24,500	Exempt
	Contract Description:	This is a new contract to provide laboratory and analytical services to identify and evaluate the chemical characterization of particulate matter related to observations of elevated ozone concentrations in rural Nevada.				
		Term of Contract:	05/16/2022 - 03/31/2025	Contract # 26040		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
99.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT & CORRECTIVE ACTION	CLEAN HARBORS ENVIRONMENTAL SERVICES	FEDERAL	\$14,688	
	Contract Description:	This is a new contract to provide the collection and disposal of household-generated, elemental mercury hazardous waste from municipalities statewide.				
		Term of Contract:	05/16/2022 - 06/30/2022	Contract # 26230		
100.	742	DEPARTMENT OF BUSINESS AND INDUSTRY - INDUSTRIAL RELATIONS - OCCUPATIONAL SAFETY & HEALTH ENFORCEMENT	THE LAW OFFICES OF CHARLES R. ZEH, ESQ., LLC	OTHER: WORKERS' COMPENSATION & SAFETY FUND	\$48,000	Professional Service
	Contract Description:	This is the second amendment to the original contract which provides ongoing legal services. This amendment extends the termination date from July 1, 2022 to September 30, 2022 and increases the maximum amount from \$514,210 to \$562,210 due to the continued need for these services.				
		Term of Contract:	11/12/2019 - 09/30/2022	Contract # 21689		
101.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO WESTERN NEVADA COLLEGE	FEDERAL	\$16,934	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing pre-employment transition services to disabled youths, ages 16-22, by providing tools that will enable them to seek and retain employment.				
		Term of Contract:	05/16/2022 - 06/30/2023	Contract # 25579		
102.	902	DEPARTMENT OF EMPLOYMENT TRAINING AND REHABILITATION - GOVERNOR'S OFFICE OF WORKFORCE INNOVATION	RICHARD LAINE DBA DFI CONSULTING	FEDERAL	\$24,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing consulting services and assistance with the development and implementation to support the state's workforce efforts.				
		Term of Contract:	02/01/2022 - 06/30/2022	Contract # 25876		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
103.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	CARAHSOFT TECHNOLOGY	OTHER: CAREER ENHANCEMENT PROGRAM	\$84,240	Sole Source
	Contract Description:	This is a new Service Agreement under Master Service Agreement #99SWC-NV18-421 which provides cloud services. This service agreement provides access to LinkedIn Recruiter and will help identify and target ideal candidates in hard-to-reach and diverse talent pools and build a data-driven workforce strategy.				
		Term of Contract:	05/18/2022 - 05/31/2025	Contract # 25272		
104.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	NEVADAWORKS	OTHER: REVENUE	\$30,000	
	Contract Description:	This is the fifth amendment to the original revenue contract which provides reimbursement for the FutureWork Systems, LLC application. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$84,000 to \$114,000 due to the continued need for these services.				
		Term of Contract:	12/17/2018 - 06/30/2023	Contract # 21208		
105.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY - SPECIAL FUND	GREENSCAPES OF NEVADA, LLC	OTHER: COST ALLOCATION	\$30,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing landscaping services for the facility located at 2800 E. St. Louis Avenue, Las Vegas. This amendment extends the termination date from April 30, 2022 to April 30, 2024 and increases the maximum amount from \$30,000 to \$60,000 due to the continued need for these services.				
		Term of Contract:	04/21/2020 - 04/30/2024	Contract # 23030		
106.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	BRIGGS ELECTRIC, INC.	GENERAL 1.9% OTHER: BEN, ESD SPECIAL FUND AND CAREER ENHANCEMENT PROGRAM 29.1% FEDERAL 69%	\$10,500	
	Contract Description:	This is a new contract to provide electrical services for northern Nevada facilities.				
		Term of Contract:	05/05/2022 - 05/01/2026	Contract # 26015		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
107.	908	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - ADMINISTRATIVE SERVICES - INFORMATION DEVELOPMENT AND PROCESSING	GARTNER, INC.	OTHER: COST ALLOCATION	\$34,228	
	Contract Description:	This is a new Work Plan under Master Blanket Purchase Order 99SWC-NV21-8568 which provides research and advisory services related to Information Technology. This Work Plan provides access to Gartner for IT Leaders Individual Access Advisor software.				
	Term of Contract:	05/17/2022 - 06/30/2023	Contract # 26211			
108.	B005	LICENSING BOARDS AND COMMISSIONS - CHIROPRACTIC PHYSICIANS	LING, LTD	FEE: LICENSURE	\$64,800	Professional Service
	Contract Description:	This is a new contract to provide ongoing legal services including representation in a lawsuit, disciplinary actions, administrative hearings, legislative assistance and in providing legal advice.				
	Term of Contract:	06/01/2022 - 05/31/2025	Contract # 26167			
109.	B031	LICENSING BOARDS AND COMMISSIONS - OCCUPATIONAL THERAPY	NUMBERS, INC.	FEE: LICENSURE	\$12,000	
	Contract Description:	This is a new contract to provide bookkeeping and payroll services.				
	Term of Contract:	07/01/2022 - 06/30/2026	Contract # 26145			

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: **25991**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: Pedro J. Ypina

Contractor Name: **Pedro J. Ypina**Address: **5044 Sparkling Sky Ave.**City/State/Zip: **Las Vegas, NV 89130**

Contact/Phone: Pedro Ypina 702-812-1657

Vendor No.: T32012272

NV Business ID: NV20222438660

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2026**Contract term: **4 years and 20 days**4. Type of contract: **Contract**Contract description: **Specialty Services**

5. Purpose of contract:

This is a new contract to provide Inspector Services during Athletic Commission weigh-in's 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: \$175 - \$200 per event and \$75 - \$100 per weigh-in (based on event size), and \$75 per assigned USA Boxing gym inspections. 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:

Weigh-ins and events occur during evening hours, weekends, and holidays. The Commission has a very small staff and would not be able to provide the staffing requirements needed for event coverage duties. The agency would accrue additional overtime trying to fulfill these obligations. Additionally, the inspectors provide oversight of both male and female locker rooms. We do not have the appropriate ratio of staff and again or the number of staff to cover these tasks.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 has knowledge of the rules and regulations of unarmed combat and has passed an Inspector Trainee program. Performance was satisfactory.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Alex Ybarra, Chief Assistant Ph: (702) 486-2581

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jvictor	04/05/2022 16:11:04 PM
Division Approval	jkidd	04/05/2022 18:43:01 PM
Department Approval	ssands	04/06/2022 07:39:52 AM
Contract Manager Approval	ssands	05/02/2022 09:39:45 AM
Budget Analyst Approval	vmilazz1	05/12/2022 12:43:25 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: **26172**

Agency Name:	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	Legal Entity Name:	ACCELERATE LEARNING
Agency Code:	014	Contractor Name:	National Institute for STEM Education
Appropriation Unit:	1003-10	Address:	PO BOX 732464
Is budget authority available?:	Yes	City/State/Zip	Dallas, TX 75373-2464
If "No" please explain:	Not Applicable	Contact/Phone:	800-531-0864
		Vendor No.:	T29045325
		NV Business ID:	NV20151307530

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 49 days**4. Type of contract: **Contract**Contract description: **Consulting**

5. Purpose of contract:

This is a new contract to provide consulting services to create a pilot program for professional development related to STEM and a workshop component within the program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,725.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

OSIT is responsible for coordinating the Governor's Designated STEM School Program. Participants have expressed and demonstrated the need for additional learning to advance in the Designation program. Designated STEM Schools have regularly communicated to OSIT the desire to 1) engage more teachers at their schools in STEM, 2) continue staff STEM professional learning, and 3) advance their school to a higher tier of the Governor STEM School Designation. OSIT has observed that many Developing STEM Schools require a student-centered focus to move to an Established Model, and the NISE NCST program focuses on this type of instruction.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

OSIT does not have the capacity (personnel with sufficient time to dedicate) to provide the required extended professional learning to teachers state-wide.

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):

UNR
UNLV
NASA
National Institute for STEM Education

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

best fit for needs

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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?

No b. If "No", please explain:

dba

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brian Mitchell, Director Ph: 775-687-0987

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	04/27/2022 14:23:31 PM
Division Approval	jkidd	04/27/2022 16:20:27 PM
Department Approval	ssands	04/27/2022 16:25:43 PM
Contract Manager Approval	ssands	05/10/2022 15:44:26 PM
Budget Analyst Approval	mranki1	05/12/2022 11:05:31 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: **26058**Agency Name: **SECRETARY OF STATE'S OFFICE**Agency Code: **040**Appropriation Unit: **1050-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Pluralsight, LLC**Contractor Name: **Pluralsight, LLC**Address: **42 Future Way**City/State/Zip: **Draper, UT 84020**Contact/Phone: **801-784-9007**

Vendor No.:

NV Business ID: **NV20041137059**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 **04/28/2022**Anticipated BOE meeting date **06/2023**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 63 days**4. Type of contract: **Contract**Contract description: **Pluralsight LLC**

5. Purpose of contract:

This is a new contract to provide course materials and training of cyber security threats and various database building software.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$23,968.00**

Other basis for payment: 30 Training Licenses for CAT 26 \$22,470.00. 2 Training Licenses for CAT 11 \$1,498.00 for a total of \$23,968.00

II. JUSTIFICATION

7. What conditions require that this work be done?

In order to maintain the skills we need here in the IT division to address changes agency needs related to evolving business conditions, evolving cyber security threats and remaining current with the latest techniques and available tools, the IT Division needs to have access to continuing education on a wide variety of technical topics. Topics include Application Development languages and techniques, Project Management, Cyber Security, System Administration, Database Administration and industry standards for operations and continuous improvement programs such as ITIL and Six-Sigma.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Explain why State employees in your agency or other State agencies are not able to do this work. State employees have neither the expertise or time to complete the work required

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):

LearnIT
Learn Quest
Global Knowledge

Pluralsight

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pluralsight offered the best combination of pricing per course and user and variety of course content we required

d. Last bid date: 04/11/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	shudder	04/19/2022 08:46:41 AM
Division Approval	shudder	04/19/2022 08:46:45 AM
Department Approval	shudder	04/19/2022 08:46:50 AM
Contract Manager Approval	svaldez	04/19/2022 08:49:40 AM
Budget Analyst Approval	hfield	04/28/2022 13:13:06 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26207**Agency Name: **SECRETARY OF STATE'S OFFICE**Agency Code: **040**Appropriation Unit: **1050-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: i3Logix, Inc

Contractor Name: **i3Logix, Inc**Address: **9501 NORTHFIELD BLVD.**City/State/Zip: **DENVER, CO 80238**Contact/Phone: **CHRISTOPHER SKIRKA 720-849-3362**

Vendor No.:

NV Business ID: **NV20212179594**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: 040

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 354 days**4. Type of contract: **Contract**Contract description: **Ballot Tracking**

5. Purpose of contract:

This is a new contract to provide ballot tracking services to Nevada voters throughout the election process.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$57,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Pursuant to AB321 of the 81st Legislative session, county clerks must mail a ballot to every active registered voter. Voters are new to the idea of receiving and returning their ballots using the mail and this service provides a way for them to see where their ballots are in each step of the process, thereby increasing voter confidence in this new method of voting and in the election results themselves.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees or agencies do not have the manpower or tools in order to be able to implement this solution before the November 3, 2022 General Election.

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 #: 220408

Approval Date: 04/20/2022

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	shudder	05/03/2022 09:49:12 AM
Division Approval	shudder	05/03/2022 09:49:14 AM
Department Approval	shudder	05/03/2022 09:49:19 AM
Contract Manager Approval	adale	05/03/2022 10:00:02 AM
EITS Approval	ljea	05/11/2022 15:12:58 PM
Budget Analyst Approval	hfield	05/12/2022 12:21:28 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#:

220408 @

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 <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Secretary of State's Office</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Mark Wlaschin</i>	<i>775-684-5720</i>	<i>mwlaschin@sos.nv.gov</i>

1b	Vendor Information:	
	Vendor Name:	<i>BallotTrax</i>
	Contact Name:	<i>Christopher Skirka</i>
	Complete Address:	<i>9501 Northfield Blvd.</i>
	City, State, and Zip Code	<i>Denver, CO 80238</i>
	Telephone Number:	<i>(303) 757-4546</i>
Email Address:	<i>cskirka@ballottrax.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? Check One:	Yes:	<i>X</i>	No:
	Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	<i>5/1/2022</i>	End Date:

1f	Funding:	
	State Appropriated:	<i>X</i>
	Federal Funds:	
	Grant Funds:	
Other (Explain):		

Rec'd 04/11/22/autov

Purchasing Use Only:

Approval #:

220408@

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$228,000
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2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>This is a service that allows voters based on a sign-up process to be able to track their ballots throughout the election process, including (1) when the ballot was mailed to them; (2) when it is received by the county clerk's office; (3) when it is accepted through signature verification and therefore sent to tabulation; and (4) if necessary, whether there is an issue requiring the voter to get in touch with the clerk's office.</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>The Secretary of State's Office (SOS) published RFI No. 04SOS-S1699 on August 23, 2021, and BallotTrax was the only vendor that provided a response. The SOS worked with BallotTrax during the 2020 elections and the vendor was able to perform the requested services.</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>After the experience with BallotTrax during the 2020 elections, the SOS sought to establish an ongoing contract with a similar service for the 2022 elections and beyond. This need became more urgent after AB 321 was passed, requiring the county clerks to mail a ballot to every active registered voter. As stated above in Section 3, the SOS published an RFI and BallotTrax was the only vendor that responded. The SOS also searched online and found Ballot Scout, which uses intelligent bar codes for tracking. This poses a problem for multiple Nevada counties that do not currently use intelligent bar codes on their ballots.</i></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.		
	<p><i>The SOS investigated whether it could build a similar service using their IT Division's software developers. It was determined that the IT Division does not have the manpower, nor the tools to be able to in order to implement a solution for the November 3, 2022, General Election. The SOS also searched online and found Ballot Scout, which uses intelligent bar codes for tracking. This poses a problem for multiple Nevada counties that do not currently use intelligent bar codes on their ballots.</i></p> <p>b. <u>If not</u>, why were alternatives not evaluated?</p>		

Purchasing Use Only:

Approval #:

220408

6	Has the agency purchased this service or commodity in the past? Check One:			Yes	No
	NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				X
	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:				
	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #
	Start Date	End Date			
		\$			

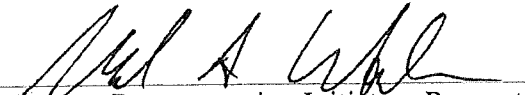
7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>Voters in Nevada are new to the idea of receiving and returning their ballots using the mail and this service provides a way for them to see where their ballots are in each step in the process, thereby increasing voter confidence in this new method of voting and in the election results themselves. If this service is not available, the already taxed staffs of the county clerks and the SOS will undoubtedly receive many calls from voters who are unhappy, distrusting, or confused about the process. Further, the results of the elections will be likely challenged. This service is an essential tool to help instill confidence in voters regarding their mail ballots.</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 Secretary of State's Office (SOS) published RFI No. 04SOS-S1699 on August 23, 2021, and BallotTrax was the only vendor that provided a response. The SOS also searched online and found Ballot Scout, which uses intelligent bar codes for tracking. This poses a problem for multiple Nevada counties that do not currently use intelligent bar codes on their ballots.</i>

9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	<u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	X	
	a. If yes, please provide details regarding future obligations or needs.		
	<i>The quote received from BallotTrax was for \$57,000 for the primary election and \$57,000 for the general election, with the understanding that there are approximately 1.9 million registered voters in Nevada. Not all voters will sign up for the ballot tracking service, so the contract will really be a minimum of \$1,000 for each election, with a per ballot fee of \$0.03. The SOS and counties also want to have this service in place for special elections, and it is not possible to predict how many such elections will occur in 2023. Then, in 2024, there are a minimum of three elections (Presidential Preference, Primary, and General). Thus, there will be a continuing contractual relationship with BallotTrax that will vary depending on the number of elections and the number of registered voters who sign up to use the service. The maximum for FY2022-2023 is \$57,000.</i>		

Purchasing Use Only:	
Approval #:	2204080

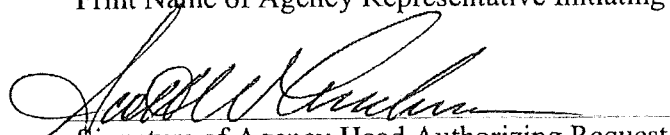
By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.


 Agency Representative Initiating Request

Mark Wlaschin, Deputy Secretary of Elections
 Print Name of Agency Representative Initiating Request

4/8/2022

Date


 Signature of Agency Head Authorizing Request

Scott Anderson, Deputy Secretary of State
 Print Name of Agency Head Authorizing Request

4/8/2022

Date

FOR PURCHASING USE ONLY – 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

4/20/22
 Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Scott Anderson, Chief Deputy Secretary of State, SOS
Debbie Bowman, Deputy for Operations, SOS
Tim Horgan, Chief IT Manager, SOS
Michele Forney, HAVA Administrator, SOS

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, Business Process Analyst III, EITS, DOA

SUBJECT: TIN Completion Memo – SOS – 358 – *BallotTrax Ballot Tracking Service* – BA 1050

DATE: March 24, 2022

We have completed our review for the Secretary of State's Office's – *BallotTrax Ballot Tracking Service* – TIN 358.

The submitted TIN, for an estimated value of \$114,000 this biennium and \$145,500 in the next biennium (100% General Fund), is to implement BallotTrax, a software as a Service (SaaS) solution, to enable voters to track the status of their mail-in ballots.

The 2021 Nevada Legislature enacted Assembly Bill 321 to make permanent the process by which all active, registered voters receive a ballot by mail for each election starting with the 2022 Primary Election (June 14, 2022). Voters who voluntarily sign up for ballot tracking through BallotTrax will receive service messages via email, text and/or voice mail for each stage of the mail-in ballot process: when their ballot was mailed, received by the county clerk's office, accepted through signature verification, and tabulated.

BallotTrax will also be able to notify a voter if there is a discrepancy with their ballot, so that the voter can contact the clerk's office and resolve the issue. The distinguishing characteristic of BallotTrax is that it enables electronic communication from the county to the voter. The voter can communicate back to the

county through the signature curing solution (see TIN 359) which is a smartphone application that voters can use to send photos of their ID, signature, and other documents in response to a notification from the county that the voter's ballot has a signature or identification issue.

Using this SaaS solution will help ensure the integrity of the election and boost voter confidence and transparency into the election process, because a voter will be able to track their ballot from start to finish. It also will significantly reduce the number of calls and emails coming into the clerks/registrar's offices during each election because voters will know where in the process their ballots are.

This technology was used in the 2020 election cycle on an emergency basis due to the COVID-19 pandemic. The Secretary of State's Office does not have a current contract with this vendor; however one is needed in order to have the solution in place for the November 8, 2022 General Election.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies.

A copy of this memo has 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: **26174**Agency Name: **SECRETARY OF STATE'S OFFICE**Agency Code: **040**Appropriation Unit: **1051-16**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: VotingWorks

Contractor Name: **VotingWorks**Address: **548 Market Street, Suite 53001**City/State/Zip: **San Francisco, CA 94104-5401**

Contact/Phone: Steve Trout 503-300-2600

Vendor No.: T29043575

NV Business ID: NV20201917115

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: 040

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/11/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 50 days**4. Type of contract: **Contract**Contract description: **Risk Limiting Audit**

5. Purpose of contract:

This is a new contract to provide planning, implementation and remote support for pilot Risk-Limiting Audits to help election officials scale post-election tabulation audits, validate election outcomes and promote public trust.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$18,900.00**

Other basis for payment: Annual Software Cost - \$13,400.00, RLA Professional Services - \$5,500.00

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS293.394 requires that the Secretary of State adopt regulations for conducting a risk-limiting audit of elections.

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 or resources required to do 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):

**Solarwinds
VotingWorks
Verified Voting**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

VotingWorks was the only vendor who responded to the informal solicitation.

d. Last bid date: 04/18/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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:

Secretary of State 12/4/2020-12/31/2021 - The quality of service provided 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 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	05/03/2022 09:53:08 AM
Division Approval	shudder	05/03/2022 09:53:12 AM
Department Approval	shudder	05/03/2022 09:53:15 AM
Contract Manager Approval	adale	05/03/2022 10:00:41 AM
EITS Approval	daxtel1	05/05/2022 11:16:14 AM
Budget Analyst Approval	hfield	05/11/2022 15:16:15 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: **26032**Agency Name: **CONTROLLER'S OFFICE**Agency Code: **060**Appropriation Unit: **1130-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **TONY A. PILANT DBA TK SOLUTIONS**Contractor Name: **TONY A. PILANT DBA TK SOLUTIONS**Address: **4760 VOLTAIRE ST**City/State/Zip: **CARSON CITY, NV 89703**Contact/Phone: **TONY PILANT 775/292-1229**Vendor No.: **T29045097**NV Business ID: **NV20222338892**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 **05/11/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 50 days**4. Type of contract: **Contract**Contract description: **IT Support**

5. Purpose of contract:

This is a new contract to provide Information Technology support services related to the Advantage Financial System including the Oracle databases.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

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 State Controller's Office (SCO) is responsible for the maintenance and administration of the State's financial applications, including Advantage, DAWN, Discoverer, IHUB, and the Oracle applications. Due to retirements and transfers to other agencies, there is a lack of in-house knowledge and experience with the State's financial applications at SCO. The SCO IT team has found support from an outside resource that has this kind of knowledge and depth of experience to assist when issues arise with the State's financial applications that the SCO IT team cannot quickly fix. Tony Pilant has the experience and expertise that SCO IT team needs to troubleshoot and quickly address issues which could detrimentally affect the operations of the State's financial applications.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Due to retirements and transfers to other agencies, all of SCO's previous highly experienced Advantage, DAWN, Discoverer, IHUB, and Oracle administrators no longer work at SCO. Due to the lack of vendor maintenance support and extensive customization of the State's financial applications prior to the current SCO IT Team, none of the current SCO IT team have any in-depth knowledge and/or experience administering and supporting the State's financial applications. Issues arising with the State's financial applications are increasing in number and severity. It has not been possible for the SCO IT team to fix all the issues without assistance from Tony Pilant.

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):

Tony Pilant DBA TK Solutions
Datavail.com
Rimini Street

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Tony Pilant has the extensive knowledge and experience working with the Advantage financial system as a senior DBA formerly employed at EITS, NDOT and at the Controller's Office earlier in his career.

d. Last bid date: 03/25/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

See the attached Authorization to Contract form for details.

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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	lhoove1	04/15/2022 15:22:20 PM
Division Approval	lhoove1	04/15/2022 15:22:53 PM
Department Approval	lhoove1	04/15/2022 15:22:58 PM
Contract Manager Approval	hbill1	04/18/2022 08:19:34 AM
EITS Approval	daxtel1	04/18/2022 17:00:32 PM
Budget Analyst Approval	mlynn	05/11/2022 13:31:12 PM



**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 7, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Michele Lynn, Executive Branch Budget Officer
Governor's Finance Office
Subject: BOARD OF EXAMINERS **ACTION** ITEM

APPROVED BY THE
BOARD OF EXAMINERS
AT
THEIR MEETING MAY 10 2022
#5
Initials

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

STATE CONTROLLER'S OFFICE

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the State Controller's Office (SCO) requests to contract with a former employee, Tony Pilant, to provide the required support and maintenance to the Advantage Financial system and associated applications.

Additional Information:

Mr. Pilant retired from the Department of Administration, Enterprise Information Technology Services (EITS), December 24, 2021 and is receiving pension benefits. He has 18 years of experience with the State of Nevada as an Information Technology (IT) Professional Data Base Administrator. Mr. Pilant's career with the state started in administrating and supporting these financial systems and this experience will provide the necessary specialized knowledge to keep the system functional until the transition of the new system takes place. SCO indicates their IT staff lack the in-house knowledge needed to maintain these systems and EITS reports they do not have staff with the instutional knowledge that can provide the much needed support and maintenance to Advantage, DAWN, IHUB, and/or Discoverer support since Mr. Pilant's retiring.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: _____

ACTION ITEM: _____

CATHERINE BYRNE, CPA
Controller

STATE OF NEVADA

LORI HOOVER, CPA
Chief Deputy Controller



**OFFICE OF THE
STATE CONTROLLER**

MEMORANDUM

TO: Michele K. Lynn, Executive Branch Budget Officer
FROM: Lori Hoover, CPA, Chief Deputy Controller
SUBJECT: Request for Authorization to Contract with a Former Employee
DATE: April 5, 2022

The State Controller's Office requests the May Board of Examiners' favorable approval to temporarily contract with former state employee Tony Pilant through contract with TK Solutions, effective upon approval through June 30, 2024.

Through this contract, Mr. Pilant's experience and expertise is essential to ensure successful operation and support of the Advantage Financial system and to keep the legacy system operational until the SMART21 project is complete. Mr. Pilant is being contracted due to the retirement and transfers to other agencies of knowledgeable and experienced system operators which has left the Controller's Office with a lack of in-house knowledge and experience. Mr. Pilant will work with the current Controller's Office IT team during troubleshooting of issues to ensure they understand the processes to correct the issues.

Additional Information:

Mr. Pilant retired from the Department of Administration, EITS, on December 24, 2021 and is receiving pension benefits.

Please contact me if additional information or clarification is needed.

Thank You.

Lori Hoover

Lori Hoover, CPA
Chief Deputy Controller



**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:	Tony Pilant			
Former Employee ID Number:	29432			
Former Job Title:	IT Professional 4			
Former Employee Agency:	Department of Administration, EITS			
Former Class and Grade:	Class:	7.921	Grade:	10
Former Employment Dates:	From:	11/12/2003	To:	12/24/2021
Requesting Agency:	State Controller's Office			
Vendor:	TK Solutions. 4760 Voltaire Street, Carson City, NV 89703. (775) 292-1229.			

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 the contracted services.
A	<p>Summarize scope of contract work.</p> <p>The State Controller's Office (SCO) is responsible for the maintenance and administration of the State's financial applications, including Advantage, DAWN, Discoverer, IHUB, and the Oracle applications. Due to retirements and transfers to other agencies, there is a lack of in-house knowledge and experience with State's financial applications at SCO. The SCO IT team has found support from an outside resource that has this kind of knowledge and experience to assist when issues arise with the State's financial applications that the SCO IT team cannot quickly fix. Tony Pilant has the experience and expertise that SCO IT team needs to troubleshoot and quickly address issues which could detrimentally affect the operations of the State's financial applications. Tony Pilant would work with current SCO IT team during troubleshooting issues to ensure they understand the processes to fix the issues. This should assist the SCO IT team with increasing their knowledge of the State's financial applications.</p>
B	<p>Document former job description.</p> <p>Tony Pilant was a senior DBA while employed with EITS and administered and supported EITS Oracle database servers and databases, as well as customer Oracle database servers and databases. The State's financial applications run on the Oracle database servers and databases. Before working for EITS, Tony Pilant was a senior DBA for NDOT and administered and supported NDOT's Oracle database servers and databases, and he occasionally provided support for NDOT's Advantage system. Most importantly, before working for NDOT, Tony Pilant worked for the State Controller's Office where he administered and supported SCO's Advantage, DAWN, Discoverer, and Oracle systems.</p>

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?
	Tony Pilant has specialized knowledge of the State's financial applications as he has worked at SCO IT on the State's financial systems in addition to supporting other Oracle database servers and databases which is the system that the State's financial systems run on. While Tony Pilant was working at EITS prior to his retirement, SCO had an interlocal agreement to have Tony Pilant assist SCO IT with occurring issues with the State's financial applications. The funds from this interlocal will be used to fund the contract with Tony Pilant. During troubleshooting of issues, knowledge transfer will occur to increase the SCO IT teams understanding of the State's financial applications. There is no timeframe of knowledge transfer because the State's financial applications continue to exhibit different, unrelated issues from past issues.
D	Explain why existing State employees within your agency cannot perform this function.
	Due to retirements and transfers to other agencies, all of SCO's previous Advantage, DAWN, Discoverer, IHUB, and Oracle administrators no longer work at SCO. Due to the lack of vendor maintenance support and extensive customization of the State's financial applications prior to the current SCO IT Team, none of the current SCO IT team have any in-depth knowledge and/or experience administering and supporting the State's financial applications. Issues arising with the State's financial applications are increasing in number and severity. It has not been possible for the SCO IT team to fix all the issues without assistance from Tony Pilant
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.
	Not related.
F	List contractors' hourly rate.
	\$100
G	List the range of comparable State employee rates.
	EITS charges \$99.56/hr for Oracle database support but they no longer have any staff that can provide Advantage, DAWN, IHUB, and/or Discoverer support since Tony Pilant's retiring from EITS.
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?
	NA
I	Document justification for hiring contractor.
	<p>List of recent issues that SCO IT has needed outside Advantage, DAWN, Discoverer, IHUB, and Oracle technical support with, due to a lack of internal expertise:</p> <ul style="list-style-type: none"> 6/17/2021 - 6/28/2021: DAWN Time/Seed Issue. 12,000 records in Advantage did not load to DAWN correctly. While with EITS, Tony Pilant helped us to get those records loaded to DAWN. This required several restores, rebuilds of control files, and attempts at loading the docs. 8/2021 - 12/2021: DAWN Budget Account Issue Help. A work program in DAWN is missing a line of coding. While with EITS, Tony Pilant was researching and helping us get this sorted out, but then he retired. We tried several attempts at loading the line, but nothing worked as of yet and we still haven't been able to resolve this issue. Several times between 6/2021-12/2021: Rebuild Control files on DANDEV12 and DAWNDR. While with EITS, Tony Pilant helped us rebuild the Control files on DAWNDEV12 and DAWNDR. This is not an easy process, and one that SCO IT needed help with. 6/2021 - 12/2021: DBlinks on DAWNdev12 and DAWNDR. While with EITS, Tony Pilant helped us get the DBLINKS pointed to the correct databases. Advantage/DAWN sync. Tony knows how Advantage & DAWN work together to stay in Sync. SCO IT has some

	limited knowledge of the Advantage side of this sync, but since the Advantage/DAWN administrators left SCO, there is no one remaining who fully knows the DAWN side.
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)
	Starting upon approval from the Board of Examiners and ending June 30, 2024, the one year after the scheduled date of the State's new ERP financial system – SAP – will be implemented. SCO will need the current State financial system - Advantage - to be operational for one year to complete the FY23 Annual Comprehensive Financial Report.
L	Will the former employee be working full time or part time? If part time, how many hours?
	Tony Pilant will only assist when the State's financial applications have issues that the SCO IT team cannot fix. Depending on the severity of the issues, we assume it will be part time up to 20 hours a week.
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No.
Comments – Provide any additional comments:	

Approval for Authorization to Contract with a Former Employee:

Lori Hoover

Signature of Agency Head Authorizing Request

3/14/2022

Date

N/A

Purchasing Administrator Signature (if a Statewide Contract)

Date

M. L. H.

Budget Analyst Signature

4.7.22

Date

Susan B.

Clerk of the Board of Examiners Signature

MAY 10 2022

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: **25885**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ECONOMY WINDOW CLEANERS**Contractor Name: **ECONOMY WINDOW CLEANERS**Address: **ECONOMY WINDOW CLEANERS
2501 MEADOWBROOK LN**City/State/Zip: **CARSON CITY, NV 89701**Contact/Phone: **775-588-3860**Vendor No.: **T27044784**NV Business ID: **NV20222393472**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building and Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/15/2026**Contract term: **3 years and 332 days**4. Type of contract: **Contract**Contract description: **Window Cleaning**

5. Purpose of contract:

This is a new contract to provide window cleaning on an as-needed basis for state-owned buildings throughout northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Other basis for payment: \$55 per man hour; de-ionized water fed pole system/ladder work/ boom work and pressure washing

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings and Grounds does not have the manpower or equipment needed to maintain the integrity of state buildings.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower and equipment necessary for these jobs.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Cheryl Warren, Custodial Supervisor III Ph: 775-684-1809

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	03/23/2022 13:39:39 PM
Division Approval	tmlazz1	03/24/2022 15:33:57 PM
Department Approval	ssands	05/16/2022 15:28:54 PM
Contract Manager Approval	ssands	05/16/2022 15:28:57 PM
Budget Analyst Approval	nhovden	05/19/2022 14:50:46 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: **25892**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **EIKELBERGER AWNING & DRAPERY Co.**Contractor Name: **EIKELBERGER AWNING & DRAPERY Co.**Address: **1903 HYMER AVE**City/State/Zip: **SPARKS, NV 89431-5539**Contact/Phone: **775-358-1903**Vendor No.: **T80112468**NV Business ID: **NV20081356503**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % B&G rental income revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/09/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/01/2022**Contract term: **53 days**4. Type of contract: **Contract**Contract description: **Window Coverings**

5. Purpose of contract:

This is a new contract to provide for the removal and replacement of eight (8) window coverings located in the Capitol in the Governor's staff area.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

CAT 14 Project requires material and manpower to complete this project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

CAT14 Project B&G does not have the materials or manpower for 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: **Not Applicable**

c. Why was this contractor chosen in preference to other?

best pricing

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	04/11/2022 15:29:54 PM
Division Approval	jkidd	04/12/2022 09:36:59 AM
Department Approval	ssands	04/27/2022 12:29:12 PM
Contract Manager Approval	ssands	04/27/2022 12:30:53 PM
Budget Analyst Approval	nkephart	05/09/2022 13:34:44 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: **26013**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	ENTERPRISE JANITORIAL INC
Agency Code:	082	Contractor Name:	ENTERPRISE JANITORIAL INC
Appropriation Unit:	1349-12	Address:	PO BOX 19913
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89511-2559
If "No" please explain:	Not Applicable	Contact/Phone:	Ana Arroyo 775-691-2939
		Vendor No.:	T32003728A
		NV Business ID:	NV20141642364

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 Rental Revenue Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **3 years and 356 days**4. Type of contract: **Contract**Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that provides ongoing janitorial services to Stewart Building #6, 5587 Wa Pai Shone Ave. Carson City

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,864.80**

Payment for services will be made at the rate of \$2,038.85 per month

Other basis for payment: \$55.00 per hour/per cleaning for extra cleaning or emergency cleaning

II. JUSTIFICATION

7. What conditions require that this work be done?

Janitorial services provide a sanitary and healthy environment as well as maintain the integrity of properties and the occupants that inhabit these facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds do not have the manpower to facilitate the needs of another property.

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):

PJM
McNeils Cleaning
Enterprise Janitorial
High Sierra Cleaning
WOW Cleaning

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest bid

d. Last bid date: 03/30/2022 Anticipated re-bid date: 03/30/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Cheryl Warren, Custodial Supervisor 3 Ph: 775-684-1809

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	04/12/2022 11:39:41 AM
Division Approval	jkidd	04/13/2022 09:30:34 AM
Department Approval	ssands	04/27/2022 12:38:31 PM
Contract Manager Approval	ssands	04/27/2022 12:38:34 PM
Budget Analyst Approval	nkephart	05/10/2022 12:24:17 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: **25862**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ENTERPRISE JANITORIAL INC**Contractor Name: **ENTERPRISE JANITORIAL INC**Address: **PO BOX 19913**City/State/Zip: **RENO, NV 89511-2559**Contact/Phone: **775-691-2939**Vendor No.: **T32003728A**NV Business ID: **NV20141642364**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings and Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/09/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/22/2026**Contract term: **3 years and 318 days**4. Type of contract: **Contract**Contract description: **Hard floor care**

5. Purpose of contract:

This is a new contract to provide ongoing hard floor care for various state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: various price depending on the sq. footage of the property.

II. JUSTIFICATION

7. What conditions require that this work be done?

Hard floor care is crucial to maintain the longevity of VCT, LVT, polished concrete, etc., in various state-owned Buildings not covered under janitorial contracts. To have at least 3 companies under contract for this process.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower nor the equipment needed to handle the additional workload.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/22/2022 13:11:29 PM
Division Approval	tmilazz1	03/30/2022 15:14:51 PM
Department Approval	ssands	04/29/2022 07:24:42 AM
Contract Manager Approval	ssands	05/09/2022 14:03:39 PM
Budget Analyst Approval	nkephart	05/09/2022 14:23:17 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: **25827**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MCNEILS CLEANING SERVICE INC**Contractor Name: **MCNEILS CLEANING SERVICE INC**Address: **PO BOX 40916**City/State/Zip: **RENO, NV 89504-4916**Contact/Phone: **775/359-4422**Vendor No.: **T81015272**NV Business ID: **NV20061269584**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings & Grounds Rental Income Revenue**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/17/2026**Contract term: **3 years and 312 days**4. Type of contract: **Contract**Contract description: **Emergency Janitorial**

5. Purpose of contract:

This is a new contract to provide ongoing emergency janitorial services for various state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Buildings and Grounds does not have the manpower or equipment needed if an emergency situation arises, (ie) sanitizing, buildings without janitorial contracts, contract termination.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

currently do not have emergency contracts on contract.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):

**WOW CLEANING
ENTERPRISE JANITORIAL
MCNEILS CLEANING
PREMIER JANITORIAL**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/17/2022 15:30:38 PM
Division Approval	tmilazz1	03/17/2022 16:10:56 PM
Department Approval	ssands	04/22/2022 10:03:21 AM
Contract Manager Approval	ssands	04/22/2022 10:03:23 AM
Budget Analyst Approval	nkephart	05/10/2022 12:07:49 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: **26223**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	MCNEILS CLEANING SERVICE INC
Agency Code:	082	Contractor Name:	MCNEILS CLEANING SERVICE INC
Appropriation Unit:	1349-12	Address:	PO BOX 40916
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89504-4916
If "No" please explain:	Not Applicable	Contact/Phone:	775/359-4422
		Vendor No.:	T81015272
		NV Business ID:	NV20061269584

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**

Anticipated BOE meeting date 07/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 43 days**4. Type of contract: **Contract**Contract description: **Janitorial**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services located at Cultural Center, Stewart #1

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$64,104.00**

Payment for services will be made at the rate of \$1,221.00 per monthly

Other basis for payment: \$874.00 per window cleaning service

II. JUSTIFICATION

7. What conditions require that this work be done?

B&G does not have the manpower for this property. Janitorial services are needed to provide a sanitary, and healthy environment as well as maintain the integrity of properties and the occupants that inhabit these facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

B&G does not have the manpower to facilitate the needs of another property.

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):

WOW Cleaning
PJM
McNeil's Cleaning
Cecilia Chavez

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best cost for the building

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Cheryl Warren, Custodial Supervisor III Ph: 684-1809

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	05/04/2022 10:13:40 AM
Division Approval	jkidd	05/04/2022 10:37:03 AM
Department Approval	ssands	05/16/2022 08:41:15 AM
Contract Manager Approval	ssands	05/16/2022 08:42:16 AM
Budget Analyst Approval	vmilazz1	05/19/2022 09:45:20 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: **21013**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **OVERHEAD DOOR CO. OF SIERRA NV RENO**Agency Code: **082**Contractor Name: **OVERHEAD DOOR CO. OF SIERRA NV RENO**Appropriation Unit: **1349-12**Address: **1290 HOLCOMB AVE**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89502-2445**

If "No" please explain: Not Applicable

Contact/Phone: **775-322-4621**Vendor No.: **PUR0002873**NV Business ID: **NV19791008459**To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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 % B&G Buildings & Grounds Rent Income Revenue

Agency Reference #: **ASD 2830338**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2018**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **10/31/2022**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Door repair**

5. Purpose of contract:

This is the first amendment to the original contract which provides repair and maintenance to all types of overhead doors. This amendment increases the maximum amount from \$15,000 to \$25,000 due to aging equipment and future repairs.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$15,000.00	\$15,000.00	\$15,000.00	Yes - Info
2. Amount of current amendment (#1):	\$10,000.00	\$10,000.00	\$25,000.00	Yes - Info
3. New maximum contract amount:	\$25,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings, rooms, basements, floors, windows, furniture and appurtenances are to be kept clean, orderly and presentable as befitting public property

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is beyond the expertise of Buildings & Grounds 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):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several contractors and Per SAM 0338.0, each contractor will be contacted to submit bids on projects. This is an open-ended contract.

d. Last bid date: 08/17/2018 Anticipated re-bid date: 08/30/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	04/22/2022 11:56:41 AM
Division Approval	jkidd	04/22/2022 13:38:19 PM
Department Approval	ssands	04/22/2022 13:41:15 PM
Contract Manager Approval	ssands	05/19/2022 13:13:23 PM
Budget Analyst Approval	vmilazz1	05/23/2022 17:03:47 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: **25836**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PIERROTT, ANA L
Agency Code: 082	Contractor Name: PIERROTT, ANA L
Appropriation Unit: 1349-12	Address: ENTERPRISE JANITORIAL SERVICE PO BOX 19913
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: 775-691-2939
	Vendor No.: T81101890
	NV Business ID: NV20141642364

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings & Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/17/2026**Contract term: **3 years and 312 days**4. Type of contract: **Contract**Contract description: **Emergency Janitorial**

5. Purpose of contract:

This is a new contract to provide ongoing emergency janitorial services for various state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Buildings and Grounds does not have the manpower or equipment needed if an emergency situation arises, (ie) sanitizing, buildings without janitorial contracts, contract termination.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

buildings and Grounds does not have the manpower to handle the additional workload9. 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):

**Enterprise Janitorial
Premier Janitorial
McNeils Cleaning
WOW Cleaning**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/17/2022 13:53:04 PM
Division Approval	tmilazz1	03/17/2022 15:36:18 PM
Department Approval	ssands	03/30/2022 08:02:52 AM
Contract Manager Approval	ssands	03/30/2022 08:03:10 AM
Budget Analyst Approval	nkephart	05/10/2022 12:12:11 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: **26056**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: Alpin Collective LLC
Agency Code: 082	Contractor Name: PuroClean of South Reno
Appropriation Unit: 1349-12	Address: 3800 Vancouver Drive
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: 775-446-4646
	Vendor No.: pending
	NV Business ID: NV20201848039

To what State Fiscal Year(s) will the contract be charged? **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 % B&G Building Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/05/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **56 days**4. Type of contract: **Contract**Contract description: **Restoration**

5. Purpose of contract:

This is a new contract to provide for restoration and or remediation services at the State Capitol Building basement, south end.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,112.00**

Other basis for payment: State Capitol Building \$11,127.00 (no overtime); Encapsulate all exposed metal framing \$985.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Remediations and restoration services are needed at the State Capitol Basement to provide a healthy environment as well as maintain the integrity of the property and the occupants that inhabit this facility.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds do not have restoration or remediation contracts available

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price

d. Last bid date: 04/13/2022 Anticipated re-bid date: 04/13/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

David Van Ornum, Facility Supervisor III Ph: 690-4526

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	04/19/2022 08:02:30 AM
Division Approval	jkidd	04/19/2022 15:09:42 PM
Department Approval	ssands	04/22/2022 10:08:19 AM
Contract Manager Approval	ssands	04/22/2022 10:08:24 AM
Budget Analyst Approval	nkephart	05/05/2022 08:46:40 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: **25207**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: QCS, LLC
Agency Code: 082	Contractor Name: QCS, LLC
Appropriation Unit: 1349-12	Address: 61 CONTINENTAL DR STE 200
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89509-3432
If "No" please explain: Not Applicable	Contact/Phone: Glenda Hubbard 775-359-1691
	Vendor No.: T80912477
	NV Business ID: NV20212224316

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rental Income Revenues

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/11/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/14/2026**Contract term: **3 years and 249 days**4. Type of contract: **Contract**Contract description: **HVAC Maintenance**

5. Purpose of contract:

This is a new contract that provides ongoing heating, ventilation, and air conditioning routine maintenance services and repairs to the Reno DMV Warehouse.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,120.50**

Payment for services will be made at the rate of \$90.00 per hour

Other basis for payment: Routine maintenance will be billed quarterly at \$728.00 (\$728 x 4 = \$2,912 / \$2,912 x 4 = \$11,648 for routine maintenance). Emergency services will be billed at \$135.00 per hour. Holiday services will be billed at \$180.00 per hour.

II. JUSTIFICATION

7. What conditions require that this work be done?

Location requires routine maintenance to maintain systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

QCS
BCS
Gardner Mechanical Services
Elite Air Systems
SGF Engineering LLC
RHP
Battle Born Boiler

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest bidder

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	11/05/2021 14:11:20 PM
Division Approval	tmlazz1	01/19/2022 09:44:21 AM
Department Approval	ssands	04/20/2022 15:01:57 PM
Contract Manager Approval	ssands	05/10/2022 13:10:15 PM
Budget Analyst Approval	nkephart	05/11/2022 13:34:00 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: **25912**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WISE CONSULTING & TRAINING INC**Contractor Name: **WISE CONSULTING & TRAINING INC**Address: **5400 MILL ST STE A**City/State/Zip: **RENO, NV 89502-0303**Contact/Phone: **775-827-2717**Vendor No.: **T81023564**NV Business ID: **NV19951170978**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings and Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/04/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/28/2026**Contract term: **3 years and 329 days**4. Type of contract: **Contract**Contract description: **Environ. Consulting**

5. Purpose of contract:

This is a new contract that continues ongoing environmental and hazardous waste management services for state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Buildings & Grounds does not/cannot provide this service. This contract is in place for ongoing environmental and hazardous waste management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Currently only one contract for this service. Multiple buildings require this service for the management of environmental and hazardous waste.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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/30/2022 11:25:30 AM
Division Approval	jkidd	04/18/2022 11:41:33 AM
Department Approval	ssands	04/18/2022 11:44:32 AM
Contract Manager Approval	ssands	04/18/2022 11:44:36 AM
Budget Analyst Approval	nkephart	05/04/2022 20:39:08 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: **25817**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	WOW CLEANING CORPORATION
Agency Code:	082	Contractor Name:	WOW CLEANING CORPORATION
Appropriation Unit:	1349-12	Address:	52 GLEN CARRAN CIR
Is budget authority available?:	Yes	City/State/Zip	SPARKS, NV 89431-5830
If "No" please explain:	Not Applicable	Contact/Phone:	775/322-4787
		Vendor No.:	T27041430
		NV Business ID:	NV20141289535

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings & Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/04/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/16/2026**Contract term: **3 years and 317 days**4. Type of contract: **Contract**Contract description: **Emergency Janitorial**

5. Purpose of contract:

This is a new contract to provide ongoing emergency janitorial services for all state-owned buildings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

An emergency backup janitorial contract to cover state-owned buildings in case the need emerges for extra sanitizing, for coverage of buildings not covered under janitorial contracts

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower to handle the additional workload9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/17/2022 09:21:58 AM
Division Approval	tmilazz1	03/17/2022 12:17:18 PM
Department Approval	ssands	03/29/2022 08:46:21 AM
Contract Manager Approval	ssands	03/29/2022 08:46:24 AM
Budget Analyst Approval	nkephart	05/04/2022 10:35:22 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: **25861**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WOW CLEANING CORPORATION**Contractor Name: **WOW CLEANING CORPORATION**Address: **52 GLEN CARRAN CIR**City/State/Zip: **SPARKS, NV 89431-5830**Contact/Phone: **775-322-4787**Vendor No.: **T27041430**NV Business ID: **NV201401289535**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Buildings and Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/09/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/21/2026**Contract term: **3 years and 317 days**4. Type of contract: **Contract**Contract description: **Hard Floor Care**

5. Purpose of contract:

This is a new contract to provide ongoing care of hard floors in state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: \$35 per man hour; \$0.14 per sq. ft. for supplies

II. JUSTIFICATION

7. What conditions require that this work be done?

Hard floor care is crucial to maintain the longevity of VCT, LVT, polished concrete, etc., in various state-owned Buildings not covered under janitorial contracts. To have at least 3 companies under contract for this process.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower or equipment needed to handle the additional workload.

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):

**Enterprise Janitorial
WOW Cleaning**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/30/2022 16:12:16 PM
Division Approval	tmilazz1	03/30/2022 16:16:36 PM
Department Approval	ssands	04/27/2022 12:36:41 PM
Contract Manager Approval	ssands	04/27/2022 12:36:43 PM
Budget Analyst Approval	nkephart	05/09/2022 14:43:00 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: **25883**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	WOW CLEANING CORPORATION
Agency Code:	082	Contractor Name:	WOW CLEANING CORPORATION
Appropriation Unit:	1349-12	Address:	52 GLEN CARRAN CIR
Is budget authority available?:	Yes	City/State/Zip	SPARKS, NV 89431-5830
If "No" please explain:	Not Applicable	Contact/Phone:	775-322-4787
		Vendor No.:	T27041430
		NV Business ID:	NV20141289535
To what State Fiscal Year(s) will the contract be charged?	2022-2026		

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 % Buildings and Grounds Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/09/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/23/2026**Contract term: **3 years and 319 days**4. Type of contract: **Contract**Contract description: **Window Cleaning**

5. Purpose of contract:

This is a new contract that provides for window cleaning for various state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$100 per man hour plus cost of boom when needed

II. JUSTIFICATION

7. What conditions require that this work be done?

Window cleaning in various state-owned buildings assists in building longevity, to keep buildings' appearance to state standards. There is currently only one vendor for this service.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower or the equipment to handle the additional workload.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jpierro1	03/23/2022 13:38:59 PM
Division Approval	jkidd	04/27/2022 13:39:06 PM
Department Approval	ssands	04/27/2022 14:25:34 PM
Contract Manager Approval	ssands	04/27/2022 14:25:39 PM
Budget Analyst Approval	nkephart	05/09/2022 14:35:39 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: **25976**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WOW CLEANING CORPORATION**Contractor Name: **WOW CLEANING CORPORATION**Address: **52 GLEN CARRAN CIR**City/State/Zip: **SPARKS, NV 89431-5830**Contact/Phone: **775/322-4787**Vendor No.: **T27041430**NV Business ID: **NV20141289535**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 Rental Income Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/23/2022**Anticipated BOE meeting date **07/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/30/2026**Contract term: **3 years and 312 days**4. Type of contract: **Contract**Contract description: **Janitorial Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services for the Purchasing Warehouse located in Sparks.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,591.28****II. JUSTIFICATION**

7. What conditions require that this work be done?

Buildings and Grounds does not have the manpower needed to maintain the integrity of additional properties.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

PJM
McNeils Cleaning
Enterprise Janitorial
CC Cleaning
WOW Cleaning

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest bid

d. Last bid date: 03/23/2022 Anticipated re-bid date: 03/16/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Cheryl Warren, Custodial Supervisor Ph: 775-684-1809

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	04/04/2022 15:30:08 PM
Division Approval	jkidd	04/04/2022 16:12:30 PM
Department Approval	ssands	04/18/2022 11:17:44 AM
Contract Manager Approval	ssands	05/19/2022 13:14:41 PM
Budget Analyst Approval	vmilazz1	05/23/2022 16:34:22 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: **26153**

Agency Name: ADMIN - HEARINGS AND APPEALS DIVISION	Legal Entity Name: Sheila Moore
Agency Code: 089	Contractor Name: Sheila Moore
Appropriation Unit: 1015-04	Address: 4730 S. Edmonds Drive
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89701
If "No" please explain: Not Applicable	Contact/Phone: 702-885-5179
	Vendor No.: T29045448
	NV Business ID: NV20222425422
To what State Fiscal Year(s) will the contract be charged?	2022-2024
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 %
	Funded by B&I, Div. of Ind. Rel. Fund for Workers Comp & Safety NRS 616A.425

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/17/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/10/2024**Contract term: **1 year and 359 days**4. Type of contract: **Contract**Contract description: **Hearing Officer**

5. Purpose of contract:

This is a new contract to provide services as a Hearings Officer to handle cases related to Workers Compensation and Victims of Crime appeals as needed.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$81,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The workload has increased exponentially. Agency is requesting in the upcoming budget build for one additional Hearing Officer to ensure constituents are heard in a timely manner per NRS616C.330

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized position that requires knowledge of Nevada's NRS's & regulations and case law that governs workers' compensation cases.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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jvictor	04/26/2022 09:37:01 AM
Division Approval	jkidd	04/26/2022 14:17:32 PM
Department Approval	ssands	05/02/2022 09:57:11 AM
Contract Manager Approval	ssands	05/17/2022 11:50:14 AM
Budget Analyst Approval	jcoope8	05/17/2022 11:52:48 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: **26256**Agency Name: **GOVERNOR'S OFFICE OF
ECONOMIC DEVELOPMENT**Agency Code: **102**Appropriation Unit: **1526-24**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-UNLV**Contractor Name: **BOARD OF REGENTS-UNLV**Address: **UNLV OFFICE OF CONTROLLER
4505 MARYLAND PKWY MS 1005**City/State/Zip: **LAS VEGAS, NV 89154-1005**Contact/Phone: **Office of Sponsored Programs, Grants &
Contracts 702-895-1357**Vendor No.: **D35000813**NV Business ID: **N/A**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 **05/23/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2022**Contract term: **130 days**4. Type of contract: **Interlocal Agreement**Contract description: **Professional Service**

5. Purpose of contract:

This is a new interlocal agreement to provide facilitation for the development of a clean energy ecosystem strategy which includes research and development, workforce training, manufacturing, extraction, refining, production, recycling, marketing, and sustainability.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

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?

The roundtable will allow for private industry, government, tribal government, academia, environmental interests, as well as other interested constituencies to provide input on the development of a discussion paper that will outline options for the Governor and state agencies regarding state policy and budget proposals directly related to developing a clean energy ecosystem strategy for the State of Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the time nor expertise to write a clean energy strategy.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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Numerous other state agencies have used this vendor's services including Public and Behavioral Health, Department of Transportation, Child and Family Division, Rehabilitation Division, and the Department of Education. Their services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	Icopelan	05/18/2022 16:54:45 PM
Division Approval	Icopelan	05/18/2022 16:54:48 PM
Department Approval	Icopelan	05/18/2022 16:54:51 PM
Contract Manager Approval	Icopelan	05/18/2022 16:54:54 PM
Budget Analyst Approval	tsmorra	05/23/2022 08:06:40 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: **26066**Agency Name: **DEPARTMENT OF TAXATION**Agency Code: **130**Appropriation Unit: **2361-13**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER INC**Contractor Name: **GARTNER INC**Address: **PO BOX 911319**City/State/Zip: **DALLAS, TX 75391-1319**Contact/Phone: **239/561-4815**Vendor No.: **PUR0005339A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **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 **07/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **364 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **Work Plan**

5. Purpose of contract:

This is a new service agreement under master service agreement #99SWC-NV21-8568 which provides research and advisory services related to information technology. This service agreement provides access to research and provides advice related to the departments information technology needs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,228.00**

Other basis for payment: Gartner will invoice annually in advance for all services.

II. JUSTIFICATION

7. What conditions require that this work be done?

Senate Bill No. 414, approved and passed during the 2021 Legislative Session, makes an appropriation to the Department of Taxation for the continuing costs of the modernization of the Unified Tax System as part of Project MYNT.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State Master Service 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 Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? 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	jgrimmer	05/03/2022 08:57:43 AM
Division Approval	jgrimmer	05/03/2022 08:57:46 AM
Department Approval	jgrimmer	05/03/2022 08:57:50 AM
Contract Manager Approval	lhans4	05/03/2022 11:21:57 AM
EITS Approval	daxtel1	05/05/2022 11:15:56 AM
Budget Analyst Approval	hfield	05/11/2022 15:08:02 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: **25933**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Agency Code: **180**Appropriation Unit: **1385-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Cashman Equipment Company
Contractor Name: **Cashman Equipment Company**
Address: **600 Glendale Avenue**City/State/Zip: **Sparks, NV 89431**

Contact/Phone: 775-895-2235

Vendor No.: PUR0000249

NV Business ID: NV19601000406

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Facility usage fee
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 **05/12/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 50 days**4. Type of contract: **Contract**Contract description: **Generator Services**

5. Purpose of contract:

This is a new contract to provide ongoing service and repair on an as-needed basis for the Generator Set at the EITS computer facility and its associated peripheral equipment

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$41,584.72**

Other basis for payment: \$1,500 x 4 yrs = \$6,000 for emergency repairs.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Computer Facility is required to maintain two sources of backup power, the Uninterruptable Power Supply System and the Generator Set.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Employees do not have the expertise to maintain and repair the equipment9. 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):

**Industrial Equip Repair
Nevada Energy Systems
Cashman Equipment**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best pricing

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

John Hannah, Facility Supervisor Ph: 775-684-4343

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpierro1	03/31/2022 16:01:06 PM
Division Approval	jkidd	04/01/2022 13:35:24 PM
Department Approval	ssands	05/10/2022 07:54:07 AM
Contract Manager Approval	ssands	05/10/2022 07:54:10 AM
Budget Analyst Approval	mranki1	05/12/2022 10:31:56 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: **26340**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: **NAVAL FACILITIES ENGINEERING COMMAND SOUTHWEST**Contractor Name: **NAVAL FACILITIES ENGINEERING**Address: **REAL ESTATE DEPT
750 PACIFIC HIGHWAY, 4TH FLOOR
SAN DIEGO, CA 92132**City/State/Zip: **ALIA SUMPTER 619-705-4476**Contact/Phone: **Vendor No.:**NV Business ID: **GOVERNMENT ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **364 days**4. Type of contract: **Revenue Contract**Contract description: **Rack Space Rental**

5. Purpose of contract:

This is a new revenue contract that continues to provide rack space at Austin Peak in Lander County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,560.57****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?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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	dcarlso4	05/13/2022 14:48:02 PM
Division Approval	tmilazz1	05/13/2022 15:25:57 PM
Department Approval	ssands	05/13/2022 15:26:42 PM
Contract Manager Approval	ssands	05/13/2022 15:33:02 PM
Budget Analyst Approval	mranki1	05/23/2022 13:45:40 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: **26117**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2673-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JAMS ADR Services**Contractor Name: **JAMS ADR Services**Address: **7160 Rafael Rivera Way Ste 400**City/State/Zip: **Las Vegas, NV 89113**Contact/Phone: **Lynne Hart 702-835-7806**

Vendor No.:

NV Business ID: **NV20051356067**To what State Fiscal Year(s) will the contract be charged? **2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/25/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/14/2022**Contract term: **50 days**4. Type of contract: **Contract**Contract description: **Hearing Officers**

5. Purpose of contract:

This is a new contract to provide arbitration and alternative dispute resolution services to resolve a dispute between a member of a school organization team within Clark County School District, and Clark County School District.

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?

In January 2022, a dispute resolution was requested by a member of a school organizational team within the Clark County School District, and as per NAC 388G.100, the resolution was determined necessary, involving the need for hearing officers for each party.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Due to the expertise of education law, JAMS was selected specific for this particular dispute resolution.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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/21/2022 16:00:26 PM
Division Approval	carnol1	04/22/2022 08:24:26 AM
Department Approval	carnol1	04/22/2022 08:24:28 AM
Contract Manager Approval	mwadsw01	04/22/2022 08:24:49 AM
Budget Analyst Approval	mranki1	04/25/2022 13:54:17 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: **26071**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2675-22**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Board of Regents NSHE obo UNR

Contractor Name: **Board of Regents NSHE obo UNR**Address: **1644 N Virginia Street
Mail stop 325**City/State/Zip: **Reno, NV 89557-0325**

Contact/Phone: Tiffany Roller 775-784-4746

Vendor No.: D35000816

NV Business ID: NA

To what State Fiscal Year(s) will the contract be charged? **2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/22/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **69 days**4. Type of contract: **Interlocal Agreement**Contract description: **SETNA**

5. Purpose of contract:

This is a new interlocal agreement to provide the State Educational Technology Needs Assessment for 2022.

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?

NRS 388.798 (6) states that each spring semester an assessment is required for each school district in educational technology.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State Educational Technology Needs Assessment will be administered by professionals with expertise in Mathematics and Statistical analysis with assessment experience through the University of Nevada Reno's Department of Mathematics and Statistics and educational background.

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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/20/2022 06:51:58 AM
Division Approval	carnol1	04/20/2022 07:05:59 AM
Department Approval	carnol1	04/20/2022 07:06:01 AM
Contract Manager Approval	mwadsw01	04/20/2022 08:01:15 AM
Budget Analyst Approval	mranki1	04/22/2022 14:08:06 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26275**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	Department of Administration Hearings Division
Agency Code:	300	Contractor Name:	Department of Administration Hearings Division
Appropriation Unit:	2705-04	Address:	2200 S Rancho Drive Ste 220
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89102
If "No" please explain:	Not Applicable	Contact/Phone:	7024862525
		Vendor No.:	
		NV Business ID:	NA

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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 %
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 **05/13/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **3 years and 49 days**4. Type of contract: **Interlocal Agreement**Contract description: **Hearings Officer**

5. Purpose of contract:

This is a new contract to to provide a Hearings Officer to conduct dispositions and impartial administrative hearings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Department of Education is required to conduct a hearing if a matter is contested; to ensure the hearings are conducted by a third party, NDE has reached out to the Department of Administration to secure trained expertise in the process for immediate and future needs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Department of Education does not currently have on staff trained experts in the legal process with the prerequisite knowledge for this type of need; also, by obtaining services from trained professionals outside of the Department, NDE offers more of an impartial representation from an unbiased expert.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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	05/09/2022 13:59:19 PM
Division Approval	carnol1	05/09/2022 14:24:02 PM
Department Approval	carnol1	05/09/2022 14:24:05 PM
Contract Manager Approval	mwadsw01	05/09/2022 16:48:00 PM
Budget Analyst Approval	mranki1	05/13/2022 11:19:20 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: **25246**Amendment
Number: **1**Agency Name: **NDE - DEPARTMENT OF
EDUCATION**Legal Entity
Name: **International Institute for Restorative
Practices**Agency Code: **300**Contractor Name: **International Institute for Restorative
Practices**Appropriation Unit: **2710-13**

Address:

Is budget authority
available?: **Yes**City/State/Zip **Bethlehem, PA 10818**

If "No" please explain: Not Applicable

Contact/Phone: **610-653-5113**Vendor No.: **T32011750**NV Business ID: **NV20212257877**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **11/30/2021**
Examiner's approval?Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **1 year and 211 days**4. Type of contract: **Contract**Contract description: **Restorative Justice**

5. Purpose of contract:

This is the First Amendment to the original contract which provides virtual statewide trainings for Restorative Justice Practices for Educators training, specifically for the the campus or district leader/educator who wishes to become a Restorative Practices Trainer of Staff in Tier 1, 2 and 3 supports and interventions schoolwide and in classrooms. This amendment increases the maximum amount of the contract from \$67,795.20 to \$95,545.20 to add two additional training sessions, one addition training session for trainers and to provide for 58 additional district leaders to become restorative trainers.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$67,795.20	\$67,795.20	\$67,795.20	Yes - Info
2. Amount of current amendment (#1):	\$27,750.00	\$27,750.00	\$95,545.20	Yes - Info
3. New maximum contract amount:	\$95,545.20			

II. JUSTIFICATION

7. What conditions require that this work be done?

In accordance with NRS 392.4644 and passage of the School Safety omnibus bills, Senate Bill 89 and Assembly Bill 168, during the 2019 Session of the Nevada Legislature, each school district shall complete Restorative Discipline Plans, formally known as Progressive Discipline Plans.

Restorative Practices is an alternative to exclusionary disciplinary practices, which removed students from the academic environment; instead, restorative justice seeks to repair the harm done when a standard of conduct is violated.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This training allows the opportunity to focus on Tier I, II and III for Restorative Practices to educators throughout the state, which many districts have been requesting. This training is built specifically for the campus or district leader/educator who wishes to become a Restorative Practices Trainer for Staff in Tier I, II, and III supports and interventions schoolwide.

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?

This vendor was chosen because they offer a Train the Trainer model as requested by the state in a MTSS framework. The pricing and tiers allow for flexibility in meeting the state's training needs based on the tiered-trainings offered. This vendor has been in business for 21 years; has a research study to support their training; and are an accredited graduate program.

- d. Last bid date: 08/09/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

- b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/14/2022 10:39:38 AM
Division Approval	carnol1	04/14/2022 11:14:50 AM
Department Approval	carnol1	04/14/2022 11:14:55 AM
Contract Manager Approval	mwadsw01	04/19/2022 12:04:20 PM
Budget Analyst Approval	mranki1	04/19/2022 14:07:28 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: **25046** Amendment Number: **1**

Agency Name: **NDE - DEPARTMENT OF EDUCATION** Legal Entity Name: **National Educators for Restorative Practices**

Agency Code: **300** Contractor Name: **National Educators for Restorative Practices**

Appropriation Unit: **2710-13** Address: **228 Jordan PI**

Is budget authority available?: **Yes** City/State/Zip: **Boerne, TX 78006**

If "No" please explain: Not Applicable Contact/Phone: **210-232-1124**

Vendor No.: **T29044115**

NV Business ID: **NV20212086809**

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/09/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2023**

Termination Date:

Contract term: **1 year and 232 days**4. Type of contract: **Contract**Contract description: **Restorative Justice**

5. Purpose of contract:

This is the First Amendment to the original contract which provides virtual training for restorative justice practices for campus or district leaders and educators for supports and interventions in the classrooms. This amendment increases the maximum amount of the contract from \$72,000 to \$99,000 to add two additional virtual training sessions.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$72,000.00	\$72,000.00	\$72,000.00	Yes - Info
2. Amount of current amendment (#1):	\$27,000.00	\$27,000.00	\$99,000.00	Yes - Info
3. New maximum contract amount:	\$99,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

In accordance with NRS 392.4644, and passage of the School Safety omnibus bills, Senate Bill 89 and Assembly Bill 168, during the 2019 Legislative Session, each school district shall complete Restorative Discipline Plans, formally known as Progressive Discipline Plans.

Restorative Practices is an alternative to exclusionary disciplinary practices, which removed students from the academic environment; instead, restorative justice seeks to repair the harm done when a standard of conduct is violated.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This training allows the opportunity to focus on Tier I for Restorative Practices to educators throughout the state, which many districts have been requesting. Educators across the state will then be Certified Specialists in Restorative Practices through NEDRP. This training is built specifically for the campus or district leaders/educator who wishes to support their staff in sustaining meaningful relationships with students.

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?

This vendor was selected because they can provide Tier I restorative practices to educators in leadership roles in districts throughout the state. NEDRP tools are based in research that have data showing how the tools have impacted school discipline data, recidivism, and teacher turnover. NEDRP considers their tools best practices and unpack them to educators as best practices.

- d. Last bid date: 08/09/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	04/14/2022 11:14:55 AM
Division Approval	carnol1	04/14/2022 11:15:39 AM
Department Approval	carnol1	04/14/2022 11:15:45 AM
Contract Manager Approval	mwadsw01	04/19/2022 12:03:50 PM
Budget Analyst Approval	mranki1	04/19/2022 14:13:20 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: **26321**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2710-21**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Tilson & Diaz Solutions, Inc (TDS)**Contractor Name: **Tilson & Diaz Solutions, Inc (TDS)**Address: **7533 Carroll Avenue**City/State/Zip: **Takoma Park, MD 20912**Contact/Phone: **240-498-1956**Vendor No.: **T29045061**NV Business ID: **NV20222399858**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/14/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2024**Contract term: **2 years and 140 days**4. Type of contract: **Contract**Contract description: **CTE Program**

5. Purpose of contract:

This is a new contract to provide training that prepares, and provides the necessary tools for, Nevada paraprofessionals to support Career and Technical Education teachers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

There is a need to support the severely impacted subpopulation districts and schools across Nevada in ensuring equitable access and successful outcomes to students throughout the state investing their efforts into the Career and Technical Education programs. This program is a part of an ongoing response to and recovery from the coronavirus pandemic.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The qualifications, current expertise, and reported success of this national leader in this area of developing, digital professional learning modules is difficult to replicate with resources already strained in this area.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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	mbro28	05/10/2022 12:05:01 PM
Division Approval	carnol1	05/10/2022 12:16:11 PM
Department Approval	carnol1	05/10/2022 12:16:14 PM
Contract Manager Approval	mwadsw01	05/10/2022 13:02:01 PM
Budget Analyst Approval	mranki1	05/13/2022 10:48:43 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25685**Agency Name: **ADMIN - NV ST LIBRARY,
ARCHIVES AND PUBLIC RECORDS**Agency Code: **332**Appropriation Unit: **2891-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **IO3O, LLC DBA**Contractor Name: **IO3O, LLC DBA**Address: **WHOFI
15820 N Pennsylvania Ave Ste 2
Edmond, OK 73013**City/State/Zip: **Edmond, OK 73013**Contact/Phone: **Luke Buikema 405/415-0434**Vendor No.: **T29042552**NV Business ID: **NV20191602606**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 **04/01/2022**Anticipated BOE meeting date **06/2022**Retroactive? **Yes**

If "Yes", please explain

We are requesting contract be retroactive to April 1, 2022 as processing time delayed final approval.3. Termination Date: **03/31/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **WiFi Analytics**

5. Purpose of contract:

This is a new contract to provide ongoing WiFi analytics solutions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$70,000.00**

Payment for services will be made at the rate of \$17,500.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Library, Archives and Public Records Division (NSLAPR) is seeking to contract with a company that can provide a WiFi analytics solution to libraries across Nevada. Since wireless access is a library service that is increasingly important, it is critical that libraries be able to show the amount of use as an example of the value they provide their communities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service provided to 28 libraries across the state. State employees do not have the time to provide this service. It's more efficient and effective in this case to contract with a vendor to do it.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):

Bloom Intelligence
Purple
WhoFi

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Madisson Jacobs, Administrative Assistant 3 Ph: 775/684-3339

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jvictor	02/28/2022 08:11:25 AM
Division Approval	tmilazz1	03/03/2022 14:13:09 PM
Department Approval	ssands	04/21/2022 11:58:25 AM
Contract Manager Approval	ssands	04/21/2022 12:00:21 PM
Budget Analyst Approval	jcoope8	04/24/2022 14:22:39 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: **26134**Agency Name: **DHHS - AGING AND DISABILITY SERVICES DIVISION**Agency Code: **402**Appropriation Unit: **3266-27**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JS NET ASSOCIATES LLC**Contractor Name: **JS NET ASSOCIATES LLC**Address: **47295 BEACH CREST DR STE 777**City/State/Zip: **NESKOWIN, OR 97149-8219**Contact/Phone: **Daniel J Sheridan 503/392-3114**Vendor No.: **T27035343**NV Business ID: **NV20191473750**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **APS Forensic Medical**

5. Purpose of contract:

This is a new contract to provide ongoing forensic medical specialist services to the Adult Protective Services social workers to assist in investigating complex adult abuse exploitation cases.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: As invoiced per Attachment BB

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 200.5093 ADSD, Adult Protective Services receives and investigates reports of abuse, neglect, exploitation, abandonment, or isolation.

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 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):

**Envision Physician Services
JS Net Associates
RN Expertise, Inc.**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor to submit a bid.

d. Last bid date: 03/21/2022 Anticipated re-bid date: 03/01/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 8/8/2014 - 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 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	rhage1	04/25/2022 14:06:11 PM
Division Approval	rhage1	04/25/2022 14:06:13 PM
Department Approval	dschmid5	04/27/2022 11:07:44 AM
Contract Manager Approval	maceved1	04/27/2022 14:53:43 PM
Budget Analyst Approval	bmacke1	05/23/2022 14:07:56 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: **26000**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: **Sunrise Service, INC.**Contractor Name: **Sunrise Service, INC.**Address: **7380 Commercial Way**City/State/Zip: **Henderson, NV 89011**Contact/Phone: **Geoff Hilts 702-568-5300**Vendor No.: **T29045273**NV Business ID: **NV19961137319**To what State Fiscal Year(s) will the contract be charged? **2023-2024**

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	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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **DRC HVAC**

5. Purpose of contract:

This is a new contract to provide ongoing inspection and repair services for facility air conditioning systems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$31,706.00**

Payment for services will be made at the rate of \$9,240.00 per Year

Other basis for payment: \$9,240.00 yearly for maintenance, plus the cost of repairs and parts as invoiced.

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):

ET&M Refrigeration
Sunrise Services Inc
Black Mountain Air, Inc
HAL MECHANICAL

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: 03/01/2022 Anticipated re-bid date: 03/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	rhage1	04/08/2022 11:12:38 AM
Division Approval	rhage1	04/08/2022 11:12:42 AM
Department Approval	dschmid5	04/18/2022 12:18:06 PM
Contract Manager Approval	maceved1	04/19/2022 13:04:56 PM
Budget Analyst Approval	afrantz	04/20/2022 15:34:38 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: **25421** Amendment Number: **1**

Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Legal Entity Name: **Captions Unlimited of Nevada, Inc.**

Agency Code: **403** Contractor Name: **Captions Unlimited of Nevada, Inc.**

Appropriation Unit: **3158-04** Address: **PO Box 20905**

Is budget authority available?: **Yes** City/State/Zip: **Reno, NV 89515**

If "No" please explain: Not Applicable Contact/Phone: **Denise Hinxman 775-746-3534**

Vendor No.: **T81082135**

NV Business ID: **NV19971149411**

To what State Fiscal Year(s) will the contract be charged? **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 **01/14/2022**

Anticipated BOE meeting date 04/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **04/30/2022**

Termination Date:

Contract term: **136 days**4. Type of contract: **Contract**Contract description: **CART Services**

5. Purpose of contract:

This is the first amendment to the original contract which provides Communication Access Realtime Translation Services for real-time captioning for employees who are hearing impaired. This amendment extends the termination date from April 30, 2022 to May 31, 2022 and increases the maximum amount from \$24,000 to \$38,500 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:	\$24,000.00	\$24,000.00	\$24,000.00	Yes - Info
2. Amount of current amendment (#1):	\$14,500.00	\$14,500.00	\$38,500.00	Yes - Info
3. New maximum contract amount:	\$38,500.00			
and/or the termination date of the original contract has changed to:	05/31/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

The State is required to provide services for American Sign Language (ALS)/Communication Access Realtime Translation (CART) Services for the public as needed. This is to provide CART Services for real time captioning for DHCFF employees who are hearing impaired as a reasonable accommodation for work-related activities.

This is a short-term contract to allow time to procure a contract with statewide MSA vendors that were approved at the April 12, 2022 BOE meeting.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees cannot perform 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?

This was the only bid returned.

- d. Last bid date: 10/19/2018 Anticipated re-bid date: 12/30/2021

10. a. Does the contract contain any IT components? No

- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State Purchasing - MSA for Translation Interpretation - used by DHCFF
DHCFF Jan 2022 - 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 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	aroma2	04/22/2022 10:35:00 AM
Division Approval	ltuttl1	04/22/2022 11:00:38 AM
Department Approval	pburrel1	04/22/2022 12:16:00 PM
Contract Manager Approval	ltuttl1	04/22/2022 13:05:43 PM
Budget Analyst Approval	laaron	04/26/2022 11:30:44 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: **25664**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Esmeralda County Welfare
Agency Code: 403	Contractor Name: Esmeralda County Welfare
Appropriation Unit: 3243-00	Address: P.O. Box 517
Is budget authority available?: Yes	City/State/Zip: Goldfield, NV 89013
If "No" please explain: Not Applicable	Contact/Phone: Maureen Glennen 775-485-3406
	Vendor No.: T81000318
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**Anticipated BOE meeting date **06/2022**Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$73,575.98**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$36,793.75, FY23 - \$36,782.23

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	05/18/2022 15:09:03 PM
Division Approval	trya4	05/18/2022 15:48:35 PM
Department Approval	pburrel1	05/18/2022 18:04:25 PM
Contract Manager Approval	jvojtek	05/19/2022 08:14:58 AM
Budget Analyst Approval	laaron	05/23/2022 12:28:43 PM



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
- 25658 Douglas County
- 25662 Elko County
- 25664 Esmeralda County
- 25668 Eureka County
- 25669 Humboldt County
- 25670 Lander County
- 25671 Lincoln County
- 25672 Lyon County
- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25668**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Eureka County Social Services
Agency Code:	403	Contractor Name:	Eureka County Social Services
Appropriation Unit:	3243-00	Address:	P.O. Box 278
Is budget authority available?:	Yes	City/State/Zip	Eureka, NV 89316
If "No" please explain:	Not Applicable	Contact/Phone:	Millie Oram 775-237-5597
		Vendor No.:	T80975988
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,764.26**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$11,340.90, FY23 - \$11,423.36

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHCFP 2019 to 2021. 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:

Erica Bronder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/11/2022 06:46:54 AM
Division Approval	trya4	04/11/2022 10:12:41 AM
Department Approval	pburrel1	04/13/2022 10:45:38 AM
Contract Manager Approval	trya4	04/13/2022 10:52:25 AM
Budget Analyst Approval	laaron	05/19/2022 09:58:53 AM



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
- 25658 Douglas County
- 25662 Elko County
- 25664 Esmeralda County
- 25668 Eureka County
- 25669 Humboldt County
- 25670 Lander County
- 25671 Lincoln County
- 25672 Lyon County
- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25677**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Storey County
Agency Code:	403	Contractor Name:	Storey County
Appropriation Unit:	3243-00	Address:	P.O. Box 176
Is budget authority available?:	Yes	City/State/Zip	Virginia City, NV 89440
If "No" please explain:	Not Applicable	Contact/Phone:	Brandie Lopez 775-847-0968
		Vendor No.:	T80054670
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2023**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$44,621.19**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY22 - \$22,289.58, FY23 - \$22,331.61

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHCFP 2019 to 2021. 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:

Erica Broder, MA II Ph: null

20. Contract Status:

Contract Approvals:


Approval Level	User	Signature Date
Budget Account Approval	jkemmere	04/12/2022 07:13:27 AM
Division Approval	trya4	04/13/2022 15:56:49 PM
Department Approval	pburrel1	04/19/2022 12:03:12 PM
Contract Manager Approval	trya4	04/19/2022 13:49:44 PM
Budget Analyst Approval	laaron	05/19/2022 10:01:48 AM



MEMORANDUM

DATE: February 25, 2022

TO: Lynnette Aaron, Executive Branch Budget Officer, Governor's Finance Office

FROM: Suzanne Bierman, Administrator, Division of Health Care Financing and Policy (DHCFP) 
SB

RE: Request for Retroactive Start Date of July 1, 2021, for County Match Contracts

This memorandum requests that the County Match contracts as listed below be approved for a retroactive start date effective July 1, 2021.

- 25650 Carson County
- 25657 Churchill County
- 25660 Clark County
- 25658 Douglas County
- 25662 Elko County
- 25664 Esmeralda County
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- 25669 Humboldt County
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- 25671 Lincoln County
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- 25674 Mineral County
- 25675 Nye County
- 25676 Pershing County
- 25677 Storey County
- 25678 Washoe County
- 25679 White Pine County

Historically, this contract is retroactive due to the fact it falls in line with the approved Biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget. This contract was delayed due to extended negotiations between the Counties and the State.

While the contract requires a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

Thank you for your consideration.


Suzanne Bierman (Feb 25, 2022 11:50 PST)

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: **25851**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	HANSEN HUNTER & COMPANY
Agency Code:	406	Contractor Name:	HANSEN HUNTER & COMPANY
Appropriation Unit:	3161-04	Address:	7080 SW Fir Loop Suite 100
Is budget authority available?:	Yes	City/State/Zip	Portland, OR 972233
If "No" please explain:	Not Applicable	Contact/Phone:	Jeff Moore 800/547-5139
		Vendor No.:	T29009225
		NV Business ID:	NV20101244381

To what State Fiscal Year(s) will the contract be charged? **2023-2024**

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 #: C 17982

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Medicare Cost Report**

5. Purpose of contract:

This is a new contract to provide ongoing certified public accounting services to prepare and submit required Medicare cost reports on behalf of Southern Nevada Adult Mental Health Services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$36,408.00**

Other basis for payment: Year 1 \$17,935; Year 2 \$18,473 per report

II. JUSTIFICATION

7. What conditions require that this work be done?

To meet the requirements of Health Care Financing and Policy for participation in Medicare and Medicaid reimbursement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Existing State employees lack familiarity with changing federal regulation and cost report preparation. Professional expertise is required to maximize cost report settlement.

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):

Walters and Associates
Zimmet Healthcare
Hansen Hunter & Company

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

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: 03/07/2022 Anticipated re-bid date: 03/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Vendor with DPBH since 2005; satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Esperansa Rearich, Accountant II Ph: 702/486-5318

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pripple	03/22/2022 10:48:23 AM
Division Approval	rmille8	03/24/2022 12:37:07 PM
Department Approval	cphinney	04/22/2022 11:15:33 AM
Contract Manager Approval	rmille8	04/22/2022 11:23:23 AM
Budget Analyst Approval	kanders2	04/29/2022 08:30:14 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: **26122**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3162-08**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ALSCO INC., DBA AMERICAN LINEN**Contractor Name: **ALSCO INC., DBA AMERICAN LINEN**Address: **505 East 200 South**City/State/Zip: **Salt Lake City, UT 84102**Contact/Phone: **jscott@alsco.com 775-690-0756**Vendor No.: **T60153013**NV Business ID: **NV19591000546**To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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 #: 17992

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/20/2022**

Anticipated BOE meeting date 07/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2024**Contract term: **2 years and 42 days**4. Type of contract: **Contract**Contract description: **Laundry Services**

5. Purpose of contract:

This is a new contract to provide laundry services to Northern Nevada Adult Mental Health Services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$32,000.00**

Other basis for payment: ATTACHMENT A: Scope of Work and Deliverables

II. JUSTIFICATION

7. What conditions require that this work be done?

Clients currently living on campus require clean laundered sheets, pillow cases, blankets, towels etc. that requires handling with appropriate measures for infection control.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not equipped or have the knowledge to perform necessary tasks in handling large amounts of laundry and biohazard issues.

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):

CINTAS
ARAMARK
ALSCO DBA AMERICAN LINEN

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

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: 04/21/2022 Anticipated re-bid date: 02/03/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Vendor with the State of Nevada since 1999, satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

CRISPIN RAMIREZ, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	05/16/2022 16:45:09 PM
Division Approval	rmille8	05/16/2022 16:45:10 PM
Department Approval	lsherych	05/18/2022 13:08:49 PM
Contract Manager Approval	rmille8	05/18/2022 13:12:36 PM
Budget Analyst Approval	kanders2	05/20/2022 08:36:25 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: **25590**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	HANSEN HUNTER & COMPANY
Agency Code:	406	Contractor Name:	HANSEN HUNTER & COMPANY
Appropriation Unit:	3162-04	Address:	7080 SW Fir Loop STE 100
Is budget authority available?:	Yes	City/State/Zip	PORTLAND, OR 97223
If "No" please explain:	Not Applicable	Contact/Phone:	Jeff Moore 800-5547-315
		Vendor No.:	T29009225
		NV Business ID:	NV20101244381

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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 %

Agency Reference #: 17967

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/09/2024**Contract term: **2 years and 184 days**4. Type of contract: **Contract**Contract description: **Medicare Cost Report**

5. Purpose of contract:

This is a new contract to provide ongoing certified public accounting services to prepare and submit required Medicare Cost Reports on behalf of Southern Nevada Adult Mental Health Services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$36,408.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

To meet the requirements of Health Care Financing and Policy for participation in Medicare and Medicaid reimbursement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Existing staff lacks familiarity with changing federal regulations and cost report preparation. Professional expertise is required to maximize cost report settlement.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):

DML Tax
Western NV tax
Hansen & Hunter
Irene Stambaugh

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

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: 12/15/2021 Anticipated re-bid date: 05/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

NNAMHS has used this vendor since 2006, satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Addie McElvain, Accountant II Ph: 775-688-2039

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	03/16/2022 14:26:27 PM
Division Approval	rmille8	03/16/2022 14:26:31 PM
Department Approval	Isherych	03/21/2022 16:47:21 PM
Contract Manager Approval	rmille8	05/03/2022 11:22:19 AM
Budget Analyst Approval	kanders2	05/10/2022 14:52:32 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: **25712**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3162-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MESA ENERGY SYSTEMS INC. DBA**Contractor Name: **MESA ENERGY SYSTEMS INC. DBA**Address: **EMCOR SERVICES MESA ENERGY INC**City/State/Zip: **155 EAST GLENDALE AVENUE #13 SPARKS, NV 89431**Contact/Phone: **SCOTT COOPER 775-385-3773**Vendor No.: **T27027115A**NV Business ID: **NV20081679454**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **C 17969**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/11/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2025**Contract term: **3 years and 82 days**4. Type of contract: **Contract**Contract description: **HVAC Services**

5. Purpose of contract:

This is a new contract to provide ongoing HVAC equipment repair and maintenance for Northern Nevada Adult Mental Health Services and Lakes Crossing Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Other basis for payment: Per Attachments A & B: Scope of Work and Deliverables

II. JUSTIFICATION

7. What conditions require that this work be done?

All existing HVAC rooftop units need service due to harsh conditions and normal wear and tear. The routine maintenance and emergency repair are a necessity to prevent uncomfortable conditions for clients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No agency employees have the proper knowledge regarding the wide range of HVAC equipment brands or models at NNAMHS and LCC.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):

MT. ROSE HEATING
EMCOR
ROSS HEATING AND AIR

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

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: 01/03/2022 Anticipated re-bid date: 02/24/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

EMCOR dba MESA ENERGY SYSTEMS is currently contracted with NNAMHS with satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

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:

BRIAN SOTOMAYOR, ASO III Ph: 775-688-2030

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	04/19/2022 09:57:05 AM
Division Approval	rmille8	04/19/2022 09:57:08 AM
Department Approval	cphinney	04/22/2022 11:17:24 AM
Contract Manager Approval	rmille8	04/22/2022 13:08:19 PM
Budget Analyst Approval	kanders2	05/11/2022 10:38:18 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: **25852**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3162-95**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Sierra VIII, INC. DBA Diversified Painting**Contractor Name: **Sierra VIII, INC. DBA Diversified Painting**Address: **881 E. Glendale Avenue**City/State/Zip: **SPARKS, NV 89431**Contact/Phone: **Cody Fisher 775-358-8818**Vendor No.: **T32011287**NV Business ID: **NV20001440802**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: 17980

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/17/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 44 days**4. Type of contract: **Contract**Contract description: **INTERIOR PAINTING**

5. Purpose of contract:

This is a new contract to provide interior painting of walls and ceilings for the Northern NV Child and Adolescent Building 8N.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,505.00**

Payment for services will be made at the rate of \$0.00 per Base Bid amount

II. JUSTIFICATION

7. What conditions require that this work be done?

The facility requires new paint to maximize the lifespan of the building which reduces cost to the state.

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 skills, knowledge or equipment to provide 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):

**FASANI PAINTING
SIERRA PAINTING
DIVERSIFIED PAINTING**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

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: 01/06/2022 Anticipated re-bid date: 01/02/2023

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 is currently active through State Purchasing and does satisfactory work.

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:

BRIAN SOTOMAYOR, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	04/26/2022 09:33:19 AM
Division Approval	rmille8	04/26/2022 09:33:23 AM
Department Approval	lsherych	04/26/2022 13:20:38 PM
Contract Manager Approval	rmille8	04/26/2022 13:50:49 PM
Budget Analyst Approval	kanders2	05/17/2022 11:31:37 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: **25908**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Lightside Consulting, LLC
Agency Code:	406	Contractor Name:	Lightside Consulting, LLC
Appropriation Unit:	3223-04	Address:	PO Box 432
Is budget authority available?:	Yes	City/State/Zip	Carson City , NV 89705
If "No" please explain:	Not Applicable	Contact/Phone:	Jennifer McEntee 775-395-2547
		Vendor No.:	
		NV Business ID:	NV20212314754
To what State Fiscal Year(s) will the contract be charged?	2022		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 17969

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/22/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **69 days**4. Type of contract: **Contract**Contract description: **Consulting Services**

5. Purpose of contract:

This is a new contract to develop new fiscal policies and procedures and revise existing fiscal policies and procedures, developed a fee analysis for budgets, complete fiscal analysis and conduct oversight quality assurances of budget management and development.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,983.50**

Payment for services will be made at the rate of \$39.94 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Current workload cannot be accomplished by our current staff while performing these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are unable to complete this scope of work due to current staffing levels.

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):

Ekay Consultants
Onstrategy
SF Consulting

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Professional Service (As defined in NAC 333.150)

d. Last bid date: 02/23/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	rmille8	03/31/2022 07:33:58 AM
Division Approval	rmille8	03/31/2022 07:41:52 AM
Department Approval	lsherych	04/01/2022 09:34:59 AM
Contract Manager Approval	ttilto1	04/01/2022 10:59:31 AM
Budget Analyst Approval	kanders2	04/22/2022 11:56:08 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: **24909**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CHURCHILL COUNTY**Contractor Name: **CHURCHILL COUNTY**Address: **CHURCHILL COUNTY TREASURER
155 N TAYLOR ST STE 110**City/State/Zip: **FALLON, NV 89406-2748**Contact/Phone: **775/423-6028**Vendor No.: **T81032440E**NV Business ID: **GOV'T ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % COUNTY**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Masters**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing Hearing Master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,769.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that the Division attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 11:29:32 AM
Division Approval	bberry	04/22/2022 12:07:24 PM
Department Approval	mchappel	04/27/2022 14:35:17 PM
Contract Manager Approval	mpomerle	04/27/2022 14:47:45 PM
Budget Analyst Approval	afrantz	05/06/2022 08:25:54 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: **24893**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **HUMBOLDT COUNTY**Contractor Name: **HUMBOLDT COUNTY**Address: **SIXTH JUDICIAL JUVENILE COURT
50 W 5TH ST**City/State/Zip: **WINNEMUCCA, NV 89445**Contact/Phone: **775/623-6469**Vendor No.: **T40139500A**NV Business ID: **GOV'T ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % County**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Master**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing Hearing Master and court services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$77,400.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that the Division attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 12:53:25 PM
Division Approval	bberry	04/22/2022 12:08:33 PM
Department Approval	mchappel	04/27/2022 14:36:12 PM
Contract Manager Approval	mpomerle	04/27/2022 15:32:31 PM
Budget Analyst Approval	afrantz	05/06/2022 08:26:03 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: **24916**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3238-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **PERSHING COUNTY**Contractor Name: **PERSHING COUNTY**Address: **PERSHING COUNTY ASSESSOR
PO BOX 89**City/State/Zip: **LOVELOCK, NV 89419**Contact/Phone: **775-273-2105**Vendor No.: **T81041592V**NV Business ID: **GOV'T ENTITY**To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % County**

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Hearing Masters**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing Hearing Master and Court Services to enforce child support obligations owed by non-custodial parents to their children as well as locate non-custodial parents, establish paternity and adjust support orders.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$88,560.00**

Other basis for payment: Actual per invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes and Title IV-D of the Social Security Act requires that DWSS attempt to establish paternity, secure support, and recover support debts for children who may or may not be receiving public assistance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a function performed by the Judges/Hearing Masters in the Judicial District Courts.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

States may enter into interlocal contracts to administer the CSEP, per 45 CFR 302.10; 45 CFR 302.34; 45 CFR 303.107.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the Division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cathy Kaplan, Chief, Child Support Enforcement Program Ph: 775-684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusay	04/20/2022 12:53:05 PM
Division Approval	bberry	04/22/2022 12:07:49 PM
Department Approval	mchappel	04/27/2022 14:35:55 PM
Contract Manager Approval	mpomerle	04/27/2022 15:28:38 PM
Budget Analyst Approval	afrantz	05/06/2022 08:33:22 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: **25872**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	DRB Consulting, LLC
Agency Code:	409	Contractor Name:	DRB Consulting, LLC
Appropriation Unit:	1383-04	Address:	2760 Fortune Circle E Ste 421424
Is budget authority available?:	Yes	City/State/Zip	Indianapolis, IN 46241
If "No" please explain:	Not Applicable	Contact/Phone:	DeShane Reed 317-835-3533
		Vendor No.:	
		NV Business ID:	NV20222413197

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **PREA Audits**

5. Purpose of contract:

This is a new contract to provide ongoing Prison Rape Elimination Act (PREA) audits at juvenile justice facilities and the Division to comply with PREA and Nevada Revised Statute 62B.212.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$28,500.00**

Payment for services will be made at the rate of \$5,700.00 per Audit

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is necessary to comply with the Prison Rape Elimination Act (PREA) and NRS 62B.212. Specifically, PREA requires 1/3 of agency juvenile facilities to be audited by a federal certified PREA auditor every three years. PREA also requires the agency (DCFS) to be audited by a federal certified PREA auditor annually.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no federal certified PREA auditors employed by the State.

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):

Tracy Kingera
Sharon Shaver
Karen Murray
DRB Consulting, LLC
PREA America
PREA Auditors of America

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is the most qualified vendor, with experience with Nevada counties, with the highest level of technical assistance offered.

d. Last bid date: 02/01/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Jennifer Simeo, Program Officer Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	03/24/2022 09:36:44 AM
Division Approval	knielsen	04/12/2022 17:13:07 PM
Department Approval	cpitlock	04/14/2022 16:51:57 PM
Contract Manager Approval	kathr55	04/15/2022 11:02:28 AM
Budget Analyst Approval	kanders2	04/27/2022 09:29:19 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25856**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Reesha Powell
Agency Code:	409	Contractor Name:	Reesha Powell
Appropriation Unit:	3145-08	Address:	Sierra Nevada Solutions, LLC 2782 Carriage Crest Drive Carson City, NV 89706
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89706
If "No" please explain:	Not Applicable	Contact/Phone:	Reesha Powell 775-722-1836
		Vendor No.:	T29045143
		NV Business ID:	20181856048

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % cost allocated

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/22/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2023**Contract term: **284 days**4. Type of contract: **Contract**Contract description: **Consultant**

5. Purpose of contract:

This is a new contract to provide consultative services to implement and monitor legislation passed in the 2021 Legislative Session.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,900.00**

Payment for services will be made at the rate of \$50.00 per hour

Other basis for payment: NET \$450 for mileage (GSA rate), NTE \$450 for supplies/materials

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is to provide consultative services to work with identified agency team leads on monitoring and completing the plans created to ensure compliance with the enacted 2021 legislative bills impacting DCFS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is insufficient State staff with the skills and knowledge available to assist in implementing the legislation passed in the 2021 Legislative Session.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?

This vendor was previously employed by this Division as the Child Welfare Deputy Administrator and is familiar with this Agency's operations.

d. Last bid date: 03/01/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Karla Delgado, Acting Deputy Administrator Ph: 775-684-4453

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	03/29/2022 09:21:47 AM
Division Approval	knielsen	04/04/2022 13:04:15 PM
Department Approval	cpitlock	04/06/2022 08:36:50 AM
Contract Manager Approval	kathr55	04/06/2022 13:49:55 PM
Budget Analyst Approval	afrantz	04/22/2022 10:39:12 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: **25886**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	A ADOPTION ADVOCATES OF
Agency Code:	409	Contractor Name:	A ADOPTION ADVOCATES OF
Appropriation Unit:	3229-13	Address:	GEORGIA INC
Is budget authority available?:	Yes	City/State/Zip	7199 DUNHILL TER
If "No" please explain:	Not Applicable	Contact/Phone:	ATLANTA, GA 30328-1261
		Vendor No.:	Julia V. Stevens 770-315-7646
		NV Business ID:	T29038453
			out of state vendor

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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	79.00 %	Fees	0.00 %
X	Federal Funds	21.00 %	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 **07/01/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Out of State Visits**

5. Purpose of contract:

This is a new contract to provide ongoing federally mandated monthly visits for a child(ren) placed out of the State of Nevada in a residential facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00**

Payment for services will be made at the rate of \$500.00 per Visit/Report

Other basis for payment: NTE: 1 visit/report per month x 12 months x 4 years = \$24,000

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose is for a contract worker to have face to face visitation with children placed in out of state residential facilities. Per federal mandate, these visits must be completed every calendar month and the Division must receive a completed monthly report no later than the 3rd of each month to be input into the Division's UNITY system.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have positions that perform these specific duties for children placed in Georgia.

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 Adoption Advocates of Georgia
Atlanta Bethany Christian Services
An Open Door Adoption Agency, Inc.
Georgia Agape Adoption Agency Atlanta

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the lowest cost vendor to respond to the solicitation.

d. Last bid date: 03/01/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

DCFS has contracted with this vendor in the past. Their 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 as a:

Non-profit Corporation

This vendor is based out-of-state and only does work out-of-state (in Georgia).

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?

No b. If "NO", please explain.

This vendor is based out-of-state and only does work out-of-state (in Georgia).

19. Agency Field Contract Monitor:

Maria Hickey, Social Services Specialist Ph: 775-684-1975

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	04/07/2022 09:31:31 AM
Division Approval	knielsen	04/07/2022 09:33:08 AM
Department Approval	cpitlock	04/27/2022 14:40:12 PM
Contract Manager Approval	kathr55	04/27/2022 16:47:21 PM
Budget Analyst Approval	bmacke1	05/19/2022 16:28:40 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: **25550**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Harmony Family Center
Agency Code:	409	Contractor Name:	Harmony Family Center
Appropriation Unit:	3229-13	Address:	118 Mabry Hood Rd Suite 400
Is budget authority available?:	Yes	City/State/Zip	Knoxville, TN 37922
If "No" please explain:	Not Applicable	Contact/Phone:	Rebecca Lehmicke 8659825225
		Vendor No.:	T29044852
		NV Business ID:	Out of State Provider

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	79.00 %	Fees	0.00 %
X	Federal Funds	21.00 %	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 **04/20/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2026**Contract term: **3 years and 315 days**4. Type of contract: **Contract**Contract description: **Out of State Visits**

5. Purpose of contract:

This is a new contract to provide federally mandated monthly visits for a child (or children) placed outside of the State of Nevada in a residential facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Payment for services will be made at the rate of \$500.00 per visit/report per youth

Other basis for payment: Mileage more than 60 miles between the Contractor's location and child's placement will be reimbursed at the General Services Administration (GSA) rates. Not to exceed \$2,000.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose of this contract worker is to have face to face visitation with children placed in out of state residential facilities. Per federal mandate, these visits must be completed every calendar month and the Division must receive a completed monthly report.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have positions to perform these specific duties for children placed in Tennessee.

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):

Harmony Family Center
Bethany Christian Services
Agape, Jeff Fox

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is the vendor willing to provide the services in the Knoxville area.

d. Last bid date: 11/19/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

This out-of-state vendor only provides services in Tennessee.

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?

No b. If "NO", please explain.

This out-of-state vendor only provides services in Tennessee.

19. Agency Field Contract Monitor:

Maria Hickey, Social Services Program Specialist Ph: 775-684-1975

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	02/03/2022 14:04:50 PM
Division Approval	knielsen	02/03/2022 16:34:57 PM
Department Approval	cpitlock	04/13/2022 16:11:36 PM
Contract Manager Approval	kathr55	04/19/2022 16:45:17 PM
Budget Analyst Approval	afrantz	04/20/2022 14:51:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25665**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Kindred Spirits Adoption Services
Agency Code:	409	Contractor Name:	Kindred Spirits Adoption Services
Appropriation Unit:	3229-13	Address:	900 S. Shackleford Rd.
Is budget authority available?:	Yes	City/State/Zip	Little Rock, AR 72211
If "No" please explain:	Not Applicable	Contact/Phone:	Kim Palmer 501-301-5574
		Vendor No.:	VEN18406
		NV Business ID:	Out of State Services

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	79.00 %	Fees	0.00 %
X	Federal Funds	21.00 %	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 **04/28/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2026**Contract term: **3 years and 307 days**4. Type of contract: **Contract**Contract description: **Out of State Visits**

5. Purpose of contract:

This is a new contract to provide federally mandated monthly visits and visitation reports for children placed outside of the State of Nevada in a residential facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$42,668.16**

Payment for services will be made at the rate of \$800.00 per child/visit

Other basis for payment: \$0.585 per mile (GSA rate)

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose of this contract is to have face to face visitation with children placed in out-of-state residential facilities. Per federal mandate, these visits must be completed every calendar month and the Division must receive a completed monthly report.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have positions to perform these duties for children placed in residential facilities in Arkansas.

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):

Kindred Spirits
ABBA
Debbi Rago, KLCSW
Bethany Christian

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor to agree to complete the scope of work.

d. Last bid date: 12/31/2021 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

This vendor is based out-of-state and only does work out-of-state (in Arkansas).

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?

No b. If "NO", please explain.

This vendor is based out-of-state and only does work out-of-state (in Arkansas).

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	03/11/2022 13:22:45 PM
Division Approval	knielsen	04/13/2022 14:54:21 PM
Department Approval	cpitlock	04/14/2022 16:53:09 PM
Contract Manager Approval	kathr55	04/15/2022 10:11:19 AM
Budget Analyst Approval	kanders2	04/27/2022 09:08:43 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25792**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3229-18**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Slothower Pediatrics

Contractor Name: **Slothower Pediatrics**Address: **1780 Browning Way Suite A**City/State/Zip: **Elko, NV 89701**

Contact/Phone: Dr. Jon Slothower 775-778-3237

Vendor No.: T27044587

NV Business ID: NV20161527006

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 **05/17/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2026**Contract term: **3 years and 319 days**4. Type of contract: **Contract**Contract description: **Forensic Examination**

5. Purpose of contract:

This is a new contract to provide forensic medical examinations in cases of alleged sexual abuse, physical abuse, and/or neglect, and to provide a second opinion/medical records review of any reports or medical records received by the Division.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$44,000.00**

Other basis for payment: See Attachment AA - Scope of Work, Deliverables, Payment Schedule

II. JUSTIFICATION

7. What conditions require that this work be done?

When significant neglect/abuse has been disclosed or is indicated, the forensic examination provides a comprehensive medical and sexual abuse evaluation. The information received from the examination is crucial to give child welfare professionals the information they need to protect and support children who are abused and/or neglected.

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 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: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is the vendor that is willing to provide these services.

d. Last bid date: Anticipated re-bid date: 02/28/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Maria Hickey, Social Services Specialist Ph: 775-684-1975

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	04/05/2022 08:33:18 AM
Division Approval	knielsen	04/18/2022 10:59:25 AM
Department Approval	cpitlock	04/19/2022 17:55:54 PM
Contract Manager Approval	kathr55	04/20/2022 09:52:55 AM
Budget Analyst Approval	bmacke1	05/17/2022 14:56:24 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25937**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	ROSENLUND DRILLING LLC
Agency Code:	409	Contractor Name:	ROSENLUND DRILLING LLC
Appropriation Unit:	3259-95	Address:	PO BOX 281195
Is budget authority available?:	Yes	City/State/Zip	LAMOILLE, NV 89828-1195
If "No" please explain:	Not Applicable	Contact/Phone:	775-753-7960
		Vendor No.:	T32009204
		NV Business ID:	NV20131637059

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 **05/10/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 51 days**4. Type of contract: **Contract**Contract description: **New Water Pump**

5. Purpose of contract:

This is a new contract to provide the installation of a new water pump and motor in the water well that supplies all domestic water at the Nevada Youth Training Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,749.58**

Payment for services will be made at the rate of \$24,749.58 per total project

II. JUSTIFICATION

7. What conditions require that this work be done?

The current water pump and motor have surpassed their useful life span and need to be replaced to avoid a failure that would result in the loss of water at the facility.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have this expertise.

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):

Hackworth Drilling
Snyder Mechanical
Timberline Core Drilling
Rosenlund Drilling, LLC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor that responded who was capable of providing the full service.

d. Last bid date: 03/01/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Services were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Lance Marshall, Facility Supervisor Ph: 775-748-7255

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dander16	03/31/2022 12:45:38 PM
Division Approval	knielsen	04/18/2022 17:59:00 PM
Department Approval	cpitlock	04/19/2022 17:59:41 PM
Contract Manager Approval	kathr55	04/20/2022 11:51:48 AM
Budget Analyst Approval	bmacke1	05/10/2022 12:04:46 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: **25483**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3646-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **A 1 MECHANICAL INC DBA**Contractor Name: **A 1 MECHANICAL INC DBA**Address: **A 1 MECHANICAL & ELECTRIC
5985 POLARIS AVE**City/State/Zip: **LAS VEGAS, NV 89118-3103**Contact/Phone: **Victor Waisanen 702/952-8416**Vendor No.: **T32004626**NV Business ID: **NV 20031352518**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	58.00 %	Fees	0.00 %
X	Federal Funds	42.00 %	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 **05/23/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2026**Contract term: **3 years and 254 days**4. Type of contract: **Contract**Contract description: **Electrical Services**

5. Purpose of contract:

This is a new contract to provide ongoing electrical inspections, repairs and maintenance services at the Southern Nevada Child and Adolescent Services campus.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$44,000.00**

Payment for services will be made at the rate of \$85.00 per hour (8:00 am - 5:00pm)

Other basis for payment: \$127.50 per hour, after hours and emergency rate. Material markup = cost plus 45%

II. JUSTIFICATION

7. What conditions require that this work be done?

An electrical service contract is needed to ensure the safety of the clients and staff on the West Charleston campus. These services are beyond the expertise of the maintenance staff.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No employee has the credentials or the experience to perform this needed 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):

Image Electric
Precision Electric
A-1 Mechanical & Electric
Mohave Electric

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

A-1 Mechanical was determined to be the most cost effective

d. Last bid date: 01/13/2022 Anticipated re-bid date: 01/13/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Division of Child and Family Services from July 2017 through June 2021, prior 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 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:

Rick Rassier, Account Manager Ph: 702-486-4335

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	02/03/2022 09:33:28 AM
Division Approval	knielsen	05/12/2022 17:19:10 PM
Department Approval	cpitlock	05/17/2022 09:14:52 AM
Contract Manager Approval	sdotte1	05/18/2022 07:08:13 AM
Budget Analyst Approval	bmacke1	05/23/2022 14:19:00 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: **25909**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3646-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: ANYTIME PLUMBING, INC

Contractor Name: **ANYTIME PLUMBING, INC**Address: **4690 W POST RD STE 130**City/State/Zip **LAS VEGAS, NV 89118-4345**

Contact/Phone: Scott Jester 702/362-9300

Vendor No.: PUR0005090A

NV Business ID: NV19991205584

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	59.00 %	Fees	0.00 %
X	Federal Funds	41.00 %	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 **05/17/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2026**Contract term: **3 years and 319 days**4. Type of contract: **Contract**Contract description: **Plumbing Services**

5. Purpose of contract:

This is a new contract to provide ongoing plumbing services on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$46,000.00**

Other basis for payment: Per Attachment AA - Scope of Work and Payment Schedule

II. JUSTIFICATION

7. What conditions require that this work be done?

Plumbing services are necessary for the health and wellbeing of clients, staff and visitors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Division does not have staff with the needed 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):

Precision Plumbing
Anytime Plumbing
Innovative Plumbingb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The selected vendor had the lowest rates for services as well as having familiarity with the facilities and prompt responses to calls in the past.

d. Last bid date: 01/17/2022 Anticipated re-bid date: 01/19/2026

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been under contract with the Division since 2014. 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:

Rick Rassier, Admin Services Officer 3 Ph: 702-486-4335

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	03/30/2022 16:05:35 PM
Division Approval	knielsen	04/17/2022 21:06:11 PM
Department Approval	cpitlock	04/29/2022 14:16:28 PM
Contract Manager Approval	sknigge	05/04/2022 12:00:15 PM
Budget Analyst Approval	bmacke1	05/17/2022 15:18:06 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25630**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Board of Regents - UNLV
Agency Code:	409	Contractor Name:	Board of Regents - UNLV
Appropriation Unit:	3646-18	Address:	4505 S. Maryland Pkwy. Box 451055
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89154-1055
If "No" please explain:	Not Applicable	Contact/Phone:	Jill Tuley 702-895-3843
		Vendor No.:	D35000813
		NV Business ID:	NV20161295653

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/27/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/30/2022**Contract term: **217 days**4. Type of contract: **Interlocal Agreement**Contract description: **Competency Plan**

5. Purpose of contract:

This is a new interlocal agreement to provide for a plan development to review current services being provided for the competency of children and develop a plan for the structure of services pursuant to Senate Bill 366 of the 2021 legislative session.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,868.00**

Payment for services will be made at the rate of \$12,500.00 per Task for Tasks 1-3

Other basis for payment: \$12,368 for Task 4

II. JUSTIFICATION

7. What conditions require that this work be done?

Senate Bill 366 of the 2021 Legislative Session, Section 4.3 as it pertains to NRS 62.D 140-190; requires the Division to review any current services being provided for the competency of children and develop a plan for the structure of services for competency of children.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Division does not have any staff available with the expertise needed to complete the 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):

UNR
UNLV
Social Change Partners
Neubauer Mental Health Services

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #SNCAS22-01, 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: 01/05/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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

Contractor is part of NSHE.

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has been under contract with the Division. 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 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:

Jacqueline Wade, Deputy Director Ph: 702-486-8911

Susie Miller, Deputy Director Ph: 702-486-5016

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	02/18/2022 15:01:59 PM
Division Approval	knielsen	03/13/2022 22:29:10 PM
Department Approval	cpitlock	03/14/2022 16:17:14 PM
Contract Manager Approval	sknigge	03/15/2022 18:05:51 PM
Budget Analyst Approval	bmacke1	04/27/2022 13:47:20 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: **25988**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	UNITED LOCK AND SECURITY INC
Agency Code:	409	Contractor Name:	UNITED LOCK AND SECURITY INC
Appropriation Unit:	3646-07	Address:	3401 SIRIUS AVE STE 9
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89102-8313
If "No" please explain:	Not Applicable	Contact/Phone:	Steve Marquez 702/258-5625
		Vendor No.:	PUR0005649
		NV Business ID:	NV20061039362

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	59.00 %	Fees	0.00 %
X	Federal Funds	41.00 %	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 **05/17/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2026**Contract term: **3 years and 319 days**4. Type of contract: **Contract**Contract description: **Locks and Security**

5. Purpose of contract:

This is a new contract to provide ongoing preventative, general, and specialized locksmith and security system services.

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 \$10,000.00 per year

Other basis for payment: Rates are described in Attachment BB: Vendor Proposal.

II. JUSTIFICATION

7. What conditions require that this work be done?

Maintenance and replacement services are needed for door opening devices, lock systems, and security systems generally associated with the safety and security of the facility, employees, and youth housed at the facility.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no state employees with the needed 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):

United Lock and Security, Inc.
Silverstate Locksmith
ABC Locksmith

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the lowest cost vendor.

d. Last bid date: 04/01/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 contracted by DCFS from 4/10/18 - 4/9/22. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Rick Rassier, ASO III Ph: 702-486-4335

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	04/06/2022 13:41:40 PM
Division Approval	knielsen	04/18/2022 18:48:40 PM
Department Approval	cpitlock	04/19/2022 17:54:42 PM
Contract Manager Approval	kathr55	04/20/2022 11:24:57 AM
Budget Analyst Approval	bmacke1	05/17/2022 15:08:16 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: **26261**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ALL CLEAN TECHNOLOGY, LLC**Contractor Name: **ALL CLEAN TECHNOLOGY, LLC**Address: **6437 HOME RUN DRIVE**City/State/Zip: **LAS VEGAS, NV 89130**Contact/Phone: **KENNETH D. FELLOWS 702-869-5828**Vendor No.: **T32012484**NV Business ID: **NV20101342604**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/25/2026**Contract term: **4 years and 7 days**4. Type of contract: **Contract**Contract description: **Concrete Services**

5. Purpose of contract:

This is a new contract to provide ongoing concrete services for the Las Vegas facilities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$93,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Concrete service work to be done at the Las Vegas facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills or tools to perform the 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):

**High Mark Construction
Acha Construction
All Clean Technology**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Multiple vendors have been selected per regions and All Clean was selected as the completed and signed the contract.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	05/10/2022 15:35:54 PM
Division Approval	ctyle1	05/10/2022 15:35:56 PM
Department Approval	ctyle1	05/10/2022 15:35:58 PM
Contract Manager Approval	csnido1	05/13/2022 13:40:17 PM
Budget Analyst Approval	nhovden	05/19/2022 14:03:57 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: **26212**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ALLEN, BRET DBA NEWT CONCRETE CONSTRUCTION**Contractor Name: **ALLEN, BRET DBA NEWT CONCRETE CONSTRUCTION**Address: **PO BOX 20104**City/State/Zip: **CARSON CITY, NV 89721-0104**Contact/Phone: **BRET ALLEN 775-690-4894**Vendor No.: **T29035167**NV Business ID: **NV20101212689**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/15/2026**Contract term: **4 years and 4 days**4. Type of contract: **Contract**Contract description: **Concrete Service**

5. Purpose of contract:

This is a new contract to provide ongoing concrete services for the Fallon, Las Vegas, and Reno facilities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$87,572.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Concrete service work to be done at the Fallon, Las Vegas, and Reno facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills or tools to perform the 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):

**Acha Construction
Newt Concrete Construction
Basque Custom Work**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Multiple companies have been selected. Newt Concrete Construction has submitted their proposal.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	ctyle1	05/03/2022 14:31:44 PM
Division Approval	ctyle1	05/03/2022 14:31:46 PM
Department Approval	ctyle1	05/03/2022 14:31:48 PM
Contract Manager Approval	csnido1	05/06/2022 12:15:43 PM
Budget Analyst Approval	vmilazz1	05/12/2022 15:40:45 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: **26014**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AMERICAN EQUIPMENT, INC. DBA AMQUIP/AMERICAN CRANE GROUP**Contractor Name: **AMERICAN EQUIPMENT, INC. DBA AMQUIP/AMERICAN CRANE GROUP**Address: **451 W 3440 S**City/State/Zip: **SALT LAKE CITY, UT 84115-4227**Contact/Phone: **JASON THOMAS 775-359-1188**Vendor No.: **PUR0004436**NV Business ID: **NV20212088580**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: **431**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/15/2026**Contract term: **3 years and 338 days**4. Type of contract: **Contract**Contract description: **Crane Services**

5. Purpose of contract:

This is a new contract to provide ongoing crane repair, maintenance, and inspection services for crane equipment used at facilities statewide in Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$95,040.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Services range from repair, service work, annual inspections and certifications, maintenance work, load or system testing, and all other services associated with cranes for all of the Nevada National Guard facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agency personnel do not have the equipment or the requisite skills and certifications to perform the 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):

**Crane Tech
American Equipment
Iron Mountain Crane**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor accepted, turned in price sheet, and signed the contract.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	ctyle1	04/15/2022 14:53:31 PM
Division Approval	ctyle1	04/15/2022 14:53:35 PM
Department Approval	ctyle1	04/15/2022 14:53:40 PM
Contract Manager Approval	csnido1	05/02/2022 09:42:24 AM
Budget Analyst Approval	vmilazz1	05/13/2022 09:40:42 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26034**

Agency Name: ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name: BOARD OF REGENTS-GBC
Agency Code: 431	Contractor Name: BOARD OF REGENTS-GBC
Appropriation Unit: 3650-19	Address: 1500 COLLEGE PARKWAY
Is budget authority available?: Yes	City/State/Zip: ELKO, NV 89801
If "No" please explain: Not Applicable	Contact/Phone: SONJA SIBERT 775-327-2106
	Vendor No.: D35000803
	NV Business ID: NV20161295653

To what State Fiscal Year(s) will the contract be charged? **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	25.00 %	Fees	0.00 %
X Federal Funds	75.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

Battle Born Youth ChalleNGe Academy was not sure a contract was needed to have the cadets attend classes at the college.3. Termination Date: **06/30/2022**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **College Classes**

5. Purpose of contract:

This is a new interlocal agreement to provide credits for vocational and training skills at Great Basin College for students attending the Battle Born Youth ChalleNGe Academy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,827.22****II. JUSTIFICATION**

7. What conditions require that this work be done?

Cadets at the Battle Born Youth ChalleNGe Academy are attending college classes.

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 neither licensed nor qualified to provide educational instruction to students.

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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	04/15/2022 15:14:36 PM
Division Approval	ctyle1	04/15/2022 15:14:39 PM
Department Approval	ctyle1	04/15/2022 15:14:42 PM
Contract Manager Approval	csnido1	04/15/2022 15:57:47 PM
Budget Analyst Approval	vmilazz1	05/12/2022 12:03:37 PM



STATE OF NEVADA OFFICE OF THE MILITARY

Office of the Adjutant General
2460 Fairview Drive
Carson City, Nevada 89701-6807



STEVE SISOLAK
Governor

ONDRA L. BERRY
Major General
The Adjutant General

April 15, 2022

MEMORANDUM

To: Budd Milazzo, Executive Branch Budget Officer *Budd*
Governor's Finance Office, Budget Office

From: Chris Snidow, Management Analyst II
State Administrative Office

Subject: Justification for Retroactive Approval

The following justification is provided to request retroactive approval of the attached contract between Board of Regents, Nevada System of Higher Education – Great Basin College and the State of Nevada, Office of the Military, effective July 1, 2021.

The cadets at the Battle Born Youth Challenge Academy have taken classes which provide credits for vocational and training skills to help provide them a better future. The cadets began the classes which there was a misunderstanding whether a contract was needed.

Your favorable approval of the retroactive start date enables us to pay the vendor for the classes that have already been taken. We have also included a new contract for the next semester.

If you need additional information or explanation, please contact me at 775-884-8478.

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: **26035**

Agency Name: ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name: BOARD OF REGENTS-GBC
Agency Code: 431	Contractor Name: BOARD OF REGENTS-GBC
Appropriation Unit: 3650-19	Address: 1500 COLLEGE PARKWAY
Is budget authority available?: Yes	City/State/Zip: ELKO, NV 89801
If "No" please explain: Not Applicable	Contact/Phone: SONJA SIBERT 775-327-2106
	Vendor No.: D35000803
	NV Business ID: NV20161295653

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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	25.00 %	Fees	0.00 %
X Federal Funds	75.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **233 days**4. Type of contract: **Interlocal Agreement**Contract description: **College Classes**

5. Purpose of contract:

This is a new interlocal agreement to provide credits for vocational and training skills at Great Basin College for students attending the Battle Born Youth ChalleNGe Academy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Cadets at the Battle Born Youth ChalleNGe Academy are attending college classes.

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 neither licensed nor qualified to provide educational instruction to students.

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. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	04/15/2022 15:51:41 PM
Division Approval	ctyle1	04/15/2022 15:51:43 PM
Department Approval	ctyle1	04/15/2022 15:51:46 PM
Contract Manager Approval	csnido1	04/15/2022 15:58:09 PM
Budget Analyst Approval	vmilazz1	05/12/2022 11:45:22 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: **26202**

Agency Name:	ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name:	CASHMAN EQUIPMENT COMPANY
Agency Code:	431	Contractor Name:	CASHMAN EQUIPMENT COMPANY
Appropriation Unit:	3650-07	Address:	PO BOX 843397
Is budget authority available?:	Yes	City/State/Zip	LOS ANGELES, CA 90084-3397
If "No" please explain:	Not Applicable	Contact/Phone:	HECTOR FERNANDEZ 775-340-0083
		Vendor No.:	PUR0000249C
		NV Business ID:	NV19601000406

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/15/2026**Contract term: **4 years and 4 days**4. Type of contract: **Contract**Contract description: **Generator Services**

5. Purpose of contract:

This is a new contract to provide ongoing generator services including repair and service, annual inspections and certifications, system testing and all other services associated with generators, transfer switches and other associated equipment for the National Guard facility in Carlin.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$74,776.48****II. JUSTIFICATION**

7. What conditions require that this work be done?

Facilities require generator services to include repair and service, annual inspections and certifications, system testing and all other services associated with generators, transfer switches and other associated equipment.

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 requisite skills or equipment for 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):

Smith Power Products
Cummins
Cashman Equipment

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Cashman was the only contractor to submit a valid bid. So they were chosen.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	05/03/2022 14:44:23 PM
Division Approval	ctyle1	05/03/2022 14:44:25 PM
Department Approval	ctyle1	05/03/2022 14:44:28 PM
Contract Manager Approval	csnido1	05/06/2022 12:12:34 PM
Budget Analyst Approval	vmilazz1	05/12/2022 16:34:16 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: **26042**

Agency Name: ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name: COMMERCIAL ROOFERS, INC.
Agency Code: 431	Contractor Name: COMMERCIAL ROOFERS, INC.
Appropriation Unit: 3650-07	Address: 3865 W NAPLES DRIVE
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89103
If "No" please explain: Not Applicable	Contact/Phone: MEREDITH LIVERMORE 702-544-2279
	Vendor No.: T32012230
	NV Business ID: NV19961218468

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/25/2026**Contract term: **3 years and 348 days**4. Type of contract: **Contract**Contract description: **Roof Repairs**

5. Purpose of contract:

This is a new contract to provide ongoing services of maintenance, preventive maintenance, repair, and replacement of the roofing systems for facilities in the southern Nevada region.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$90,282.50****II. JUSTIFICATION**

7. What conditions require that this work be done?

Maintenance to repair and replace roofing systems for facilities in the southern Nevada region.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills or tools to perform roof replacement and repair.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):

**True Green
Commercial Roofing
Summit Roofing**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor accepted the terms and submitted a price sheet and signed contract.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	04/15/2022 14:55:49 PM
Division Approval	ctyle1	04/15/2022 14:55:53 PM
Department Approval	ctyle1	04/15/2022 14:55:56 PM
Contract Manager Approval	csnido1	05/02/2022 09:44:12 AM
Budget Analyst Approval	vmilazz1	05/13/2022 09:24:05 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26176**

Agency Name: ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name: INSIGHTFUL MEDIA LLC
Agency Code: 431	Contractor Name: INSIGHTFUL MEDIA LLC
Appropriation Unit: 3650-19	Address: PO BOX 60041
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89160
If "No" please explain: Not Applicable	Contact/Phone: DAYNA ROSELLI-DOANE 702-550-9101
	Vendor No.: T29044877
	NV Business ID: NV20191665399
To what State Fiscal Year(s) will the contract be charged?	2022-2023

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	25.00 %	Fees	0.00 %
X Federal Funds	75.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/06/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/15/2023**Contract term: **344 days**4. Type of contract: **Contract**Contract description: **Promotional Video**

5. Purpose of contract:

This is a new contract to provide a promotional video for the Battle Born Youth Challenge Academy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,636.56****II. JUSTIFICATION**

7. What conditions require that this work be done?

This is a promotional video project to help increase enrollment for the Battle Born Youth Challenge Academy.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees in our agency do not have the skill sets or the tools to complete this project.

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):

AspenCore
Insightful Media
CC Mediab. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price and value.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	04/28/2022 16:44:22 PM
Division Approval	ctyle1	04/28/2022 16:44:25 PM
Department Approval	csnido1	05/02/2022 09:41:39 AM
Contract Manager Approval	csnido1	05/06/2022 13:53:37 PM
Budget Analyst Approval	vmilazz1	05/06/2022 13:58:00 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: **26341**

Agency Name:	ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name:	NEVADA ENERGY SYSTEMS, INC.
Agency Code:	431	Contractor Name:	NEVADA ENERGY SYSTEMS, INC.
Appropriation Unit:	3650-07	Address:	PO BOX 10083
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89510-0083
If "No" please explain:	Not Applicable	Contact/Phone:	SANDY TODARO 775-331-4151
		Vendor No.:	PUR0002744A
		NV Business ID:	NV19941116677

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**

Anticipated BOE meeting date 07/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/06/2026**Contract term: **4 years and 19 days**4. Type of contract: **Contract**Contract description: **Generator Services**

5. Purpose of contract:

This is a new contract to provide ongoing generator services including repair and service; annual inspections and certifications; system testing and all other services associated with generators; transfer switches and other associated equipment for the facility in Carson City.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$95,848.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Facilities require generator services to include repair and service, annual inspections and certifications, system testing and all other services associated with generators, transfer switches and other associated equipment.

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 requisite skills or equipment for 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):

Nevada Energy Systems
American Power Solutions
Cummins Sales and Services

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only vendor to submit a bid.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	csnido1	05/13/2022 14:33:42 PM
Division Approval	csnido1	05/13/2022 14:33:44 PM
Department Approval	csnido1	05/13/2022 14:33:46 PM
Contract Manager Approval	csnido1	05/13/2022 14:33:48 PM
Budget Analyst Approval	nhovden	05/19/2022 14:35:02 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: **24866** Amendment Number: **1**

Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD** Legal Entity Name: **PINNACLE HEATING AND AIR CONDITIONING**

Agency Code: **431** Contractor Name: **PINNACLE HEATING AND AIR CONDITIONING**

Appropriation Unit: **3650-07** Address: **5301 LONGLEY LANE SUITE 201 BLDG F**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89511-1827**

If "No" please explain: Not Applicable Contact/Phone: **BRIAN BENSON 775-359-7799**

Vendor No.: **T27044461**

NV Business ID: **NV20071280052**

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/09/2021**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **08/31/2025**Contract term: **3 years and 357 days**4. Type of contract: **Contract**Contract description: **HVAC Service**

5. Purpose of contract:

This is the first amendment to the original contract, which provides heating, ventilation, and air conditioning services for Nevada National Guard facilities throughout the state. This amendment increases the maximum amount from \$41,167.74 to \$91,555.00 due to the vendor repairing the air conditioning systems that service the main building and server room at the Department of Emergency Management (DEM) facility.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$41,167.74	\$41,167.74	\$41,167.74	Yes - Info
2. Amount of current amendment (#1):	\$50,387.26	\$50,387.26	\$91,555.00	Yes - Info
3. New maximum contract amount:	\$91,555.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Service is required to make sure the buildings are comfortable so employees are able to get their work done.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of skills, tools, and qualifications.

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?

Four companies were solicited and all four were contracted to ensure that all work can be completed in a timely fashion.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	csnido1	04/22/2022 09:43:51 AM
Division Approval	csnido1	04/22/2022 09:43:54 AM
Department Approval	csnido1	04/22/2022 09:43:58 AM
Contract Manager Approval	csnido1	04/22/2022 14:24:12 PM
Budget Analyst Approval	vmilazz1	05/12/2022 16:07:24 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26045**Agency Name: **ADJUTANT GENERAL & NATIONAL GUARD**Agency Code: **431**Appropriation Unit: **3650-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **T&M CONTROLS, INC. DBA TM ELECTRICAL SOLUTIONS**Contractor Name: **T&M CONTROLS, INC. DBA TM ELECTRICAL SOLUTIONS**Address: **5865 S VALLEY VIEW BLVD**City/State/Zip: **LAS VEGAS, NV 89118**Contact/Phone: **IAN DRAZIN 702-240-4811**Vendor No.: **T32012253**NV Business ID: **NV20031233698**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 %

Agency Reference #: **431**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/15/2026**Contract term: **4 years and 4 days**4. Type of contract: **Contract**Contract description: **Water Tower**

5. Purpose of contract:

This is a new contract to provide ongoing services of maintenance, preventive maintenance, and repair of the water tower controllers for facilities in the southern Nevada region.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,455.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Maintenance to repair and maintain the water tower controllers for facilities in the southern Nevada region.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills or tools to perform maintenance and repair to water tower controllers.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):

**Enviser
T&M Controls
M.I.C.**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Received a price sheet and signed contract.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	04/15/2022 14:57:16 PM
Division Approval	ctyle1	04/15/2022 14:57:20 PM
Department Approval	ctyle1	04/15/2022 14:57:24 PM
Contract Manager Approval	csnido1	05/02/2022 09:42:02 AM
Budget Analyst Approval	vmilazz1	05/12/2022 16:48:26 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: **25996**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3727-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Nevada Organics LLC

Contractor Name: **Nevada Organics LLC**Address: **PO Box 2713**City/State/Zip: **Jackson, WY 83001**

Contact/Phone: Dane Buk 3077322794

Vendor No.:

NV Business ID: NV20171732676

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue Generating Contract

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/13/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **Yes**

If "Yes", please explain

A solicitation waiver for six (6) months and nineteen (19) days was signed to allow time to process a four-year contract for this sole source vendor. This is an interim contract to allow the operations to continue from February 13, 2022 to August 31, 2022.

3. Termination Date: **08/31/2022**Contract term: **198 days**4. Type of contract: **Revenue Contract**Contract description: **Inmate Training**

5. Purpose of contract:

This is a new revenue contract that continues to collect reimbursement for the cost to utilize offender labor, provide occupational training for offenders and use land at Silver State Industries (SSI) Prison Ranch for the purpose of compost operations. This contract includes the lease of 40 acres of land as well as a Quonset hut for storage and reimbursement of utilities for the processing of the compost.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$43,096.00**

Payment for services will be made at the rate of \$6,498.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

Per NRS 209.461 authorizes the State of Nevada, 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 Nevada Organics, LLC.

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: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 220302

Approval Date: 03/15/2022

c. Why was this contractor chosen in preference to other?

This vendor approached the State to supply the training to the inmates and lease the land for the purpose of producing compost.

d. Last bid date: 03/01/2018 Anticipated re-bid date: 07/31/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

February, 2018 to February 2022, Nevada Department of Corrections, Silver State Industries. The work 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 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	jdoucet	05/17/2022 09:48:16 AM
Division Approval	lluca2	05/17/2022 10:31:49 AM
Department Approval	lluca2	05/17/2022 10:31:54 AM
Contract Manager Approval	krey nol3	05/17/2022 10:32:32 AM
Budget Analyst Approval	vmilazz1	05/23/2022 16:16:00 PM

Steve Sisolak
Governor

Charles Daniels
Director

Lisa Lucas
Deputy Director
Support Services

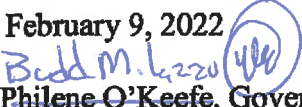


Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 977-5500

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(725) 216-6000

STATE OF NEVADA
Department of Corrections

MEMORANDUM

Date: February 9, 2022
To: 
Philene O'Keefe, Governor's Finance Office
Subject: Retroactive Contract Nevada Organics, LLC

Nevada Department of Corrections respectfully requests the approval for the retroactive contract between the Nevada Department of Corrections (NDOC) and Nevada Organics, LLC. Nevada Department of Corrections is requesting a retroactive effective date of February 13, 2022. The late submission of the contract occurred as Nevada Department of Corrections was waiting final dispensation for this revenue contract from the Governor's Finance Office and State Purchasing.

Thank you for your time and consideration of this matter.

A handwritten signature in blue ink, appearing to read "Lisa Lucas", with a stylized flourish at the end.

Lisa Lucas
Deputy Director of Support Services
Nevada Department of Corrections



**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#:	220302

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 <u>ONLY</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME HERE: Nevada Department of Corrections		
	Contact Name and Title	Phone Number	Email Address
	Kathryn Reynolds	(775) 977-5676	kreynolds@doc.nv.gov

1b	Vendor Information:	
	Vendor Name:	Nevada Organics, LLC
	Contact Name:	Cody Witt
	Complete Address:	PO Box 640
	City, State, and Zip Code	Minden, NV 89423
	Telephone Number:	(775) 450-6674
	Email Address:	cody@fullcirclecompost.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	X Sole
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	X	No:
	If 'No' Enter Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	2/13/2022	End Date:
				X
				8/31/2022

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	This is a revenue contract, no funding is required

10d 03/09/22

Purchasing Use Only:

Approval #:

220302@

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: Revenue Contract
	\$ 43,000.00 for the period requested

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>This is a revenue contract, not the purchase of goods and services. This company provides inmate training and wages in the process of recycling manure and green waste to produce compost / fertilizer. The company leases forty acres of land and a Quonset hut for the purpose of composting and storing the fertilizer prior to shipment.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>This company provides training and pay to inmates to learn the process of creating compost / fertilizer, recycled from manure from approximately 1,400 head of horses housed at this location as well as recycling brown and green waste from the local disposal company. At the current time, this is the only company in Northern Nevada registered in Nevada EPro, with the proper permits through the EPA, that does this type of recycling.</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>This is a revenue contract, not the purchase of goods and services. This company provides training and pay to inmates to learn the process of creating compost / fertilizer, recycled from manure from approximately 1,400 head of horses housed at this location as well as recycling brown and green waste from the local disposal company. At this time, this is the only company in Northern Nevada registered in Nevada EPro, with the proper permits through the EPA, that does this type of recycling. Any other companies would need to invest in specialized equipment, find staff who can pass background checks to train inmates on prison property, and obtain the proper EPA permits.</i>

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?	<i>The vendor approached NDOC concerning leasing forty acres of land and a Quonset hut for the purpose of creating compost and storing it prior to shipping out of the facility. The agency entered into the original contract under the assumption that a RFP was not necessary for a revenue contract, and it was approved.</i>	

Purchasing Use Only:

Approval #:

220302C

6	Has the agency purchased this service or commodity in the past? Check One:				Yes	No
	NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				X	
	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:					
	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #	
	Start Date	End Date				
	3/13/2018	2/12/2022	\$259,992.	Inmate Training		
		\$				
		\$				
		\$				
		\$				

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 is an ongoing revenue contract that provides training for inmates, not a purchase of goods or services. If this contract is not approved, the State stands to lose revenue generated by the lease of the land and the inmates will lose training and pay offered by this vendor. In addition, the State may incur costs to remove horse manure and other waste from the property if an expenditure contract is required.</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>A Google search was conducted and there are no other vendors in Northern Nevada currently registered in Nevada EPro who process compost from manure and green/brown waste and have the proper EPA required permits and equipment to handle the volume of waste generated by the facility.</i>

9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	<u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	X	
	a. If yes, please provide details regarding future obligations or needs.		
	<i>This vendor approached the State with the proposal to lease forty acres and repurpose the massive amount of horse manure generated by the approximate 1,400 head of horses housed at this facility. This appears to be the only company in Northern Nevada who possesses the necessary EPA permits to conduct this type of business in Northern Nevada. The State must dispose of the horse manure and this is a revenue generating enterprise as opposed to a cost to the State for disposal.</i>		

Purchasing Use Only:

Approval #:

2203020

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.


Signature of Agency Representative Initiating Request

Kathryn Reynolds

Print Name of Agency Representative Initiating Request

3/7/2022

Date


Signature of Agency Head Authorizing Request

Lisa Lucas

Print Name of Agency Head Authorizing Request

3/7/2022

Date

FOR PURCHASING USE ONLY - 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

3/15/22
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: **25746**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **4550-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MICROTECH SOLUTIONS, LLC**Contractor Name: **MICROTECH SOLUTIONS, LLC**Address: **2311 HOLLY VIEW DR**City/State/Zip: **MARTINEZ, CA 94553**

Contact/Phone: April Ornelas 510-342-3088

Vendor No.: T27043883

NV Business ID: NV20222380364

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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	8.00 % Assessments-Dairy
X Federal Funds	92.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: #22-28

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/21/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2024**Contract term: **2 years and 255 days**4. Type of contract: **Contract**Contract description: **PM microscopes**

5. Purpose of contract:

This is a new contract to provide annual preventative maintenance and repair to the microscopes in the Animal Disease Laboratory, Dairy Laboratory, Plant Pathology and Plant Entomology Laboratories at the Sparks headquarters.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,690.57****II. JUSTIFICATION**

7. What conditions require that this work be done?

All microscopes require routine maintenance to support microscopic precision, extend the life of the scope and reduce the need for emergency repairs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Employees do not have the expertise or equipment to perform this specialty.

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):

**Precision Lab Works
MicroTech Solutions
AI-Tar Laboratory Equipment**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor provided the best pricing.

d. Last bid date: 02/24/2022 Anticipated re-bid date: 09/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	btait	03/18/2022 11:59:55 AM
Division Approval	tdoucett	03/21/2022 10:02:59 AM
Department Approval	tdoucett	03/21/2022 10:03:04 AM
Contract Manager Approval	melli2	04/12/2022 13:28:33 PM
Budget Analyst Approval	dspeed1	04/21/2022 16:41:56 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: **23080**Amendment Number: **1**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **C&C NEVADA, LLC**Agency Code: **550**Contractor Name: **C&C NEVADA, LLC**Appropriation Unit: **4554-07**Address: **JANI KING OF NEVADA**Is budget authority available?: **Yes**City/State/Zip: **PO BOX 650002 DEPT 8037**

If "No" please explain: Not Applicable

Contact/Phone: **DALLAS, TX 75265-0002**Vendor No.: **702/737-6116**NV Business ID: **T29041296A**To what State Fiscal Year(s) will the contract be charged? **NV20181600550****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 % Cost Allocation

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/01/2020**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **04/30/2022**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Janitorial LV**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing janitorial services for the southern headquarters. This amendment extends the termination date from April 30, 2022 to April 30, 2024 and increases the maximum amount from \$23,760 to \$59,400 due to a continued need for services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$23,760.00	\$23,760.00	\$23,760.00	Yes - Info
2. Amount of current amendment (#1):	\$35,640.00	\$35,640.00	\$59,400.00	Yes - Info
3. New maximum contract amount:	\$59,400.00			
and/or the termination date of the original contract has changed to:	04/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Southern Nevada headquarters must be maintained to a minimum standard of cleanliness.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDA does not employ full time janitorial staff at this location.

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?

Jani King was the only vendor who provided a cost proposal.

d. Last bid date: 04/03/2020 Anticipated re-bid date: 02/01/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Jani-King has provided janitorial services to the Nevada Department of Agriculture in Las Vegas since 2016. They have provided satisfactory cleaning services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	btait	04/12/2022 16:30:31 PM
Division Approval	kdailey	04/18/2022 14:50:57 PM
Department Approval	kdailey	04/18/2022 14:51:01 PM
Contract Manager Approval	melli2	04/18/2022 14:54:08 PM
Budget Analyst Approval	dspeed1	04/29/2022 16:12:35 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25411**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **4554-07**Is budget authority available?: **No**If "No" please explain: **WP #C58760**Legal Entity Name: **ChemTreat, Inc.**Contractor Name: **ChemTreat, Inc.**Address: **5640 Cox Rd**City/State/Zip: **Glen Allen, VA 23060**Contact/Phone: **Leila Hassan 804-229-2151**Vendor No.: **T32012243**NV Business ID: **NV19891011173`**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % Cost Allocation

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/20/2022**Anticipated BOE meeting date **04/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/15/2026**Contract term: **3 years and 271 days**4. Type of contract: **Contract**Contract description: **PM Cooling system**

5. Purpose of contract:

This is a new contract to provide inspection services, required chemicals and in house training for the Sparks cooling tower and system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$18,324.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Inspection services and chemicals prevent scale, corrosion and bio fouling of cooling tower and condenser water systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the skills or tools to perform the cleaning or testing.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):

Chemtex Corporation
ChemTreat, Inc.
RHP Mechanical Systems
b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

ChemTreat had the lowest cost.

d. Last bid date: 11/14/2021 Anticipated re-bid date: 12/15/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	btait	01/06/2022 09:35:17 AM
Division Approval	tdoucett	01/07/2022 11:02:58 AM
Department Approval	kdailey	01/07/2022 11:05:26 AM
Contract Manager Approval	melli2	01/07/2022 14:30:29 PM
Budget Analyst Approval	dspeed1	04/20/2022 14:52:24 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26135**Agency Name: **DPS-DIRECTOR'S OFFICE**Agency Code: **650**Appropriation Unit: **4706-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Dr. James Tenney Psy.D.

Contractor Name: **Dr. James Tenney Psy.D.**Address: **11153 Pergola Point Ct.**City/State/Zip: **Las Vegas, NV 89144**

Contact/Phone: James Tenney 702-250-6391

Vendor No.: T29044528

NV Business ID: NV20212278670

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	37.70 %	X	Fees	6.30 %	.76% Plan Review, 2.06% Brady, 3.46% Court Assessment Fees
	Federal Funds	0.00 %		Bonds	0.00 %	
X	Highway Funds	53.70 %	X	Other funding	2.30 %	Internal Service Fund (CP)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2026**Contract term: **3 years and 264 days**4. Type of contract: **Contract**Contract description: **Psychology/Wellness**

5. Purpose of contract:

This is a new contract to provide psychological counseling, evaluation, and therapy services to sworn and/or civilian employees.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,000.00**

Other basis for payment: \$350.00 per employee for initial evaluation (billing code 90791); \$150.00 per 45 minute standard session (billing code 90834), \$75.00 per 20 minute briefer session (billing code 90832)

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?

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?

Pursuant to NAC 333.150(2)(b)(6), Department employees have chosen Dr. Tenney's professional services.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	04/26/2022 16:34:14 PM
Division Approval	lgallow1	04/26/2022 16:34:18 PM
Department Approval	mcosenti	04/27/2022 13:39:59 PM
Contract Manager Approval	mcosenti	04/27/2022 13:40:04 PM
Budget Analyst Approval	jrodrig9	05/13/2022 02:10:56 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: **26136**Agency Name: **DPS-DIRECTOR'S OFFICE**Agency Code: **650**Appropriation Unit: **4706-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SHIODE PSYCHOTHERAPY, INC.**Contractor Name: **SHIODE PSYCHOTHERAPY, INC.**Address: **501 S RANCHO DR STE I-64**City/State/Zip: **LAS VEGAS, NV 89106-4838**Contact/Phone: **Daniel Shiode 702-384-4110**Vendor No.: **T27044462**NV Business ID: **NV19981168594**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	37.70 %	X	Fees	6.30 %	.76% Plan Review, 2.06% Brady, 3.46% Court Assessment Fees
	Federal Funds	0.00 %		Bonds	0.00 %	
X	Highway Funds	53.70 %	X	Other funding	2.30 %	Internal Service Fund (CP)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2026**Contract term: **3 years and 323 days**4. Type of contract: **Contract**Contract description: **Psychology/Wellness**

5. Purpose of contract:

This is a new contract to provide psychological counseling, evaluation, and therapy services to sworn and/or civilian employees.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$46,800.00**

Other basis for payment: \$350.00 per employee for initial evaluation (billing code 90791); \$125.00 per 45-50 minute follow-up session (billing code 90834); \$195.00 per 75-80 minute follow-up session (billing code 90837); \$250.00 per hour for psychological testing (billing code 96101)

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?

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?

Pursuant to NAC 333.150(2)(b)(6), Department employees have chosen Dr. Shiode's professional services.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	lgallow1	04/26/2022 16:45:16 PM
Division Approval	lgallow1	04/26/2022 16:45:19 PM
Department Approval	mcosenti	04/27/2022 13:53:01 PM
Contract Manager Approval	mcosenti	04/27/2022 13:53:07 PM
Budget Analyst Approval	jrodrig9	05/13/2022 02:06:24 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: **25507**Agency Name: **OFFICE OF THE MILITARY -
EMERGENCY MANAGEMENT**Agency Code: **654**Appropriation Unit: **3673-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ESI ACQUISITION, INC.**Contractor Name: **ESI ACQUISITION, INC.**Address: **235 Peachtree Street, NE
Suite 2300**City/State/Zip: **AUGUSTA, GA 30303**Contact/Phone: **Bryan Hovde 714-986-6545**

Vendor No.:

NV Business ID: **NV20121279219**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	20.00 %	Fees	0.00 %
X	Federal Funds	80.00 %	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 **05/19/2022**Anticipated BOE meeting date **07/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 43 days**4. Type of contract: **Contract**Contract description: **WebEOC**

5. Purpose of contract:

This is a new contract to provide ongoing annual user license agreement and software support.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$90,684.30**

Other basis for payment: based on the consideration section of the contract

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is for the annual license, maintenance, technical support and potential training related to the State Emergency Operations Center Crisis Information Management Software. The SEOC utilizes an online and networked computerized system for collection, storing and managing incident information and resources before, during and after emergencies or disasters.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a vendor specific product that integrates within the Division of Emergency Management's information management system (WebEOC) allowing emergency management agencies statewide access to the information.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Direct purchase of maintenance and support for systems already purchased per State Purchasing.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Judith Lyman, MA Ph: 775-687-0324

Melissa Friend, EMPM Ph: 775-687-0371

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jlyma2	01/27/2022 13:51:24 PM
Division Approval	vjimene1	01/27/2022 14:16:45 PM
Department Approval	ctyle1	01/27/2022 16:42:02 PM
Contract Manager Approval	csnido1	05/13/2022 16:09:30 PM
Budget Analyst Approval	nhovden	05/19/2022 14:22:53 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: **24464**Amendment Number: **1**Agency Name: **DEPARTMENT OF WILDLIFE**Legal Entity Name: **GoHunt, LLC**Agency Code: **702**Contractor Name: **GoHunt, LLC**Appropriation Unit: **4462-10**Address: **PO Box 31150**Is budget authority available?: **Yes**City/State/Zip: **Las Vegas, NV 89173**

If "No" please explain: Not Applicable

Contact/Phone: **Chris Porter 702-575-1844**Vendor No.: **T29040773A**NV Business ID: **NV20131538171**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

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 % Resource Enhancement Stamp Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **21-72**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/19/2021**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **3 years and 347 days**4. Type of contract: **Contract**Contract description: **Tag Marketing**

5. Purpose of contract:

This is the first amendment to the original contract which provides marketing of the Resource Enhancement Stamp and Dream Tap programs. This amendment extends the termination date from June 30, 2022 to June 30, 2025 and increases the maximum amount from \$20,000 to \$80,000 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:	\$20,000.00	\$20,000.00	\$20,000.00	Yes - Info
2. Amount of current amendment (#1):	\$60,000.00	\$60,000.00	\$80,000.00	Yes - Info
3. New maximum contract amount:	\$80,000.00			
and/or the termination date of the original contract has changed to:	06/30/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

This work will provide outreach to the public to increase awareness of the Resource Enhancement Stamp and Dream Tag programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The department does not have the proper equipment or trained personnel to complete 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):

GoHunt, LLC
Kalkomey
The Abbi Agency

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor possessed expertise and experience marketing these products that other vendors did not.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

NDOW, 2020, work 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 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	mespinoz	01/24/2022 13:51:46 PM
Division Approval	jneubau2	02/01/2022 12:30:55 PM
Department Approval	bvale1	02/15/2022 12:12:54 PM
Contract Manager Approval	cprasa1	02/16/2022 08:15:25 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: **24886**Amendment
Number: **1**Agency Name: **DEPARTMENT OF WILDLIFE**Legal Entity
Name: **Colorado State University**Agency Code: **702**Contractor Name: **Colorado State University**Appropriation Unit: **4464-13**Address: **300 West Drake**Is budget authority
available?: **Yes****Building C**

If "No" please explain: Not Applicable

City/State/Zip **Fort Collins, CO 80524**

Contact/Phone: Janice Inman 970-297-5061

Vendor No.: PUR0004781A

NV Business ID: GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: 22-18

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **01/02/2022**
Examiner's approval?

Anticipated BOE meeting date 04/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **12/31/2025**
Termination Date:Contract term: **3 years and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **ELISA Testing**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides sample testing from deer, elk, and moose for Chronic Wasting Disease in Nevada. This amendment increases the maximum amount from \$30,000 to \$50,000 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:	\$30,000.00	\$30,000.00	\$30,000.00	Yes - Info
2. Amount of current amendment (#1):	\$20,000.00	\$20,000.00	\$50,000.00	Yes - Info
3. New maximum contract amount:	\$50,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

NDOW tests annually for Chronic Wasting Disease (CWD), White Nose, and various other diseases as part of our disease surveillance program. CWD is the most important disease of cervid species and it is critically important that we know if it or any other pathogen is present in our free ranging cervid herds in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is no laboratory in the state of Nevada that can perform this testing.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

NDOW FY21, work 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	mespinoz	02/01/2022 12:52:17 PM
Division Approval	jneubau2	02/07/2022 14:42:10 PM
Department Approval	bvale1	02/24/2022 18:26:20 PM
Contract Manager Approval	cprasa1	03/01/2022 12:52:52 PM
Budget Analyst Approval	dspeed1	04/22/2022 16:24:22 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: **25574**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: **Ecoculture Reforestation Network, LLC**Contractor Name: **Ecoculture Reforestation Network, LLC**Address: **210 E. Dale Avenue**City/State/Zip: **Flagstaff, AZ 86001**Contact/Phone: **Chris Updike 928-863-8942**Vendor No.: **T27044711**NV Business ID: **NV20222390732**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Habitat Conservation Fee
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **22-53**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/28/2022**Anticipated BOE meeting date **04/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 63 days**4. Type of contract: **Contract**Contract description: **Screwbean Mesquite**

5. Purpose of contract:

The is a new contract to provide insight into the screwbean mesquite (Prosopis pubescens) die-off by monitoring tree health and identifying potential causes of the die-off in southern Nevada and in the Amargosa Basin of California.

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?

Screwbean mesquite is an iconic tree species of riparian woodlands in the arid Southwest. As a foundational species in the ecosystems where it occurs, screwbean provides critically important wildlife habitat. In the Mojave Desert, the endangered least Bells' vireo (Vireo bellii pusillus) often nests in screwbean mesquite trees. This species is important habitat for the endangered southwestern willow flycatcher (Empidonax traillii extimus). Recovery of both least Bells' vireo and southwestern willow flycatcher relies upon improving riparian habitat. The screwbean mesquite die-off threatens these recovery efforts and it is very important to learn why the trees are dying.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Department of Wildlife currently does not have the professional staff and equipment to conduct this specialized monitoring and research.

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):

Ecoculture
BEC Environmental
SWCA

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Ecoculture was the only vendor who submitted a bid.

d. Last bid date: 02/22/2022 Anticipated re-bid date: 02/22/2023

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Anthony Miller, Biologist Ph: 702-280-1177

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	02/09/2022 10:59:31 AM
Division Approval	jneubau2	03/25/2022 10:10:35 AM
Department Approval	jneubau2	03/25/2022 13:34:52 PM
Contract Manager Approval	cprasa1	03/31/2022 11:46:12 AM
Budget Analyst Approval	dspeed1	04/28/2022 14:36:15 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: **23533**Amendment Number: **1**Legal Entity Name: **HUMBOLDT WATERSHED
COOPERATIVE WEED MANAGEMENT
AREA**Agency Name: **DEPARTMENT OF WILDLIFE**Contractor Name: **HUMBOLDT WATERSHED
COOPERATIVE WEED MANAGEMENT
AREA**Agency Code: **702**Address: **PO Box 8203**Appropriation Unit: **4467-14**Is budget authority available?: **Yes**City/State/Zip: **SPRING CREEK, NV 89815**

If "No" please explain: Not Applicable

Contact/Phone: **ANDI PORRECA 775-762-2636**Vendor No.: **T27029602**NV Business ID: **NV20041351215**To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % **X** Fees **100.00 % Habitat Conservation Fee**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **21-01**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2021**Anticipated BOE meeting date **04/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2022**Contract term: **4 years and 23 days**4. Type of contract: **Contract**Contract description: **Weed Treatment**

5. Purpose of contract:

This is the first amendment to the original contract which provides weed infestation treatment on private lands in the Humboldt Watershed. This amendment extends the termination date from September 30, 2022 to January 31, 2025 and increases the maximum amount from \$30,000 to \$80,000 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:	\$30,000.00	\$30,000.00	\$30,000.00	Yes - Info
2. Amount of current amendment (#1):	\$50,000.00	\$50,000.00	\$80,000.00	Yes - Info
3. New maximum contract amount:	\$80,000.00			
and/or the termination date of the original contract has changed to:	01/31/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

Wildlife species are dependent on healthy vegetative communities and the treatment of non-native/invasive weed species will ensure preservation of these ecosystems.

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 capacity to accomplish this work and this contract will compliment our limited capacities.

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):

Tri-County Weed
HWCWMA
Boss Tanks

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor has the qualified knowledge, skill, and resources and was the only vendor to submit a proposal.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 Agriculture, Department of Wildlife, Department of Environmental Protection: work 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 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

mespinoz

01/26/2022 09:18:49 AM

Division Approval

jneubau2

02/03/2022 13:29:04 PM

Department Approval	bvale1	02/07/2022 13:46:19 PM
Contract Manager Approval	cprasa1	02/15/2022 11:09:39 AM
Budget Analyst Approval	dspeed1	04/22/2022 15:36:10 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: **25635**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4467-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **UNITED SITE SERVICES OF NEVADA, INC.**Contractor Name: **United Site Services**Address: **PO Box 660475**City/State/Zip: **Dallas, TX 75266**Contact/Phone: **Tina Schmid 800-864-5387**Vendor No.: **T27006789B**NV Business ID: **NV20021451026**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 #: **22-58**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/28/2022**Anticipated BOE meeting date **04/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **1 year and 2 days**4. Type of contract: **Contract**Contract description: **Portable Restrooms**

5. Purpose of contract:

This is a new contract to provide portable bathrooms and related services at Wildlife Management Areas for use by the visiting public.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,373.40****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Carson Lake Wildlife Management Area and the Mason Valley Wildlife Management Area do not have adequate facilities for the visiting public. Adding portable bathrooms will meet the needs of the public when hunting, birding, or engaging in other recreational activities on the WMA, reducing litter and improving the overall WMA experience.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not own portable bathrooms to place at the sites where bathrooms are needed and does not have the expertise for setup and takedown.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):

Budget Porta Potty
Allied
United Site Services
Sani Hut

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

They were able to service the Fallon and Yerington areas.

d. Last bid date: 02/10/2022 Anticipated re-bid date: 02/10/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Transportation in 2022, work 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 registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

dba

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Isaac Metcalf, Wildlife Area Supervisor II Ph: 775-463-2741

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	02/18/2022 17:03:25 PM
Division Approval	jneubau2	03/23/2022 14:34:14 PM
Department Approval	bvale1	04/12/2022 14:17:29 PM
Contract Manager Approval	cprasa1	04/14/2022 10:00:05 AM
Budget Analyst Approval	dspeed1	04/28/2022 14:44:50 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: **26279**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: **Borges Sleigh and Carriage Rides**Contractor Name: **Borges Sleigh and Carriage Rides**Address: **445 Hansen Lane**City/State/Zip: **Gardnerville, NV 89460**Contact/Phone: **Dwight Borges 775.901.1691**

Vendor No.:

NV Business ID: **NV19981382316**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **346 days**4. Type of contract: **Revenue Contract**Contract description: **Revenue Contract**

5. Purpose of contract:

This is a new revenue contract to offer winter sleigh rides and narrated programs at Lake Tahoe Nevada State Parks - Sand Harbor

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?

Guided tours and sleigh rides.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State Park employees do not have the time or expertise to complete this task.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?

Revenue contract

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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 Division of State Parks; 2017-2021; 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:

Kevin Fromherz, Park Supervisor Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	05/09/2022 15:28:44 PM
Division Approval	kcopelan	05/09/2022 15:28:46 PM
Department Approval	kcopelan	05/09/2022 15:28:49 PM
Contract Manager Approval	jidema	05/19/2022 13:58:07 PM
Budget Analyst Approval	rjacob3	05/19/2022 14:08:33 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: **26171**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: Longoria Services

Contractor Name: **Longoria Services**Address: **2630 Blitzen Road**City/State/Zip: **S. Lake Tahoe , CA 96150**

Contact/Phone: Albert Scott Longoria 775.721.8664

Vendor No.:

NV Business ID: NV20212067804

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 07/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **349 days**4. Type of contract: **Revenue Contract**Contract description: **Revenue Contract**

5. Purpose of contract:

This is a new revenue contract to provide boat launching services at Lake Tahoe Nevada State Park - Cave Rock.

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?

Provide boat launching services

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Park employees do not have the time or the expertise to provide this type of duty.

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?

Revenue contract

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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:

Brett Hartley, Park Ranger III Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	04/27/2022 11:18:35 AM
Division Approval	kcopelan	04/27/2022 11:18:38 AM
Department Approval	kcopelan	04/27/2022 11:18:41 AM
Contract Manager Approval	kcopelan	04/27/2022 11:18:46 AM
Budget Analyst Approval	rjacob3	05/16/2022 09:21:45 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: **26220**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: Nevada Adventures LLC

Contractor Name: **Nevada Adventures LLC**Address: **930 Tahoe Blvd Ste 36**City/State/Zip: **Incline Village, NV 89451**

Contact/Phone: Kevin Hickey 530.913.9212

Vendor No.: T29045150

NV Business ID: NV20181159660

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **349 days**4. Type of contract: **Contract**Contract description: **Revenue Contract**

5. Purpose of contract:

This is a new revenue contract to provide kayak, paddleboards, snowshoe, hiking, and mountain bike tours within Sand Harbor and Spooner Lake State Parks.

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?

Commercial operations using State Park facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Park employees do not have the expertise or time to accomplish this activity.

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?

Revenue contract

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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:

guided tours at Sand Harbor from 5/1/19 - 4/30/22; 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:

Kevin Fromherz, Park Supervisor Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	05/03/2022 14:48:20 PM
Division Approval	kcopelan	05/03/2022 14:48:22 PM
Department Approval	kcopelan	05/03/2022 14:48:24 PM
Contract Manager Approval	kcopelan	05/03/2022 14:48:27 PM
Budget Analyst Approval	rjacob3	05/16/2022 08:24:30 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: **26222**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: Outdoor Immersions Inc

Contractor Name: **Outdoor Immersions Inc**Address: **PO Box 1675**City/State/Zip: **Tahoe City, CA 96145**

Contact/Phone: Andrew Laughlin 530.581.4336

Vendor No.: T32012181

NV Business ID: NV20111039695

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **346 days**4. Type of contract: **Contract**Contract description: **Revenue contract**

5. Purpose of contract:

This is a new revenue contract to provide kayak, paddleboard, showshoe, mountain bike and hiking tours.

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?

Commercial operations using park facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Parks does not have the time or the expertise to accomplish.

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?

Revenue contract

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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 concessionaire for Sand Harbor; 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 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:

Kevin Fromherz, Park Supervisor Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	05/03/2022 15:32:40 PM
Division Approval	kcopelan	05/03/2022 15:32:42 PM
Department Approval	kcopelan	05/03/2022 15:32:45 PM
Contract Manager Approval	kcopelan	05/03/2022 15:32:47 PM
Budget Analyst Approval	rjacob3	05/19/2022 15:02:52 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: **26173**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: Talbot Tours

Contractor Name: **Talbot Tours**Address: **PO Box 6684**City/State/Zip: **Incline Village, NV 89450**

Contact/Phone: Chris Talbot 775.345.5966

Vendor No.:

NV Business ID: NV20151418577

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **349 days**4. Type of contract: **Revenue Contract**Contract description: **Revenue Contract**

5. Purpose of contract:

This is a new revenue contract to provide guided tours of Lake Tahoe Nevada State Parks - Sand Harbor.

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?

To provide commercial operations using State Park facilities

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Parks employees do not have the time provide this type of event.

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?

revenue contract

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Kevin Fromherz, Park Supervisor Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	04/27/2022 11:38:57 AM
Division Approval	kcopelan	04/27/2022 11:38:59 AM
Department Approval	kcopelan	04/27/2022 11:39:01 AM
Contract Manager Approval	kcopelan	04/27/2022 11:39:04 AM
Budget Analyst Approval	rjacob3	05/16/2022 09:04:33 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: **26213**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: Walker Marine

Contractor Name: **Walker Marine**Address: **PO Box 10499**City/State/Zip: **So. Lake Tahoe , CA 96158**

Contact/Phone: Clay Walker 530.541.8514

Vendor No.:

NV Business ID: NV20061021670

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2023**Contract term: **349 days**4. Type of contract: **Revenue Contract**Contract description: **Revenue Contract**

5. Purpose of contract:

This is a new revenue contract to provide boat launching services at Lake Tahoe Nevada State Park - Cave Rock.

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?

Vendor will launch and take out boats from Cave Rock.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Park employees to not have the time to perform this duty.

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?

Revenue contract

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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:

Lake Tahoe Nevada State Parks: 6/2/21 - 12/31/21; 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:

Brett Hartley, Park Ranger III Ph: 775.831.0494

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	05/03/2022 15:14:39 PM
Division Approval	kcopelan	05/03/2022 15:14:41 PM
Department Approval	kcopelan	05/03/2022 15:14:44 PM
Contract Manager Approval	kcopelan	05/03/2022 15:14:47 PM
Budget Analyst Approval	rjacob3	05/16/2022 09:18:17 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: **25934**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4605-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AMBIENT EDGE AIR CONDITIONING**Contractor Name: **AMBIENT EDGE AIR CONDITIONING**Address: **AND REFRIGERATION INC
3270 KINO AVE**City/State/Zip: **KINGMAN, AZ 86409-3348**Contact/Phone: **928/718-1017**Vendor No.: **T29036686**NV Business ID: **NV20212036735**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 % MAINTENANCE OF STATE PARKS - SURCHARGE

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2026**Contract term: **3 years and 320 days**4. Type of contract: **Contract**Contract description: **Service contract**

5. Purpose of contract:

This is a new contract to provide HVAC maintenance, repair and/or replacement at the Southern Region State Parks.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$97,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

State Parks has many HVAC units that require maintenance and repair.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Park employees do not have the time or the expertise to perform this task.

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):

**The Cooling Company
Ambient Edge Heating and Air Conditioning
The AC Company**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only Ambient Edge replied and provided quotes.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

Ambient Edge is our current contract holder. Their 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 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:

Rett Smith, Facilities Manager Ph: 702.486.5126

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	03/30/2022 09:03:10 AM
Division Approval	kcopelan	03/30/2022 09:03:12 AM
Department Approval	kcopelan	03/30/2022 09:03:15 AM
Contract Manager Approval	kcopelan	03/30/2022 09:03:18 AM
Budget Analyst Approval	rjacob3	05/16/2022 08:14:45 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: **25979**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4605-06**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ARTISTIC FENCE COMPANY INC**Contractor Name: **ARTISTIC FENCE COMPANY INC**Address: **5740 HIGHWAY 50 E**City/State/Zip: **CARSON CITY, NV 89701**Contact/Phone: **775/882-4665**Vendor No.: **PUR0000883B**NV Business ID: **NV19711002179**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Maintenance of State Parks
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 **05/19/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/01/2022**Contract term: **74 days**4. Type of contract: **Contract**Contract description: **Service Contract**

5. Purpose of contract:

This is a new contract to install a new chain link fence around a park owned residence located at Lahontan State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,969.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Current fencing is damaged with multiple patch work becoming unsafe.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada State Park employees do not have the time to perform this type of work.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Artistic Fence was the only vendor to provide a quote.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? 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 Parks - Washoe Lake: June 2017; Satisfactory work

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:

Steve Garcia, Facility Supervisor III Ph: 775.867.3001

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kcopelan	04/04/2022 12:05:34 PM
Division Approval	kcopelan	04/04/2022 12:05:40 PM
Department Approval	kcopelan	04/04/2022 12:05:43 PM
Contract Manager Approval	kcopelan	04/04/2022 12:05:46 PM
Budget Analyst Approval	rjacob3	05/19/2022 14:31:15 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: **22411** Amendment Number: **2**

Agency Name: **DCNR - DIVISION OF WATER RESOURCES** Legal Entity Name: **US DISTRICT COURT WATER MASTER**

Agency Code: **705** Contractor Name: **US DISTRICT COURT WATER MASTER**

Appropriation Unit: **4108-20** Address: **9760 S MCCARRAN BLVD**

Is budget authority available?: **No** City/State/Zip: **RENO, NV 89523-9203**

If "No" please explain: See pending Work Program C58744 Contact/Phone: **775/784-5241**

Vendor No.: **T60160268**

NV Business ID: **Governmental Entity**

To what State Fiscal Year(s) will the contract be charged? **2020-2026**

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 % Joint Funding Agreement - Pass Through

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 **05/2023**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/30/2022**

Contract term: **6 years and 1 day**

4. Type of contract: **Other (include description): Joint Funding Agreement**

Contract description: **TROA AGREEMENT**

5. Purpose of contract:

This is the second amendment to the original Joint Funding Agreement to administer pass-through funding for the Truckee River Operation Agreement. This amendment extends the termination date from September 30, 2022 to September 30, 2025 and increases the maximum amount from \$1,770,000 to \$1,803,176.62 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:	\$1,200,000.00	\$1,200,000.00	\$1,200,000.00	Yes - Action
a. Amendment 1:	\$570,000.00	\$570,000.00	\$570,000.00	Yes - Action
2. Amount of current amendment (#2):	\$33,176.62	\$33,176.62	\$33,176.62	Yes - Info
3. New maximum contract amount:	\$1,803,176.62			
and/or the termination date of the original contract has changed to:	09/30/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

This work is being completed as the result of a legal settlement and subsequent executed joint funding agreement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract, no work is being completed by agency 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?

N/A

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	sweb4	04/04/2022 11:41:02 AM
Division Approval	sweb4	04/04/2022 11:41:06 AM
Department Approval	kwilliam	04/07/2022 09:38:21 AM
Contract Manager Approval	sweb4	04/07/2022 10:10:17 AM
Budget Analyst Approval	rjacob3	04/20/2022 09:53:22 AM

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: **21064** Amendment Number: **2**

Agency Name: **DCNR - DIVISION OF WATER RESOURCES** Legal Entity Name: **UNITED STATES DEPT OF INTERIOR**

Agency Code: **705** Contractor Name: **UNITED STATES DEPT OF INTERIOR**

Appropriation Unit: **4157-10** Address: **US GEOLOGICAL SURVEY**

Is budget authority available?: **Yes** City/State/Zip: **CARSON CITY , NV 89701**

If "No" please explain: Not Applicable Contact/Phone: **Phil Gardner 775-887-7664**

Vendor No.: **PUR0000332D**

NV Business ID: **Governmental Entity**

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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 % Joint Funding Agreement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/09/2018**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2022**

Termination Date:

Contract term: **4 years and 265 days**4. Type of contract: **Other (include description): Joint Funding Agreement**Contract description: **Goshute Valley Study**

5. Purpose of contract:

This is the second amendment to the original joint funding agreement to fund a study of the hydraulic connectivity and bulk hydraulic properties of carbonate-rock and basin-fill aquifers in the vicinity of Big Springs and the Johnson Springs Wetland Complex in Goshute Valley. This amendment extends the termination date from September 30, 2022 to June 30, 2023 and increases the maximum amount from \$390,000 to \$415,000 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:	\$300,000.00	\$300,000.00	\$300,000.00	Yes - Action
a. Amendment 1:	\$90,000.00	\$90,000.00	\$90,000.00	Yes - Action
2. Amount of current amendment (#2):	\$25,000.00	\$25,000.00	\$25,000.00	Yes - Info
3. New maximum contract amount:	\$415,000.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Long Canyon Mine Project in Goshute Valley, Nevada will require groundwater pumping from the carbonate-rock aquifer to sustain the proposed open-pit gold mining and processing activities for the life of the mine. This pumping will alter flow rates at neighboring springs and groundwater levels which will affect the appropriators that have water rights on these sources. The study will provide relevant hydrologic data for use in assessing long-term pumping effects and inform possible mitigation efforts.

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?

The U.S. Geological Survey has the necessary equipment in place and expertise in delivering the desired product, and the State Engineer is authorized to enter into agreements with the U.S. Geological Survey under NRS 532.170.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 U.S. Geological Survey that have resulted in many products widely used by governmental 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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sweb4	05/04/2022 07:11:56 AM
Division Approval	sweb4	05/04/2022 07:12:00 AM

Department Approval	kwilliam	05/04/2022 09:03:07 AM
Contract Manager Approval	sweb4	05/04/2022 09:28:15 AM
Budget Analyst Approval	rjacob3	05/16/2022 09:50:15 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: **26047**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-41**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Jobs Peak Weed Control**Contractor Name: **Jobs Peak Weed Control**Address: **1224 Esther Way**City/State/Zip: **Minden, NV 89423**Contact/Phone: **Jeffrey VanNest (775) 354-64**Vendor No.: **T32012397**NV Business ID: **NV20171084837**To what State Fiscal Year(s) will the contract be charged? **2022-2024**

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	50.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	50.00 % SB 508 NV Energy

Agency Reference #: **NDF22-011**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/21/2022**Anticipated BOE meeting date **04/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2024**Contract term: **2 years and 10 days**4. Type of contract: **Contract**Contract description: **HerbicideApplication**

5. Purpose of contract:

This is a new contract to provide ground applied herbicide application to previously mowed or grubbed areas along powerlines to increase fuel-break conditions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Previously mowed or grubbed areas along powerlines require herbicide/pesticide application to stop invasive species of cheat-grass.

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 labor & equipment capacity necessary to perform these services under contractual obligation of the agency.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):

Cutting Edge Forestry
Jobs Peak Pest Control
Integrity Pest Management
Progressive Pest Management

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as the best value to the division and State.

d. Last bid date: 03/21/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Sean Gephart, Forrester III Ph: 775-849-2500x239

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorensen	04/19/2022 08:21:13 AM
Division Approval	dsorensen	04/19/2022 08:21:15 AM
Department Approval	dsorensen	04/19/2022 08:21:17 AM
Contract Manager Approval	rmorse	04/19/2022 08:22:18 AM
Budget Analyst Approval	rjacob3	04/21/2022 10:17:38 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: **26272**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **PESTMASTER SERVICES**Contractor Name: **PESTMASTER SERVICES**Address: **9716 S VIRGINIA ST STE E**City/State/Zip: **RENO, NV 89511**Contact/Phone: **James Meno 775/858-7378**Vendor No.: **T27029998**NV Business ID: **NV20201882372**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **NDF22-013**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/19/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 43 days**4. Type of contract: **Contract**Contract description: **Pest Control**

5. Purpose of contract:

This is a new contract to provide pest control services to the Nevada Division of Forestry Western Region headquarters and nursery.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,151.73**

Other basis for payment: Initial Payment - \$378.95; SFY23 - \$2,267.40; SFY24 - \$2,380.77; SFY25 - \$2,499.81; SFY26 - \$2,624.80.

II. JUSTIFICATION

7. What conditions require that this work be done?

SAM 1008 Care of Buildings: Buildings, rooms, basements, floors, windows, furniture, and appurtenances are to be kept clean, orderly, and presentable as befitting public property. Conditions should be as such to reduce fire hazard to a minimum. Pest control services reduce health risk to state employees and the public.

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 knowledge or expertise 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):

Celtic Inspections
Pest Masters
Reno Sierra Pest Control
Orkin

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor was selected by an evaluation committee in accordance with NRS and NAC 333.

d. Last bid date: 04/29/2022 Anticipated re-bid date: 04/13/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 services for NDOW, DETR and NDF since 2012 - 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	hedmonds	05/10/2022 12:14:26 PM
Division Approval	dsorensen	05/10/2022 14:41:02 PM
Department Approval	dsorensen	05/10/2022 14:41:06 PM
Contract Manager Approval	rmorse	05/13/2022 11:30:03 AM
Budget Analyst Approval	rjacob3	05/19/2022 13:34:33 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: **26197**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **RHP Mechanical Systems**Contractor Name: **RHP Mechanical Systems**Address: **1008 East Fourth Street**City/State/Zip: **Reno, NV 89505**Contact/Phone: **JoLynn Bass 775-322-9434**Vendor No.: **PUR0002724A**NV Business ID: **NV20041446186**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	87.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	13.00 % Nursery Funds

Agency Reference #: **NDF22-008**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 46 days**4. Type of contract: **Contract**Contract description: **HVAC/PLUMBING**

5. Purpose of contract:

This is a new contract to provide ongoing heating and air conditioning system, water treatment and plumbing repair services at the Division's Western Region facility, Washoe Nursery, Sierra Front Interagency Dispatch Center and Air Operations facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,999.96**

Payment for services will be made at the rate of \$24,999.99 per year

Other basis for payment: Western Region Facility & Nursery \$5,100.00; Sierra Front Dispatch Center \$9,200.00; NDF Hangar \$2,240.00; Emergency/non-scheduled allowance \$8,459.99.

II. JUSTIFICATION

7. What conditions require that this work be done?

The division's facilities have complex heating and cooling systems which are required to be operational 24 hours/day, 7 days per week. Regular maintenance and/or repair of the systems is necessary to ensure optimal function of the systems and facilities. Additionally, the plumbing systems at the facilities require periodic services and/or repairs to maintain the efficiency and ensure the safety of the staff and the public.

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 knowledge or expertise 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):

Wiley's Plumbing & Heating
RHP Mechanical Systems, Inc.
Easy Rooter Plumbing

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor was selected by an evaluation committee in accordance with NRS and NAC 333.

d. Last bid date: 04/04/2022 Anticipated re-bid date: 04/02/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Contract has performed services for NDF since 2008 - 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	dsorensen	05/06/2022 15:14:44 PM
Division Approval	dsorensen	05/09/2022 08:16:28 AM
Department Approval	dsorensen	05/09/2022 08:16:30 AM
Contract Manager Approval	rmorse	05/09/2022 08:23:27 AM
Budget Analyst Approval	rjacob3	05/16/2022 08:46:16 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: **26208**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4195-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Snyder Services, Inc.**Contractor Name: **Snyder Services, Inc.**Address: **Snyder Mechanical
PO Box 2775**City/State/Zip: **Elko, NV 89803-2775**Contact/Phone: **Jared Bylund 775/738-5616**Vendor No.: **T80925991**NV Business ID: **NV20011319542**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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 #: **NDF22-010**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years and 46 days**4. Type of contract: **Contract**Contract description: **HVAC/Plumbing**

5. Purpose of contract:

This is a new contract to provide ongoing repair and maintenance of heating, ventilation, air conditioning and plumbing systems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,999.96**

Payment for services will be made at the rate of \$24,999.99 per year

Other basis for payment: Regular Rate: \$95 per hour; Overtime Rate: \$120 per hour; Holiday Rate: \$160 per hour; 15% Material markup.

II. JUSTIFICATION

7. What conditions require that this work be done?

The division's facilities have complex heating and cooling systems which are required to be operational 24 hours/day, 7 days per week. Regular maintenance and/or repair of the systems is necessary to ensure optimal function of the systems and facilities. Additionally, the plumbing systems at the facilities require periodic services and/or repairs to maintain the efficiency and ensure the safety of the staff and the public.

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 knowledge or expertise 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):

Charles Chester Plumbing
Ruby Mountain
Frontier
Anderson HVAC
Mountain West AC
Snyder Mechanical

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor was selected by an evaluation committee in accordance with NRS and NAC 333.

d. Last bid date: 04/04/2022 Anticipated re-bid date: 04/06/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Vendor has provided services for NDF since 2017 - 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	dsorensen	05/06/2022 15:15:35 PM
Division Approval	dsorensen	05/09/2022 08:16:12 AM
Department Approval	dsorensen	05/09/2022 08:16:14 AM
Contract Manager Approval	rmorse	05/09/2022 08:23:35 AM
Budget Analyst Approval	rjacob3	05/16/2022 08:58:34 AM

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: **22312** Amendment Number: **2**

Legal Entity Name: **BOARD OF REGENTS, NEVADA
SYSTEM OF HIGHER EDUCATION
OBO - UNR**

Agency Name: **DCNR - ENVIRONMENTAL
PROTECTION** Contractor Name: **BOARD OF REGENTS, NEVADA
SYSTEM OF HIGHER EDUCATION
OBO - UNR**

Agency Code: **709** Address: **CONTROLLERS**

Appropriation Unit: **3185-04** **MAIL STOP 124**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89557**

If "No" please explain: Not Applicable Contact/Phone: Christopher Lynch 775/682-6052

Vendor No.: D35000849

NV Business ID: NV20161295653

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 % Air Penalty
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: DEP20-021

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/12/2019**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **3 years and 50 days**4. Type of contract: **Interlocal Agreement**Contract description: **Wood Stove Exchange**

5. Purpose of contract:

This is a second amendment to the original interlocal agreement to manage the operation of the Wood Stove Change-Out Program to replace old wood burning stoves with federally compliant and certified biofuel stoves. This amendment extends the termination date from June 30, 2022 to December 31, 2022 and increases the maximum amount from \$108,715 to \$133,715 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:	\$70,000.00	\$70,000.00	\$70,000.00	Yes - Action
a. Amendment 1:	\$38,715.00	\$38,715.00	\$38,715.00	Yes - Info
2. Amount of current amendment (#2):	\$25,000.00	\$25,000.00	\$63,715.00	Yes - Info
3. New maximum contract amount:	\$133,715.00			
and/or the termination date of the original contract has changed to:	12/31/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

The US Environmental Protection Agency (EPA) has proposed stricter National Ambient Air Quality Standards (NAAQS) for PM2.5, prompting the need for reduced emissions from woodstoves in the Carson City Area.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Our agency does not have the manpower required to handle the additional workload. The UNR BEP has already established the framework for this project, as they managed the Washoe County woodstove changeout program and previous NDEP woodstove changeout programs. They will simply transfer the program structure, materials and website to the BAPC/BAQP program

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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 University of Nevada, Reno provides services to multiple State agencies and provides 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	ahanso1	04/18/2022 15:12:43 PM
Division Approval	ddragon1	04/28/2022 10:25:23 AM

Department Approval	ddragon1	04/28/2022 10:25:27 AM
Contract Manager Approval	mgowe1	05/04/2022 13:32:35 PM
Budget Analyst Approval	rjacob3	05/16/2022 10:17:40 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: **26040**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3185-19**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-DRI**Contractor Name: **BOARD OF REGENTS-DRI**Address: **DRI CONTROLLERS OFFICE
2215 RAGGIO PKWY**City/State/Zip: **RENO, NV 89512-1095**Contact/Phone: **Margie Stuart 775/673-7028**Vendor No.: **D35000802**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **DEP 22-045**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2025**Contract term: **2 years and 320 days**4. Type of contract: **Interlocal Agreement**Contract description: **Laboratory Services**

5. Purpose of contract:

This is a new contract to provide laboratory and analytical services to identify and evaluate the chemical characterization of Particulate matter (PM2.5) related to observations of elevated ozone concentrations in rural portions of Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,500.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

There are areas throughout the state that are approaching EPA's regulated air quality standards. By sampling we are able to determine mitigation efforts before federal regulations are mandated to the State of Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have the personnel or resource to effectively sample the filters

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 332.195 which allows the State of Nevada to join or use contracts of local governments located within or outside the State with the authorization of the contracting vendor.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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:

NDEP had a contract with DRI that expired on March 31, 2022, All work completed under this contract 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	abarchu1	04/21/2022 14:30:24 PM
Division Approval	ddragon1	04/28/2022 10:24:14 AM
Department Approval	ddragon1	04/28/2022 10:24:23 AM
Contract Manager Approval	mgowe1	05/04/2022 13:30:46 PM
Budget Analyst Approval	rjacob3	05/16/2022 09:12:20 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: **26230**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3187-55**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Clean Harbors Environmental Services

Contractor Name: **Clean Harbors Environmental Services**Address: **191 Coney Island Drive**City/State/Zip: **Sparks, NV 89431**

Contact/Phone: Ken Hadjes 775-221-6747

Vendor No.: T27000924

NV Business ID: NV20021375471

To what State Fiscal Year(s) will the contract be charged? **2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **45 days**4. Type of contract: **Contract**Contract description: **eHg Collection COH**

5. Purpose of contract:

This is a new contract to provide the collection of household generated, elemental Mercury (eHg) hazardous waste from municipalities statewide. This project is funded through a USEAP Multipurpose Grant received by the NDEP in 2019. This service provider contract will ensure that these materials are collected, packaged, transported and disposed of within Federal and State regulations and guidelines.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,688.32**

Other basis for payment: Not to exceed \$14,688.32 in accordance with submitted pricing.

II. JUSTIFICATION

7. What conditions require that this work be done?

The NDEP was granted funds by USEAP to conduct a Multipurpose grant. The BSMM's portion is to collect elemental Mercury from municipalities throughout the state. This is a follow-on event that was not included in the original contract, however there is suitable budget to complete this final activity. Clean Harbors Environmental Services was selected as the service provider for the initial contract and based on their subsequent submittal in accordance with State Purchasing requirements, has been selected to continue providing the Mercury Management support.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The NDEP-BSMM is not equipped to facilitate the transportation and disposal of household hazardous wastes. In order to meet the Grant Workplan deliverables, these services must be contract out to a licensed provider.

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):

US Ecology Nevada
Hazardous Disposal Specialists, INC.
World Oil Corp
Stericycle
Waste Management
Clean Harbors
Commercial Hazardous Waste Disposal

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Clean Harbors facilitated the transportation and disposal for the first 7 collection events. They are the best suited to complete the 8th and final event.

d. Last bid date: 03/24/2022 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

RUFFNER, MICHAEL, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mhanke	05/10/2022 11:46:29 AM
Division Approval	dwinkelm	05/10/2022 13:32:23 PM
Department Approval	dwinkelm	05/10/2022 13:32:27 PM

Contract Manager Approval
Budget Analyst Approval

dmetcalf
rjacob3

05/10/2022 13:46:19 PM
05/16/2022 08:01:17 AM

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: **21689** Amendment Number: **2**

Agency Name: **B&I - INDUSTRIAL RELATIONS DIV** Legal Entity Name: **The Law Offices of Charles R. Zeh, Esq., LLC**

Agency Code: **742** Contractor Name: **The Law Offices of Charles R. Zeh, Esq., LLC**

Appropriation Unit: **4682-04** Address: **CHARLES R ZEH ESQ
50 W Liberty St., Suite 950**

Is budget authority available?: **No** City/State/Zip: **Reno, NV 89501-1979**

If "No" please explain: Awaiting approval of pending work program #C58662 Contact/Phone: **Karen Kennedy, Legal Assistant to Charles R Zeh, Esq. 775-323-5700**

Vendor No.: **T29021118**

NV Business ID: **NV19951011050**

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 % Workers' Compensation & Safety Fund

Agency Reference #: **4682-04**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/12/2019**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **2 years and 322 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is the second amendment to the original contract, which provides ongoing legal services to the Occupational Safety and Health Review Board. This amendment extends the termination date from July 01, 2022, to September 30, 2022, and increases the maximum contract authority amount from \$514,210 to \$562,210.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$450,000.00	\$450,000.00	\$450,000.00	Yes - Action
a. Amendment 1:	\$64,210.00	\$64,210.00	\$64,210.00	Yes - Action
2. Amount of current amendment (#2):	\$48,000.00	\$48,000.00	\$48,000.00	Yes - Info
3. New maximum contract amount:	\$562,210.00			
and/or the termination date of the original contract has changed to:	09/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 618.585(2) "The Occupational Safety and Health (OSH) Review Board may employ legal counsel to advise it concerning matters which come before it."

Independent counsel is required in order to avoid potential conflict of interest.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The OSH Review Board is required to hold hearings on written appeals or notices of contest under NRS 618.585 and NRS 618.605. There is a conflict of interest since Division Counsel represents Occupational Safety and Health Administration (OSHA) in each contested matter. Therefore, outside counsel must be used.

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?

Superior qualification and experience in these areas

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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	ecerv1	04/07/2022 08:14:28 AM
Division Approval	ecerv1	04/07/2022 08:14:36 AM
Department Approval	jhanse4	05/10/2022 14:20:48 PM
Contract Manager Approval	jwhi11	05/10/2022 14:48:18 PM
Budget Analyst Approval	mlynn	05/23/2022 16:45:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25579**

Agency Name: DETR - REHABILITATION DIVISION	Legal Entity Name: Board of Regents, Nevada System of Higher Education OBO
Agency Code: 901	Contractor Name: Board of Regents, Nevada System of Higher Education OBO
Appropriation Unit: 3265-09	Address: Western Nevada College
Is budget authority available?: Yes	2201 W. College Parkway
If "No" please explain: Not Applicable	Carson City, NV 89703-7316
	Contact/Phone: Susan Trist 775-445-4459
	Vendor No.: D35000822
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**

Anticipated BOE meeting date 04/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 45 days**4. Type of contract: **Interlocal Agreement**Contract description: **2022 WNC CREST**

5. Purpose of contract:

This is a new interlocal agreement that continues to provide Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16-22, by providing the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$16,934.40**

Other basis for payment: Personnel: Instructor: \$3,000, Coach: \$2,000; Tuition: 20 students @ \$133.25/student: \$2,665; Speaker: \$3,000; Books: 20 students @ \$130.75/student: \$2,615; Supplies: 20 students @ \$70/student: \$1,400; In-State Travel (Bus): \$1,000; Indirect: \$1,254.40. Invoices are payable only upon approval by authorized REHAB personnel. Contract not to exceed: \$16,934.40.:

II. JUSTIFICATION

7. What conditions require that this work be done?

WIOA requires that a minimum of 15% of all grant funding be spent on PRE-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained or have the skills to undertake the Pre-ETS training.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Governmental Entity

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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 vendor has provided satisfactory services to REHAB since October 2016.

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	athomps8	04/12/2022 11:33:23 AM
Division Approval	jmarhevk	04/12/2022 13:32:30 PM
Department Approval	jmarhevk	04/12/2022 13:32:41 PM
Contract Manager Approval	llarki1	04/25/2022 12:52:55 PM
Budget Analyst Approval	vfajota	05/16/2022 13:02:49 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: **25876**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **1004-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Richard Laine (DFI Consulting)

Contractor Name: **Richard Laine (DFI Consulting)**Address: **3812 Military Road, N.W.**City/State/Zip: **Washington, DC 20015**

Contact/Phone: Richard Laine 201-563-7194

Vendor No.: T27044388

NV Business ID: NV20212190125

To what State Fiscal Year(s) will the contract be charged? **2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 3635-22-GOWIN

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **Yes**

If "Yes", please explain

In order to accommodate and support the ongoing efforts to develop and implement the Governor's vision of the Nevada job force, there is a continued need for services effective February 1, 2022 and ending June 30, 2022.3. Termination Date: **06/30/2022**Contract term: **148 days**4. Type of contract: **Contract**Contract description: **Consultant**

5. Purpose of contract:

This is a new contract to provide ongoing consulting services and assistance with the development and implementation of the plan to support state's adoption and operationalization of the Governor's vision for the Nevada job force.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00**

Payment for services will be made at the rate of \$24,000.00 per contract

II. JUSTIFICATION

7. What conditions require that this work be done?

This will assist OWINN and State Leadership Team to implement the Nevada job force plans to rapidly connect unemployed jobseekers to services, work and training, as well as transforming employment and workforce outcomes.

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 training required to perform 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: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Profession Service Waiver #220401 approved by State Purchasing.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

CETS #24629 for GOWINN, contract dates 10/08/2021-12/31/2021, quality of service was beyond 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:

Gaby Villafuerte, GOWINN Grants & Contracts Manager Ph: (702) 486-8080

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jmarhevk	05/02/2022 10:36:22 AM
Division Approval	jmarhevk	05/02/2022 10:36:24 AM
Department Approval	jmarhevk	05/02/2022 10:36:28 AM
Contract Manager Approval	llarki1	05/02/2022 10:36:46 AM
Budget Analyst Approval	vfajota	05/16/2022 12:52:03 PM



MEMORANDUM

DATE: March 23, 2022

TO: Clerk of the Board
Board of Examiners (BOE)

FROM: Isla Young, Executive Director, Governor's Office of Workforce
Innovation (GOWINN)

SUBJECT: RETROACTIVE CONTRACT REQUEST
Richard Laine/DFI Consulting

The Governor's Office of Workforce Innovation (GOWINN) respectfully requests approval of the Richard Laine/DFI Consulting contract to have a retroactive start date of February 1, 2022.

Through a previous contract Richard Laine/DFI Consulting examined and articulated the gap between existing state practices and resources, and desired future goals by developing the comprehensive *A Prosperous Nevada* report. The report includes recommendations to strengthen current efforts in the state, where appropriate, and look to research and best practices from other states to fill gaps to build a more robust and resilient education to workforce system with the necessary wraparound services to put far more Nevadans on the path towards economic and personal success. The previous contract expired in December 2021, but Richard Laine/DFI Consulting has continued to work with, guide and assist the state with the development and implementation phases of the report's recommendations. It would be of great benefit to the state to have Richard Laine/DFI Consulting continue to provide assistance to the leadership team and others in Nevada to prioritize the work and develop implementation plans.

The Department of Employment, Training and Rehabilitation (DETR) and GOWINN support the requested retroactive start date to continue to provide consulting services to assist with the development and implementation of the

plan that supports Nevada's adoption and operationalization of the Governor's vision of the Nevada job force.

Thank you very much for consideration of this request.

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: **25272**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4770-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CARAHSOFT TECHNOLOGY**Contractor Name: **CARAHSOFT TECHNOLOGY**Address: **CORPORATION
11493 SUNSET HILLS RD STE 100
RESTON, VA 20190-5230**City/State/Zip: **RESTON, VA 20190-5230**

Contact/Phone: Daniel Sipes 703/871-8500

Vendor No.: PUR0004357

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Career Enhancement Program**

Agency Reference #: 99SWC-NV18-421 DETR 3594-26-ESD

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/18/2022**

Anticipated BOE meeting date 01/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2025**Contract term: **3 years and 14 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **New Talent Pools**

5. Purpose of contract:

This is a new service agreement under master service agreement #99SWC-NV18-421 which provides cloud services. This service agreement provides access to LinkedIn Recruiter and will help identify and target ideal candidates in hard-to-reach and diverse talent pools and build a data-driven workforce strategy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$84,240.00**

Payment for services will be made at the rate of \$28,080.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?

This vendor is business-to-business friendly as it offers its customer the ability to connect with the business' Hiring Manager, unlike the other vendors. This will allow job orders to be created and tap into unique and diverse talent pools otherwise inaccessible by DETR, and help build a data-driven workforce strategy.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have access to the platform to offer executive and professional networking and job connections.

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 #: 211101

Approval Date: 10/25/2021

c. Why was this contractor chosen in preference to other?

LinkedIn currently is the only platform to offer executive and professional networking and job connections.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? 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	knelso4	03/29/2022 15:29:36 PM
Division Approval	knelso4	03/29/2022 15:29:41 PM
Department Approval	jmarhevk	03/29/2022 16:22:36 PM
Contract Manager Approval	llarki1	03/30/2022 09:56:30 AM
EITS Approval	daxtel1	04/04/2022 11:17:37 AM
Budget Analyst Approval	vfajota	05/18/2022 13:22:18 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#:	211101 (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 <u>only</u> the contact(s) listed below:		
	ENTER STATE AGENCY NAME: <i>Department of Employment, Training and Rehabilitation</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Lynda Parven, ESD Administrator</i>	<i>702-486-6640</i>	<i>l-parven@detr.nv.gov</i>
	<i>Karlene Johnson, ESD Deputy Administrator</i>	<i>775-684-3972</i>	<i>kfjohnson@detr.nv.gov</i>

1b	Vendor Information:	
	Vendor Name:	<i>LinkedIn Government at Carahsoft</i>
	Contact Name:	<i>Cecily Hastings/Daniel Sipes</i>
	Complete Address: City, State, and Zip Code	<i>62228 Collection Center Dr Chicago IL 60693-0622</i>
	Telephone Number:	<i>312-650-7626</i>
	Email Address:	<i>chastings@linkendin.com/Daniel.Sipes@carahsoft.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? Check One:	Yes:	<i>X</i>	No:
	Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	<i>01/01/2022</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	<i>X – Career Enhancement Program (CEP)</i>
	Grant Funds:	
Other (Explain):		

Rec'd 3:30PM 10/25/21

Purchasing Use Only:

Approval #:

211/01 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$ 112,320.00

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>Carahsoft Technology Corporation is LinkedIn's sole government distributor for LinkedIn Talent Solutions' product line. LinkedIn is an extensive professional network on the internet. LinkedIn will allow access to new talent pools for executive and professional career paths. The additional access will provide job orders to a larger field of clients. LinkedIn.com will help identify and target ideal candidates in hard-to-reach and diverse talent pools and help build a data-driven workforce strategy.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<p><i>This vendor is business-to-business friendly as it offers its customer the ability to connect with the business' Hiring Manager, unlike the other vendors in this space (e.g., Zip Recruiter, Monster.com, Indeed.com). The latter only provides a Talent Acquisition platform.</i></p> <p><i>LinkedIn is the only vendor that can:</i></p> <ul style="list-style-type: none"> <i>• Help organizations source, hire, and develop talent through a combination of real-time data, Artificial Intelligence (AI) technology, and machine-learning.</i> <i>• Directly reach an audience of 630M+ individuals globally and 160M+ individuals in the United States.</i> <i>• Tap into unique and diverse talent-pools otherwise inaccessible at scale.</i> <i>• Extend an organization's reach to both the active candidate pool and the passive pool of potential candidates who are not actively seeking new employment opportunities.</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>LinkedIn currently is the only platform to offer executive and professional networking and job connections. As a result, LinkedIn is the most cost-effective and efficient use of state time and resources in connecting executive job seekers directly with recruiting businesses.</i>

	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.		
	<i>DETR did inquire about other vendors such as Zip Recruiter, Monster.com, and Indeed.com. Unlike LinkedIn, these vendors do not reach out to businesses that are recruiting. Zip Recruiter, Monster.com, and Indeed.com only offer talent acquisition.</i>		
	b. <u>If not</u> , why were alternatives not evaluated?		

Purchasing Use Only:

Approval #:

2/11/01 @

	Has the agency purchased this service or commodity in the past? Check One:				Yes	No
	NOTE: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>					X
6	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, the following information <u>must</u> be provided:					
	Term		Value	Short Description	Type of Procurement ENTER RFP#, RFQ#, Waiver #	
	Start Date	End Date				
			\$			
			\$			
			\$			
			\$			

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	The state would lose a good source of 'business leads' that the Business Services Representatives would use to contact potential employers and solicit job orders for the State's Job Bank. In addition, we would use the platform to augment EmployNV as a recruiting tool to look for qualified applicants.

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?
	DETR emailed other companies regarding our search to find similar services to what LinkedIn provides. However, unlike LinkedIn, which allows you to reach out to other recruiting businesses, Zip Recruiter, Monster.com, Indeed.com, and the like are all geared toward Talent Acquisition.

9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.	X	X
	a. If yes, please provide details regarding future obligations or needs. If solicitation/contract is successful, we would like to continue with this endeavor.		

Purchasing Use Only:

Approval #:

2111010

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

Karlene Johnson, ESD Deputy Administrator, DETR
Print Name of Agency Representative Initiating Request

10/25/2001
Date


Signature of Agency Head Authorizing Request

Lynda Parven, ESD Administrator, DETR
Print Name of Agency Head Authorizing Request

10/25/2001
Date

FOR PURCHASING USE ONLY – 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

11/2/21
Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Elisa Cafferata, Director, DETR
Laxmi Bokka, IT Chief Manager, DETR
Karlene Johnson, ESD Deputy Administrator, DETR
Joshua Marhevka, Chief Financial Officer, DETR

CC: Alan Cunningham, State CIO, EITS, DOA
Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Michael Smith, Enterprise Architect, EITS, DOA

SUBJECT: TIN Completion Memo - DETR - 311- LinkedIn Government at Carahsoft - 4770

DATE: November 15, 2021

We have completed the review for DETR's LinkedIn Government at Carahsoft - TIN 311.

The submitted TIN is for an estimated value of \$56,160.00 in the current biennium and \$56,160.00 next biennium (100% Career Enhancement Program [CEP]) to enhance and or upgrade an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

Carahsoft Technology Corporation is LinkedIn's sole government distributor for LinkedIn Talent Solutions' product line. LinkedIn is an extensive professional network on the internet LinkedIn will allow access to new talent pools for executive and professional career paths.

The additional access will provide job orders to a larger field of clients. LinkedIn.com will help identify and target Ideal candidates in hard-to-reach and diverse talent pools and help build a data-driven workforce strategy.

This vendor is business-to-business friendly as it offers its customer (the ability to connect with the business' Hiring Manager, unlike the other vendors in this space (e.g; Zip Recruiter, Monster.com, Indeed.com). The latter only provides a Talent Acquisition platform.

LinkedIn is the only vendor that can:

- Help organizations source, hire, and develop talent through a combination of real-time data, artificial Intelligence (AI) technology, and machine-learning.
- Directly reach an audience of 630M+ individuals globally and 160M+ individuals in the United States.
- Tap into unique and diverse talent-pools otherwise inaccessible at scale.
- Extend an organization's reach to both the active candidate pool and the passive pool of potential candidates who are not actively seeking new employment opportunities.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has also been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21208**Amendment Number: **5**Agency Name: **DETR - EMPLOYMENT SECURITY**Legal Entity Name: **NEVADAWORKS**Agency Code: **902**Contractor Name: **NEVADAWORKS**Appropriation Unit: **4770-00**Address: **639 ISBELL RD STE 420**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89509-4967**

If "No" please explain: Not Applicable

Contact/Phone: **Milton Stewart, CEO 775/284-1333**Vendor No.: **T27003177**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

Agency Reference #: **3276-20-ESD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/17/2018**Anticipated BOE meeting date **06/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2022**Contract term: **4 years and 195 days**4. Type of contract: **Revenue Contract**Contract description: **NVWks Revenue**

5. Purpose of contract:

This is the fifth amendment to the original revenue contract which provides reimbursement for the FutureWork Systems LLC application. This amendment extends the termination date from June 30, 2022 to June 30, 2023 and increases the maximum amount from \$84,000 to \$114,000 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:	\$24,000.00	\$24,000.00	\$24,000.00	Yes - Info
a. Amendment 1:	\$0.00	\$0.00	\$24,000.00	No
b. Amendment 2:	\$24,000.00	\$24,000.00	\$48,000.00	Yes - Info
c. Amendment 3:	\$12,000.00	\$12,000.00	\$60,000.00	Yes - Action
d. Amendment 4:	\$24,000.00	\$24,000.00	\$24,000.00	Yes - Info
2. Amount of current amendment (#5):	\$30,000.00	\$30,000.00	\$54,000.00	Yes - Info
3. New maximum contract amount:	\$114,000.00			
and/or the termination date of the original contract has changed to:	06/30/2023			

II. JUSTIFICATION

7. What conditions require that this work be done?

Local board will use FutureWorks Systems application to project, review and correct data for required WIOA/PIRL/ Federal reporting performance outcomes.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Resources of manpower and expertise are not available to provide 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: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

NevadaWorks is currently under contract with DETR for WIOA services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knelso4	05/19/2022 07:12:37 AM
Division Approval	knelso4	05/19/2022 07:12:44 AM
Department Approval	knelso4	05/19/2022 07:12:50 AM
Contract Manager Approval	llarki1	05/19/2022 07:49:48 AM



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: Elisa Cafferata, Director, DETR
Joshua Marhevka, Chief Financial Officer, DETR
Laxmi Bokka, IT Chief Manager, DETR
Janiese Clyne, ESD Program Chief, DETR

CC: Tim Galluzi, Administrator, EITS, DOA
Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA
David Axtell, State Chief Enterprise Architect, EITS, DOA

FROM: Lisa Jean, TIN Administrator, EITS, DOA

SUBJECT: TIN Completion Memo – DETR – TIN 421 – *WIOA Reporting Software* – BA 4770

DATE: April 12, 2022

We have completed our review for the Department of Employment, Training and Rehabilitation's (DETR) – *WIOA Reporting Software* – TIN 421.

The submitted TIN, for an estimated value of \$54,000 in the FY22/FY23 biennium (100% Federal Grant), is for continued use of the FutureWork Systems' Performance Matters/FutureWorks BI application.

Continued use of this cloud-based solution will ensure that Nevadaworks can continue to pull, review, and correct records prior to each quarterly and annual reporting cycle, as it is the only COTS product available that does not require software modification to meet reporting requirements and has been in use by Nevadaworks since November 1, 2018.

The agency considers the investment and final implementation to have an ongoing low security risk.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify EITS as soon as possible to avoid integration delays.

It is expected that this solution will continue to follow state security standards and policies.

A copy of this memo has 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 CONTRACT

1. Contract Number: **23030** Amendment Number: **1**

Agency Name: **DETR - EMPLOYMENT SECURITY** Legal Entity Name: **GREENSCAPES OF NEVADA LLC**

Agency Code: **902** Contractor Name: **GREENSCAPES OF NEVADA LLC**

Appropriation Unit: **4771-07** Address: **5965 CHIEFTAIN ST**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89149-2363**

If "No" please explain: Not Applicable Contact/Phone: **Bryan Vellinga 702-533-2428**

Vendor No.: **T27033446**

NV Business ID: **NV20131448439**

To what State Fiscal Year(s) will the contract be charged? **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 % Cost Allocation

Agency Reference #: **3383-22-DETR**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/21/2020**

Anticipated BOE meeting date **06/2022**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **04/30/2022**

Contract term: **4 years and 10 days**

4. Type of contract: **Contract**

Contract description: **Landscaping Services**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing landscaping services for the facility located at 2800 E. St Louis Avenue, Las Vegas, NV. This amendment extends the contract termination date from 04/30/22 to 04/30/24 and increases the amount of the contract from \$30,000 to \$60,000 due to a continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$30,000.00	\$30,000.00	\$30,000.00	Yes - Info
2. Amount of current amendment (#1):	\$30,000.00	\$30,000.00	\$60,000.00	Yes - Info
3. New maximum contract amount:	\$60,000.00			
and/or the termination date of the original contract has changed to:	04/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

Landscaping maintenance is required to keep the property aesthetically pleasing, free of trash and to keep the irrigation system operational.

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 perform these tasks.

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?

Only Vendor to respond

d. Last bid date: 02/20/2020 Anticipated re-bid date: 03/01/2022

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Vendor has been performing satisfactory services for DETR since 2018

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jmarhevk	04/19/2022 15:26:40 PM
Division Approval	jmarhevk	04/19/2022 15:26:45 PM
Department Approval	jmarhevk	04/19/2022 15:26:50 PM

Contract Manager Approval
Budget Analyst Approval

llarki1
vfajota

04/22/2022 10:40:32 AM
04/27/2022 11:00:03 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: **26015**

Agency Name: **DETR - EMPLOYMENT SECURITY**
 Agency Code: **902**
 Appropriation Unit: **All Budget Accounts - Category 04**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **BRIGGS ELECTRIC INC**
 Contractor Name: **BRIGGS ELECTRIC INC**
 Address: **5111 CONVAIR DR**
 City/State/Zip: **CARSON CITY, NV 89706-0426**
 Contact/Phone: **Greg Dye 775/887-9901**
 Vendor No.: **T81091747A**
 NV Business ID: **NV19961075756**

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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	1.90 %	Fees	0.00 %	
X	Federal Funds	69.00 %	Bonds	0.00 %	
	Highway Funds	0.00 %	X Other funding	29.10 %	BEN, ESD SPECIAL FUND AND CAREER ENHANCEMENT PROGRAM

Agency Reference #: 3602-26-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/05/2022**

Anticipated BOE meeting date 05/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/01/2026**Contract term: **3 years and 362 days**4. Type of contract: **Contract**Contract description: **Electrician**

5. Purpose of contract:

This is a new contract to provide electrical services for agencies in northern Nevada on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,500.00**

Other basis for payment: Based on the Scope of Work provided by the Vendor

II. JUSTIFICATION

7. What conditions require that this work be done?

Regular and emergency electrical services and repairs are often required.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the time or expertise to perform these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

One in a pool of vendors being awarded contracts.

d. Last bid date: 12/08/2021 Anticipated re-bid date: 12/08/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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 was a previous contract CETS# 18717

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

Brandon Taylor, Facilities Manager Ph: 775-684-3901

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rhernan3	04/12/2022 10:38:23 AM
Division Approval	jmarhevk	04/12/2022 13:30:38 PM
Department Approval	jmarhevk	04/12/2022 13:30:42 PM
Contract Manager Approval	jwixon	05/04/2022 16:38:58 PM
Budget Analyst Approval	dlenzner	05/05/2022 07:47:44 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: **26211**Agency Name: **DETR - ADMINISTRATIVE SERVICES**Agency Code: **908**Appropriation Unit: **3274-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER INC**Contractor Name: **GARTNER INC**Address: **56 TOP GALLANT RD**City/State/Zip: **STAMFORD, CT 06902**Contact/Phone: **480-283-8933**Vendor No.: **PUR0005339**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2022-2023**

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 % Cost Allocation**Agency Reference #: **3542-22-IDP**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/17/2022**Anticipated BOE meeting date **05/2022**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **1 year and 44 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **MSA Work Plan**

5. Purpose of contract:

This is a new Work Plan under Master Blanket Purchase Order 99SWC-NV21-8568 to provide research and advisory services related to information technology. This Work Plan provides access to the Gartner for IT Leaders Individual Access Advisor software.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$34,228.00**

Other basis for payment: Annual Payment \$34,228.00

II. JUSTIFICATION

7. What conditions require that this work be done?

DETR IDP is in need of continued independent review of the operations and department structure to develop long-term strategic planning.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

DETR IDP does not have the expertise to perform this type of analysis and it needs to be independent.

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. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? 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:

Gartner has provided satisfactory services to the Enterprise Information Technology Services division since 2010.

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	jmarhevk	05/04/2022 09:33:17 AM
Division Approval	jmarhevk	05/04/2022 09:33:20 AM
Department Approval	jmarhevk	05/04/2022 09:33:22 AM
Contract Manager Approval	jwixon	05/05/2022 07:38:46 AM
Budget Analyst Approval	vfajota	05/17/2022 16:27:54 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: **26167**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Ling, Ltd.
Agency Code:	BDC	Contractor Name:	Ling, Ltd.
Appropriation Unit:	B005 - All Categories	Address:	933 Gear Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89503
If "No" please explain:	Not Applicable	Contact/Phone:	Louis Ling 775-233-9099
		Vendor No.:	
		NV Business ID:	NV20222410275
To what State Fiscal Year(s) will the contract be charged?	2022-2025		

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 % 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 **06/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2025**Contract term: **3 years**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This a new contract to provide ongoing legal services including representation in law suites, disciplinary actions, administrative hearings, legislative assistance and in providing legal advice.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$64,800.00**

Payment for services will be made at the rate of \$1,800.00 per Month

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 the 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 to be 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: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

The Independent Contractor has provided legal services for the Board for several years and possesses the necessary expertise resulting in the continuity of knowledge, which provides efficiencies for the Board.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	jstrand1	04/27/2022 07:26:22 AM
Division Approval	jstrand1	04/27/2022 07:26:25 AM
Department Approval	jstrand1	04/27/2022 07:26:27 AM
Contract Manager Approval	jstrand1	04/27/2022 07:26:29 AM
Budget Analyst Approval	hfield	05/20/2022 15:27:42 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: **26145**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B031 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Numbers, Inc.

Contractor Name: **Numbers, Inc.**Address: **1285 Baring Blvd #309**City/State/Zip: **Sparks, NV 89434**

Contact/Phone: Carol Woods 775-742-2962

Vendor No.:

NV Business ID: NV20031345377

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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 % 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 **07/01/2022**

Anticipated BOE meeting date 06/2022

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Bookkeeping Svs**

5. Purpose of contract:

This is a new contract to provide bookkeeping and payroll services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,000.00**

Payment for services will be made at the rate of \$750.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required to maintain their own financial reporting and payroll systems. The board is funded entirely from licensing fees and is not part of the state financial or payroll systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board has limited staff with the expertise necessary to perform these functions.

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):

Bottom Line Bookkeeping
Haynie CPA
Forbush Accountingb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor has satisfactorily provided services to the Board in previous years and there is a continuing need for these services; no other proposals were received.

d. Last bid date: 02/01/2022 Anticipated re-bid date: 02/01/2026

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? 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	lp310000	04/25/2022 11:43:26 AM
Division Approval	lp310000	04/25/2022 11:43:30 AM
Department Approval	lp310000	04/25/2022 11:43:34 AM
Contract Manager Approval	lp310000	04/25/2022 11:43:39 AM
Budget Analyst Approval	hfield	05/20/2022 15:38:18 PM

Steve Sisolak
Governor




Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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 11, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Richard Jacobs, Executive Branch Budget Officer 
Budget Division
Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners' meeting.

**DEPARTMENT OF CONSERVATION & NATURAL RESOURCES –
DIVISION OF STATE LANDS**

Agenda Item Write-up:


Pursuant to NRS 321.5954, subsection 4, the State Land Registrar is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. This submittal reports program activities for the 3rd quarter of fiscal year 2022.

Additional Information:

There was one acquisition of land under the Nevada Land Bank Program during this quarter, a 10.6 acre parcel of undeveloped land within the Lake Tahoe Basin. This transaction cost \$1,065,110.50. Additionally, there were two acquisitions in real property totaling 5,224 square feet and cost a total of \$93,310.50 in proceeds.

Statutory Authority:

NRS 321.5954

REVIEWED: 
ACTION ITEM: _____



Nevada Division of
STATE LANDS

STATE OF NEVADA
Department of Conservation & Natural Resources

Steve Sisolak, *Governor*
Bradley Crowell, *Director*
Charles Donohue, *Administrator*

MEMORANDUM

DATE: March 31, 2022

TO: Susan Brown, Director
Governor's Finance Office

FROM: Charles Donohue, Administrator and
State Land Registrar, Nevada Division of State Lands

RE: **BOARD OF EXAMINERS 3RD QUARTER FY 2022 REPORT FOR THE NEVADA
LAND BANK PROGRAM – MEETING DATE OF JUNE 14, 2022**

Pursuant to NRS 321.5954, a quarterly report regarding the real property or interests in real property transferred by the Nevada Land Bank Program shall be reported quarterly to the State Board of Examiners.

Nevada Land Bank Program:

The Nevada Land Bank is a program housed in the Nevada Division of State Lands (NDSL) and operated by the Nevada Tahoe Resource Team (NTRT) on behalf of the Tahoe Regional Planning Agency (TRPA) through a Memorandum of Understanding and under the authority of Chapter 355, Statutes of Nevada 1993. The Nevada Land Bank acquires sensitive parcels and also mitigates the environmentally detrimental effects of land coverage in the Lake Tahoe Basin. Land coverage, such as impervious surfaces like parking lots, roads and roofs, is one element of the bundle of development rights required in the Lake Tahoe Basin to move forward with development or redevelopment projects. Allowable coverage is calculated by the sensitivity of a parcel's land class: Class 1 through 3 are more environmentally sensitive lands; Class 4 through 7 are less sensitive lands. The Nevada Land Bank program works to transfer coverage from more to less environmentally sensitive land. These activities contribute to the protection of the environment at Lake Tahoe. Land Bank activities are funded through mitigation fees collected by TRPA and forwarded to NDSL to carry out the program.

This memorandum is to report real property or interests in real property transferred under this program for the quarter ending March 31, 2022 (January 1, 2022 – March 31, 2022).

There was one acquisition of land during this quarter:

On **January 26, 2022**, the Nevada Land Bank, acquired a 10.6-acre parcel of undeveloped land in the upper Kingsbury area of the Lake Tahoe Basin. Development rights of one Potential Residential Unit of Use (PRUU), and 8,247 square feet (SF) of Class 1a Restored Land Coverage have been Deed Restricted. The Land Coverage has been permanently retired from development and the PRUU has been transferred into the NV Land Bank. The property is part of a network of nearly 500 sensitive urban lots that NTRT maintains as conservation areas on the north and east shore of the Lake. These State-owned parcels are managed under NRS 321.5953 to preserve, restore, and enhance the Lake Tahoe Basin. This transaction cost \$1,065,110.50.

There were two acquisitions of interests in real property during this quarter:

On **March 15, 2022**, the Nevada Land Bank closed escrow on **two** transactions of privately owned Land Coverage held in the Douglas County Land Bank. 3,324 SF of Restored Class 2 and 1900 SF of Restored Class 1a from Hydrozone HRA4/S Stateline valued at \$17.50 per SF. All Land Coverage associated with these purchases have been Deed Restricted and permanently retired from development. These transactions cost \$60,445.50 and \$32,865.00, respectively.

All funds for the above acquisitions came from TRPA Excess Land Coverage Mitigation fees.

In the event you have any questions or would like additional information please contact Sherri Barker, Land Agent III at sbarker@lands.nv.gov or (775) 684-2735.

CD/sb

CC: Bradley Crowell, Director, Nevada Department of Conservation and Natural Resources

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 17, 2022

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Karen Hall - Management Analyst III
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

FISCAL YEAR 2022 – 3rd QUARTER OVERTIME REPORT

Agenda Item Write-up:

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 3rd Quarter Overtime Report and analysis for fiscal year 2022.

Additional Information:

As of the 3rd quarter of fiscal year 2022, year to date overtime pay and accrued compensatory leave accounted for a total of approximately \$ 60.75 million, or 7.44% of total pay, a 18.9% increase from fiscal year 2021.

The 5 agencies with the highest dollar amount of overtime and accrued comp time for the quarter accounted for 89.6% of the total:

1. Department of Corrections – \$7.82 million
2. Department of Health & Human Services – \$6.95 million
3. Department of Public Safety – \$1.94 million
4. Department of Transportation – \$1.23 million
5. Department of Employment, Training, & Rehab – \$798 thousand

The 5 agencies with the highest percentage of overtime and accrued comp time as a share of total pay for the 3rd quarter of FY22 were:

1. Department of Corrections – 20.64%
2. Department of Veterans Service – 17.48%
3. Department of Public Safety – 9.66%
4. Department of Health & Human Services – 8.91%
5. Adjutant General – 7.45%

At the Department of Corrections, overtime and comp time decreased by \$105,868 thousand or -1.3% from the prior quarter and continued to be driven by the large correctional centers and medical personnel. Overtime and comp time for the 3rd quarter of FY22 were highest at these 7 locations, which accounted for 85.8% of the total overtime for the department:

1. High Desert State Prison – \$1.72 million
2. Northern Nevada Correctional Center – \$1.37 million
3. Lovelock Correctional Center – \$1.07 million
4. Ely State Prison – \$1.01 million
5. Warm Springs Corectional Center – \$557 thousand
6. Southern Desert Correctional Center – \$536 thousand
7. Prison Medical Care – \$442 thousand

By event code, the highest four causes accounted for 87.7% of the overtime:

1. Annual/Military Leave Coverage – \$3.76 million
2. Related to COVID-19 – \$2.17 million
3. Hospital Coverage – \$557 million
4. Fire Time – \$377 thousand

At the Department of Health and Human Services, overtime was driven by the Division of Welfare and Supportive Services (\$3.61M - primarily in the Welfare Field Services budget account), Division of Public and Behavioral Health (\$1.50M - primarily in the Southern Nevada Adult Mental Health and Facilities for Mental Offenders budget accounts), Division of Child and Family Services (\$1.05M - primarily driven by the Southern Nevada Child & Adolescent Services, Nevada Youth Center, and Summit View Youth Center budget accounts), and Aging and Disability Services (\$692K - primarily in the Desert Regional Center budget account)

By event code, the highest four causes accounted for 83.3% of the overtime:

1. Backlog Reduction – \$3.34 million
2. Covering Vacant Shifts – \$969 thousand
3. Covering 24-Hour Shifts – \$823 thousand
4. Agency Define – \$658 thousand

REVIEWED: <u>TE</u>
INFO ITEM: _____

5 AGENCIES WITH THE HIGHEST DOLLAR AMOUNT OF OVERTIME/ACCRUED COMP

Fiscal Year 2022 Quarter 3

From Fiscal Year Summary

Cumulative Statewide Totals	FY	Qtr	Amounts / % Change	Amounts (Rounded) / % Change	Share of Pay
Overtime Pay + Accrued Comp	2022	3	\$ 60,752,257.00	\$ 60,750,000.00	7.44%
Overtime Pay + Accrued Comp	2021	3	\$ 51,084,727.00	\$ 51,080,000.00	
		<i>Difference</i>	\$ 9,667,530.00	\$ 9,670,000.00	
<i>Percent Change from Previous Year</i>			18.9%	18.9%	

From Quarterly Detailed Analysis

Column Reference	FY	Qtr	Amount
Current Qtr OT Pay & Accr Comp	2022	3	\$ 20,918,841.00

From Fiscal Year Summary

Table Reference:	FY	Qtr	Department	Amount
Highest OT/Comp Expend in \$	2022	3	NDOC	\$ 7,823,288.00
			DHHS	\$ 6,947,046.00
			DPS	\$ 1,937,774.00
			NDOT	\$ 1,229,937.00
			DETR	\$ 798,298.00
			<i>Total for 5 Agencies</i>	\$ 18,736,343.00
			<i>Total OT/Accrued Comp</i>	\$ 20,918,841.00
			%	89.6%

Reference: S:\GFO\BOE\OT Reporting\FY22Q3\5_Overtime Report Top Level - Q3FY22

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2022 SUMMARY (QTR 3)
NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, June 14, 2022

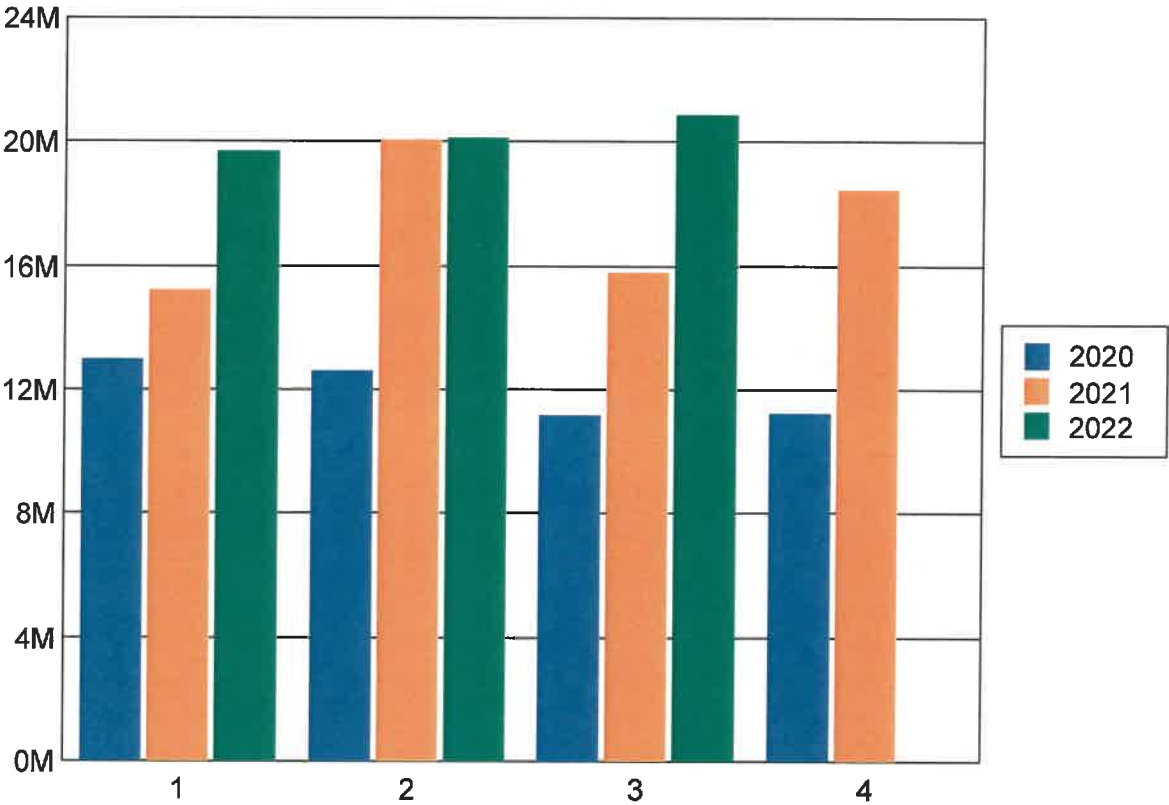


CUMULATIVE STATEWIDE TOTALS (QTR 3)			
	2020	2021	2022
BASE PAY	\$790,064,075	\$777,776,273	\$755,752,781
OVERTIME PAY + ACCRUED COMP	\$36,794,232	\$51,084,727	\$60,752,257
TOTAL PAY	\$826,858,307	\$828,861,000	\$816,505,038
OT/COMP AS A SHARE OF TOTAL PAY	4.45%	6.16%	7.44%

Highest OT/Comp expenditures in dollars			
Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$7,823,288	20.64%
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$6,947,046	8.91%
65	DEPARTMENT OF PUBLIC SAFETY	\$1,937,774	9.66%
80	DEPARTMENT OF TRANSPORTATION	\$1,229,937	4.84%
90	DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$798,298	6.25%

Highest percentages of OT/Comp as a share of Total Pay			
Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$7,823,288	20.64%
24	DEPARTMENT OF VETERANS SERVICE	\$530,142	17.48%
65	DEPARTMENT OF PUBLIC SAFETY	\$1,937,774	9.66%
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$6,947,046	8.91%
43	ADJUTANT GENERAL	\$165,563	7.45%

Statewide OT/Comp Distribution by Quarter



	Q1 Base Pay	Q2 Base Pay	Q3 Base Pay	Q4 Base Pay
2020	\$252,721,971	\$285,121,589	\$252,220,515	\$293,580,116
2021	\$246,204,114	\$282,993,198	\$248,578,961	\$291,465,216
2022	\$237,483,657	\$275,902,757	\$242,366,367	\$0

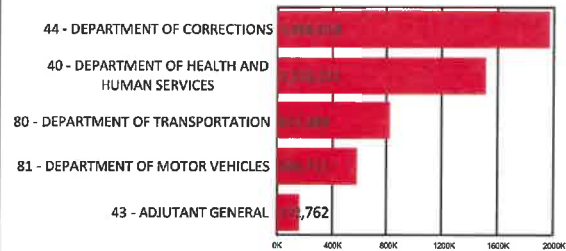
OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2022 QUARTERLY ANALYSIS vs FY2021
NEVADA DEPARTMENT OF ADMINISTRATION
Tuesday, June 14, 2022

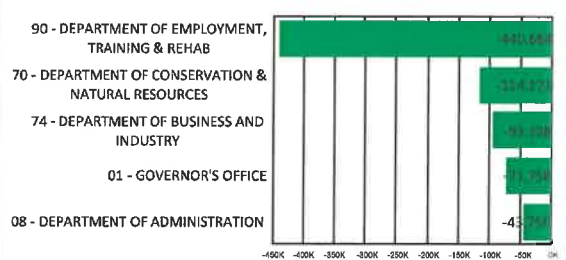


FY2022 - QTR1

Greatest increases in OT/Comp expenditures vs FY2021

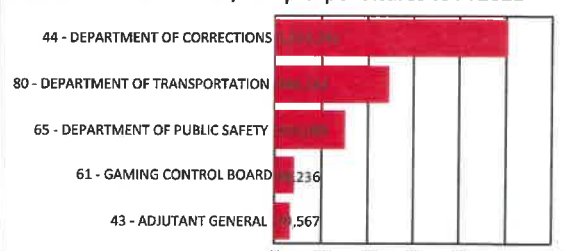


Greatest reductions in OT/Comp expenditure vs FY2021

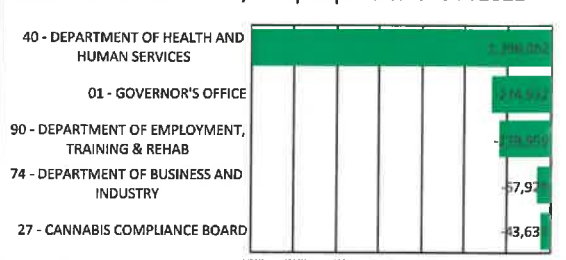


FY2022 - QTR2

Greatest increases in OT/Comp expenditures vs FY2021

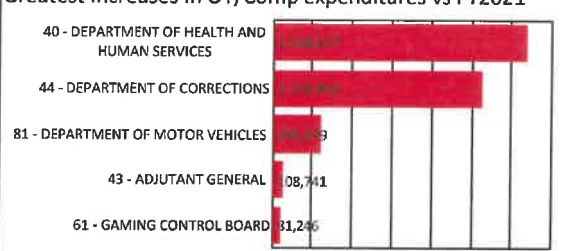


Greatest reductions in OT/Comp expenditure vs FY2021

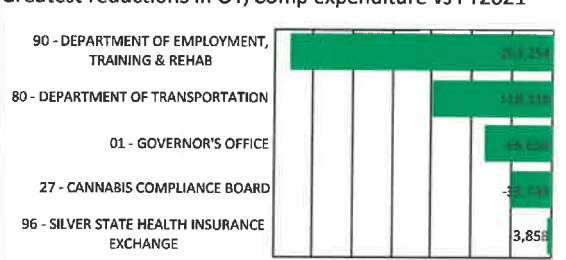


FY2022 - QTR3

Greatest increases in OT/Comp expenditures vs FY2021



Greatest reductions in OT/Comp expenditure vs FY2021



FY2022 - QTR4

Greatest increases in OT/Comp expenditures vs FY2021

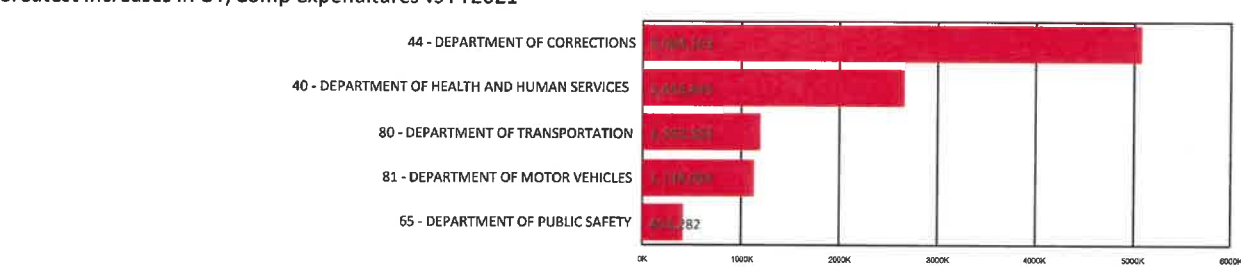
No Data Available

Greatest reductions in OT/Comp expenditure vs FY2021

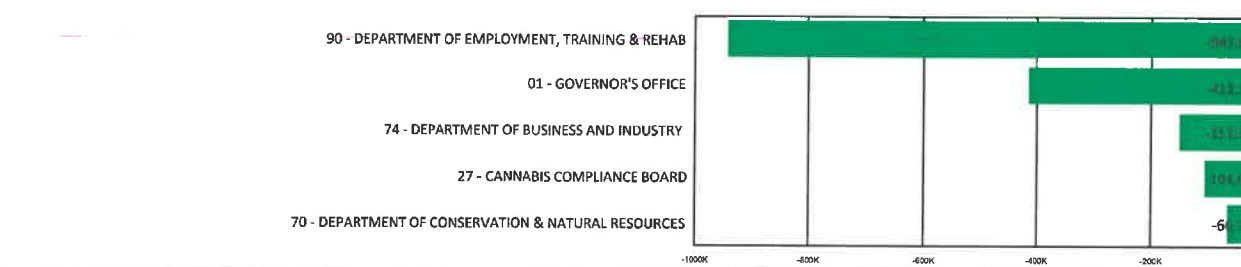
No Data Available

FY2022 - YEAR-TO-DATE TOTALS

Greatest increases in OT/Comp expenditures vs FY2021



Greatest reductions in OT/Comp expenditure vs FY2021



OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2022 QUARTERLY DETAILED ANALYSIS
NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, June 14, 2022



	FY2022QTR1				FY2022QTR2				FY2022QTR3				FY2022 QTR1-QTR3			
	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2021	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2021	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2021	Overtime Pay and Accrued Comp (YTD)	Total Pay (YTD)	OT/Comp as a Share of Total Pay (YTD)	Difference in OT Pay/Comp versus FY2021 (YTD)
01 - GOVERNOR'S OFFICE	\$33,650	\$2,137,979	1.57%	\$-71,758	\$26,631	\$2,578,020	1.03%	\$-274,932	\$28,085	\$2,271,273	1.24%	\$-66,668	\$88,365.46	\$6,987,272.65	1.26%	\$-413,359
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$57,581	0.00%	\$0	\$0	\$35,011	0.00%	\$0	\$0	\$73,894	0.00%	\$0	\$0.00	\$166,486.80	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$37,615	\$6,346,049	0.59%	\$-14,546	\$38,654	\$7,580,247	0.51%	\$-26,983	\$48,804	\$6,567,516	0.74%	\$31,977	\$125,073.38	\$20,493,811.89	0.61%	\$-9,552
04 - SECRETARY OF STATE'S OFFICE	\$3,932	\$1,525,564	0.26%	\$3,712	\$49,645	\$1,869,834	2.66%	\$41,305	\$22,382	\$1,635,053	1.37%	\$20,227	\$75,958.17	\$5,030,450.91	1.51%	\$65,245
05 - TREASURER'S OFFICE	\$3,304	\$660,588	0.50%	\$618	\$4,110	\$753,504	0.55%	\$2,742	\$1,022	\$648,775	0.16%	\$880	\$8,436.02	\$2,062,867.96	0.41%	\$4,240
06 - CONTROLLER'S OFFICE	\$46,075	\$625,323	7.37%	\$25,615	\$55,044	\$804,260	6.84%	\$-3,569	\$26,931	\$687,542	3.92%	\$11,168	\$128,049.34	\$2,117,124.56	6.05%	\$33,214
08 - DEPARTMENT OF ADMINISTRATION	\$79,759	\$7,065,846	1.13%	\$-43,750	\$120,337	\$8,749,119	1.38%	\$35,292	\$112,182	\$7,550,739	1.49%	\$14,691	\$312,278.50	\$23,365,704.53	1.34%	\$6,233
09 - JUDICIAL BRANCH	\$5,867	\$6,899,109	0.09%	\$5,453	\$10,914	\$8,414,390	0.13%	\$10,286	\$10,156	\$7,247,852	0.14%	\$8,733	\$26,936.29	\$22,561,350.31	0.12%	\$24,473
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$7,411	\$1,213,810	0.61%	\$1,280	\$15,744	\$1,452,337	1.08%	\$11,051	\$4,938	\$1,285,499	0.38%	\$4,335	\$28,093.76	\$3,951,646.09	0.71%	\$16,666
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$399,089	0.00%	\$0	\$0	\$483,982	0.00%	\$0	\$0	\$400,145	0.00%	\$0	\$0.00	\$1,283,215.93	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$644,385	0.00%	\$0	\$0	\$807,761	0.00%	\$0	\$0	\$686,284	0.00%	\$-120	\$0.00	\$2,138,429.20	0.00%	\$-120
13 - DEPARTMENT OF TAXATION	\$34,976	\$3,983,496	0.88%	\$17,344	\$25,537	\$4,833,002	0.53%	\$-4,815	\$58,163	\$4,122,480	1.41%	\$20,234	\$118,676.37	\$12,938,978.53	0.92%	\$32,763
15 - COMMISSION ON ETHICS	\$0	\$108,430	0.00%	\$0	\$0	\$113,534	0.00%	\$0	\$0	\$117,586	0.00%	\$0	\$0.00	\$339,550.04	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$62,563	0.00%	\$0	\$0	\$61,010	0.00%	\$0	\$0	\$76,939	0.00%	\$0	\$0.00	\$200,512.64	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$101,283	0.00%	\$0	\$0	\$124,354	0.00%	\$0	\$0	\$108,600	0.00%	\$0	\$0.00	\$334,236.64	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$0	\$228,696	0.00%	\$0	\$2,207	\$290,768	0.76%	\$1,374	\$0	\$242,196	0.00%	\$0	\$2,206.77	\$761,660.33	0.29%	\$1,374
24 - DEPARTMENT OF VETERANS SERVICES	\$583,685	\$3,096,187	18.85%	\$32,804	\$557,291	\$3,527,444	15.80%	\$-16,378	\$530,142	\$3,032,086	17.48%	\$78,614	\$1,671,118.39	\$9,655,716.71	17.31%	\$95,040
27 - CANNABIS COMPLIANCE BOARD	\$10,032	\$695,554	1.44%	\$-21,519	\$15,929	\$893,892	1.78%	\$-43,633	\$11,280	\$912,855	1.24%	\$-39,749	\$37,241.23	\$2,502,301.61	1.49%	\$-104,901
30 - DEPARTMENT OF EDUCATION	\$57,599	\$2,487,527	2.32%	\$-1,491	\$16,952	\$3,142,173	0.54%	\$-4,188	\$26,909	\$2,683,566	1.00%	\$12,300	\$101,460.51	\$8,313,265.77	1.22%	\$6,622
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$15,990	\$364,052	4.39%	\$5,414	\$19,971	\$441,522	4.52%	\$10,492	\$8,933	\$407,736	2.19%	\$-2,137	\$44,894.49	\$1,213,310.33	3.70%	\$13,768
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$4,802,007	\$72,777,691	6.60%	\$1,516,221	\$5,577,944	\$85,573,066	6.52%	\$-1,396,052	\$6,947,046	\$77,930,628	8.91%	\$2,538,677	\$17,326,997.05	\$236,281,385.42	7.33%	\$2,658,845
43 - ADJUTANT GENERAL	\$261,123	\$2,131,869	12.25%	\$172,762	\$145,993	\$2,521,845	5.79%	\$70,567	\$165,563	\$2,222,936	7.45%	\$108,741	\$572,677.83	\$6,876,650.17	8.33%	\$352,070
44 - DEPARTMENT OF CORRECTIONS	\$6,596,687	\$37,259,982	17.70%	\$1,966,018	\$7,925,380	\$44,478,661	17.82%	\$1,012,291	\$7,823,288	\$37,894,768	20.64%	\$2,105,854	\$22,345,354.72	\$19,633,410.82	18.68%	\$5,084,163
50 - COMMISSION ON MINERAL RESOURCES	\$13,836	\$215,092	6.43%	\$9,336	\$0	\$195,772	0.00%	\$0	\$3,244	\$188,779	1.72%	\$231	\$17,080.14	\$599,643.51	2.85%	\$9,567
55 - DEPARTMENT OF AGRICULTURE	\$15,158	\$1,800,406	0.84%	\$-18,640	\$8,332	\$2,150,541	0.39%	\$310	\$5,118	\$1,815,291	0.28%	\$663	\$28,608.09	\$5,766,238.03	0.50%	\$-17,667
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,817,162	0.00%	\$0	\$0	\$2,221,448	0.00%	\$0	\$0	\$1,913,336	0.00%	\$0	\$0.00	\$5,951,945.36	0.00%	\$0
61 - GAMING CONTROL BOARD	\$134,705	\$5,781,487	2.33%	\$59,449	\$177,249	\$7,052,210	2.51%	\$88,236	\$146,369	\$5,998,985	2.44%	\$81,246	\$458,323.02	\$18,832,682.37	2.43%	\$228,930
65 - DEPARTMENT OF PUBLIC SAFETY	\$2,255,683	\$19,655,670	11.48%	\$58,059	\$2,310,311	\$23,472,883	9.84%	\$304,089	\$1,937,774	\$20,050,954	9.66%	\$41,135	\$6,503,767.12	\$63,179,506.81	10.29%	\$403,282
69 - COLORADO RIVER COMMISSION	\$1,183	\$617,144	0.19%	\$-1,138	\$2,027	\$767,302	0.26%	\$504	\$2,027	\$677,634	0.30%	\$1,487	\$5,236.94	\$2,062,080.35	0.25%	\$852
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,403,252	\$11,664,125	12.03%	\$-114,171	\$188,611	\$11,352,064	1.66%	\$-10,297	\$136,428	\$9,860,789	1.38%	\$57,727	\$1,728,290.48	\$32,876,978.20	5.26%	\$-66,742
72 - DEPARTMENT OF WILDLIFE	\$84,233	\$3,465,047	2.43%	\$3,943	\$70,092	\$4,165,486	1.68%	\$2,650	\$80,260	\$3,580,880	2.24%	\$10,236	\$234,585.21	\$11,211,414.26	2.09%	\$16,829
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$34,720	\$8,075,809	0.43%	\$-93,338	\$46,352	\$9,858,323	0.47%	\$-57,929	\$75,917	\$8,419,819	0.90%	\$-51	\$156,989.04	\$26,353,951.14	0.60%	\$-151,318
80 - DEPARTMENT OF TRANSPORTATION	\$1,545,168	\$26,668,464	5.79%	\$817,489	\$1,504,481	\$26,344,737	5.71%	\$494,132	\$1,229,937	\$25,407,238	4.84%	\$-118,318	\$4,279,586.26	\$78,420,438.63	5.46%	\$1,193,303
81 - DEPARTMENT OF MOTOR VEHICLES	\$666,899	\$12,759,048	5.23%	\$586,711	\$481,196	\$15,116,841	3.18%	\$56,543	\$677,644	\$13,088,102	5.18%	\$494,839	\$1,825,738.83	\$40,963,990.37	4.46%	\$1,138,093
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$957,417	\$13,083,777	7.32%	\$-440,684	\$744,518	\$12,957,968	5.75%	\$-239,959	\$798,298	\$12,769,650	6.25%	\$-263,254	\$2,500,233.86	\$38,811,394.83	6.44%	\$-943,897
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$0	\$368,486	0.00%	\$0	\$0	\$447,421	0.00%	\$0	\$0	\$368,126	0.00%	\$0	\$0.00	\$1,184,033.40	0.00%	\$0
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$331,248	0.00%	\$-1,806	\$0	\$411,477	0.00%	\$-4,824	\$0	\$338,677	0.00%	\$-3,858	\$0.00	\$1,081,401.36	0.00%	\$-10,488
Total	\$19,691,964	\$257,175,621	7.66%	\$4,459,384	\$20,141,452	\$296,044,209	6.80%	\$58,306	\$20,918,841	\$263,285,208	7.95%	\$5,149,841	\$60,752,257	\$816,505,038	7.44%	\$9,667,530

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2022 COMPARATIVE YEAR-TO_DATE ANALYSIS (QTR1-QTR3) VS FY2020-FY2021

NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, June 14, 2022



	FY 2020 QTR1-QTR3				FY 2021 QTR1-QTR3				FY 2022 QTR1-QTR3			
	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year
01 - GOVERNOR'S OFFICE	\$40,932	\$5,813,790	0.70%	\$-259,731	\$501,724	\$7,109,090	7.06%	\$460,792	\$88,365	\$6,987,273	1.26%	\$-413,359
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$242,618	0.00%	\$0	\$0	\$248,837	0.00%	\$0	\$0	\$166,487	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$83,160	\$20,634,873	0.40%	\$15,567	\$134,625	\$21,232,963	0.63%	\$51,465	\$125,073	\$20,493,812	0.61%	\$-9,552
04 - SECRETARY OF STATE'S OFFICE	\$214,997	\$5,672,000	3.79%	\$167,811	\$10,713	\$5,152,762	0.21%	\$-204,283	\$75,958	\$5,030,451	1.51%	\$65,245
05 - TREASURER'S OFFICE	\$6,845	\$2,077,414	0.33%	\$2,716	\$4,196	\$2,098,031	0.20%	\$-2,649	\$8,436	\$2,062,868	0.41%	\$4,240
06 - CONTROLLER'S OFFICE	\$51,286	\$2,132,813	2.40%	\$-18,204	\$94,835	\$2,047,780	4.63%	\$43,550	\$128,049	\$2,117,125	6.05%	\$33,214
08 - DEPARTMENT OF ADMINISTRATION	\$344,099	\$24,816,891	1.39%	\$-70,713	\$306,045	\$24,229,439	1.26%	\$-38,054	\$312,279	\$23,365,705	1.34%	\$6,233
09 - JUDICIAL BRANCH	\$4,516	\$21,849,067	0.02%	\$-3,127	\$2,463	\$21,699,637	0.01%	\$-2,053	\$26,936	\$22,561,350	0.12%	\$24,473
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$31,406	\$4,861,149	0.65%	\$5,209	\$11,428	\$3,571,069	0.32%	\$-19,978	\$28,094	\$3,951,646	0.71%	\$16,666
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$987,157	0.00%	\$0	\$0	\$1,290,522	0.00%	\$0	\$0	\$1,283,216	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$2,135,181	0.00%	\$0	\$120	\$2,099,516	0.01%	\$120	\$0	\$2,138,429	0.00%	\$-120
13 - DEPARTMENT OF TAXATION	\$109,687	\$14,513,919	0.76%	\$-54,626	\$85,913	\$14,023,815	0.61%	\$-23,774	\$118,676	\$12,938,979	0.92%	\$32,763
15 - COMMISSION ON ETHICS	\$0	\$369,860	0.00%	\$0	\$0	\$345,780	0.00%	\$0	\$0	\$339,550	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$40,674	0.00%	\$0	\$0	\$166,567	0.00%	\$0	\$0	\$200,513	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$320,182	0.00%	\$0	\$0	\$335,359	0.00%	\$0	\$0	\$334,237	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$512	\$714,804	0.07%	\$-510	\$833	\$672,078	0.12%	\$321	\$2,207	\$761,660	0.29%	\$1,374
24 - DEPARTMENT OF VETERANS SERVICES	\$929,695	\$9,282,689	10.02%	\$312,339	\$1,576,078	\$10,012,520	15.74%	\$646,383	\$1,671,118	\$9,655,717	17.31%	\$95,040
27 - CANNABIS COMPLIANCE BOARD	\$0	\$0	0.00%	\$0	\$142,142	\$1,905,058	7.46%	\$142,142	\$37,241	\$2,502,302	1.49%	\$-104,901
30 - DEPARTMENT OF EDUCATION	\$64,495	\$8,337,087	0.77%	\$-114,991	\$94,839	\$8,631,092	1.10%	\$30,343	\$101,461	\$8,313,266	1.22%	\$6,622
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$35,773	\$1,016,791	3.52%	\$18,223	\$31,126	\$1,144,619	2.72%	\$-4,647	\$44,894	\$1,213,310	3.70%	\$13,768
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$8,328,413	\$236,778,329	3.52%	\$-833,004	\$14,668,152	\$238,777,794	6.14%	\$6,339,739	\$17,326,997	\$236,281,385	7.33%	\$2,658,845
43 - ADJUTANT GENERAL	\$181,756	\$3,869,610	4.70%	\$-40,457	\$220,608	\$4,188,795	5.27%	\$38,852	\$572,678	\$6,876,650	8.33%	\$352,070
44 - DEPARTMENT OF CORRECTIONS	\$11,557,954	\$122,533,486	9.43%	\$2,477,755	\$17,261,191	\$125,172,043	13.79%	\$5,703,237	\$22,345,355	\$119,633,411	18.68%	\$5,084,163
50 - COMMISSION ON MINERAL RESOURCES	\$22,376	\$644,660	3.47%	\$1,188	\$7,513	\$592,996	1.27%	\$-14,862	\$17,080	\$599,644	2.85%	\$9,567
55 - DEPARTMENT OF AGRICULTURE	\$60,466	\$5,944,803	1.02%	\$-9,088	\$46,275	\$6,057,824	0.76%	\$-14,191	\$28,608	\$5,766,238	0.50%	\$-17,667
58 - PUBLIC UTILITIES COMMISSION	\$0	\$6,108,193	0.00%	\$0	\$0	\$5,826,986	0.00%	\$0	\$0	\$5,951,945	0.00%	\$0
61 - GAMING CONTROL BOARD	\$522,249	\$19,701,494	2.65%	\$40,770	\$229,393	\$18,581,230	1.23%	\$-292,856	\$458,323	\$18,832,682	2.43%	\$228,930
65 - DEPARTMENT OF PUBLIC SAFETY	\$6,587,835	\$69,335,102	9.50%	\$631,919	\$6,100,485	\$67,261,227	9.07%	\$-487,350	\$6,503,767	\$63,179,507	10.29%	\$403,282
69 - COLORADO RIVER COMMISSION	\$5,201	\$2,258,490	0.23%	\$-7,643	\$4,385	\$2,137,324	0.21%	\$-816	\$5,237	\$2,062,080	0.25%	\$852
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,790,474	\$33,892,937	5.28%	\$-838,805	\$1,795,032	\$33,702,602	5.33%	\$4,558	\$1,728,290	\$32,876,978	5.26%	\$-66,742
72 - DEPARTMENT OF WILDLIFE	\$257,278	\$11,788,068	2.18%	\$41,299	\$217,756	\$11,037,417	1.97%	\$-39,522	\$234,585	\$11,211,414	2.09%	\$16,829
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$107,811	\$27,502,338	0.39%	\$-38,241	\$308,307	\$26,749,585	1.15%	\$200,496	\$156,989	\$26,353,951	0.60%	\$-151,318
80 - DEPARTMENT OF TRANSPORTATION	\$4,051,333	\$82,334,456	4.92%	\$-620,479	\$3,086,283	\$78,637,181	3.92%	\$-965,050	\$4,279,586	\$78,420,439	5.46%	\$1,193,303
81 - DEPARTMENT OF MOTOR VEHICLES	\$805,815	\$42,794,813	1.88%	\$252,596	\$687,646	\$41,038,623	1.68%	\$-118,168	\$1,825,739	\$40,963,990	4.46%	\$1,138,093
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$596,558	\$33,358,758	1.79%	\$168,067	\$3,444,131	\$38,820,644	8.87%	\$2,847,573	\$2,500,234	\$38,811,395	6.44%	\$-943,897
95 - PUBLIC EMPLOYEES BENEFITS PROGRAM	\$329	\$1,311,369	0.03%	\$-413	\$0	\$1,247,922	0.00%	\$-329	\$0	\$0	0.00%	\$0
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0	\$0	\$1,184,033	0.00%	\$0
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$982	\$882,442	0.11%	\$982	\$10,488	\$1,014,273	1.03%	\$9,506	\$0	\$1,081,401	0.00%	\$-10,488
Total	\$36,794,232	826,858,306.90	4.45%	\$1,226,409	\$51,084,727	828,861,000.08	6.16%	\$14,290,495	\$60,752,257	816,505,038.46	7.44%	\$9,667,530

440 DEPARTMENT OF CORRECTIONS

Code	Organization	Base Pay	Acfr Comp Hrs	Comp Dollars	Pd OT Hours	Pd OT Dollars	Total Curr Hrs	Total Curr Dollars	Total Prior Hrs	Total Prior Dollars	Difference
3706	HR-PRISON MEDICAL CARE	\$3,994,862.95	451,020.00	\$23,612.29	7556:32.00	\$418,685.38	8207:34.00	\$442,204.67	12502:02	\$658,803.91	\$ (216,599.24)
3708	HR-OFFENDERS STORE FUND	\$496,953.81	286:25.00	\$6,558.73	442:10.00	\$19,853.49	730:35.00	\$26,413.22	458:13.00	\$16,836.67	\$ 9,576.55
3710	HR-DIRECTOR'S OFFICE	\$2,261,395.86	129:23.00	\$4,485.16	3352:03.00	\$171,969.07	3481:26.00	\$176,454.23	2209:59.00	\$108,156.53	\$ 68,297.70
3711	HR-CORRECTIONAL PROGRAMS	\$1,296,815.23	122:30.00	\$3,874.76	3144:45.00	\$14,913.54	437:15.00	\$18,788.30	4835:50.00	\$18,555.69	\$ 232.61
3715	HR-SO NEVADA CORRECTIONAL CTR	\$15,465.80	0:00.00	\$0.00	4:00.00	\$200.40	430:00.00	\$200.40	23:00.00	\$118.86	\$ 80.74
3716	HR-WARM SPRINGS CORRECTNL CTR	\$867,987.32	1407:30.00	\$36,125.39	11601:19	\$521,266.29	13002:49	\$557,391.68	13058:58	\$534,684.86	\$ 22,706.82
3717	HR-NO NEVADA CORRECTNL CTR	\$2,321,378.88	2886:35.00	\$76,784.84	28800:33	\$1,290,773.14	31489:08	\$1,367,557.98	29727:11	\$1,214,212.11	\$ 153,345.87
3718	HR-NEVADA STATE PRISON	\$0.00	0:00.00	\$0.00	0:00.00	\$0.00	0:00.00	\$0.00	0:00.00	\$0.00	\$ -
3719	HR-PRISON INDUSTRY	\$188,644.36	0:00.00	\$0.00	495:00.00	\$23,461.42	496:00.00	\$23,461.42	2272:00.00	\$11,052.26	\$ 12,409.16
3722	HR-STEWART CONSERVATION CAMP	\$136,668.48	40:00.00	\$1,123.92	891:00.00	\$44,650.57	931:00.00	\$45,774.49	1164:00.00	\$54,163.19	\$ (8,388.70)
3723	HR-PIOCHE CONSERVATION CAMP	\$157,661.48	24:00.00	\$597.60	772:30.00	\$31,239.32	796:30.00	\$31,836.92	920:30.00	\$35,178.13	\$ (3,342.21)
3724	HR-NO NV TRANSITIONAL HOUSING	\$152,989.92	0:00.00	\$0.00	230:30.00	\$11,108.14	230:30.00	\$11,108.14	442:00.00	\$18,240.21	\$ (7,132.07)
3725	HR-THREE LAKES V.I. CNSRVTN CMP	\$297,964.79	24:00.00	\$681.12	529:50.00	\$20,418.61	553:50.00	\$21,099.73	1036:40.00	\$35,636.14	\$ (14,736.41)
3727	HR-PRISON RANCH	\$82,178.20	0:00.00	\$0.00	80:00.00	\$1,813.36	60:00.00	\$1,813.36	209:20.00	\$7,072.77	\$ (5,259.41)
3738	HR-SO DESERT CORRECTIONAL CTR	\$3,137,363.36	638:55.00	\$18,112.57	1265:108	\$518,132.33	13291:03	\$536,244.90	13169:35	\$471,189.36	\$ 65,055.54
3739	HR-WELLS CONSERVATION CAMP	\$110,291.53	8:00.00	\$196.48	1147:10.00	\$47,504.07	1155:10.00	\$47,700.55	1367:30.00	\$57,025.65	\$ (9,325.10)
3741	HR-HUMBOLDT CONSERVATION CAMP	\$125,102.00	32:00.00	\$846.00	1063:50.00	\$45,370.71	1115:50.00	\$46,218.71	1549:00.00	\$64,971.23	\$ (18,752.52)
3747	HR-ELY CONSERVATION CAMP	\$17,393.60	0:00.00	\$0.00	436:30.00	\$29,720.51	436:30.00	\$29,720.51	296:00.00	\$18,956.10	\$ 10,764.41
3748	HR-JEAN CONSERVATION CAMP	\$135,067.45	0:00.00	\$0.00	301:20.00	\$14,400.03	301:20.00	\$14,400.03	328:15.00	\$13,600.76	\$ 799.27
3749	HR-SILVER SPRINGS CONSERVATION	\$0.00	0:00.00	\$0.00	0:00.00	\$0.00	0:00.00	\$0.00	2514:07	\$1,055,894.11	\$ (1,055,894.11)
3751	HR-ELY STATE PRISON	\$2,474,850.97	2226:53.00	\$51,600.79	20333:13	\$948,303.96	22560:06	\$1,009,904.75	1439:50.00	\$70,823.48	\$ 939,081.27
3752	HR-CARLIN CONSERVATION CAMP	\$100,388.80	46:00.00	\$1,604.80	1407:30.00	\$72,981.94	1456:30.00	\$74,586.74	1494:00.00	\$81,940.27	\$ (6,353.53)
3754	HR-TONOPAH CONSERVATION CAMP	\$100,619.60	0:00.00	\$0.00	1706:15.00	\$81,541.19	1706:15.00	\$81,541.19	23884:54	\$1,031,217.73	\$ (949,676.54)
3759	HR-LOVELOCK CORRECTIONAL CTR	\$2,109,002.27	1998:25.00	\$57,360.50	21129:59	\$1,014,809.60	23728:24	\$1,072,170.10	1120:30.00	\$42,263.21	\$ 1,029,906.89
3760	HR-CASA GRANDE TRANS HOUSING	\$387,575.36	65:00.00	\$2,244.30	294:15.00	\$10,965.11	359:15.00	\$13,209.61	9705:46.00	\$389,464.49	\$ (356,254.88)
3761	HR-F MCCLURE WOMENS COR CTR	\$2,103,538.67	870:02.00	\$26,148.46	9502:14.00	\$410,462.89	10372:16	\$436,611.35	50483:13	\$1,945,467.73	\$ (1,508,856.38)
3762	HR-HIGH DESERT STATE PRISON	\$6,741,713.19	2474:08.00	\$65,002.75	36592:41	\$1,653,850.16	41066:49	\$1,718,852.91	282:30.00	\$8,407.66	\$ 1,710,445.25
3763	HR-INMATE WELFARE ACCOUNT	\$277,608.01	27:00.00	\$382.32	332:20.00	\$12,418.66	359:20.00	\$12,800.98	0:00.00	\$0.00	\$ 12,800.98
		\$30,071,462.89		\$ 387,252.96		\$ 7,490,813.89		\$7,878,066.87		\$7,923,834.91	\$ (45,768.04)
											-1.3%

Top 7 Correctional Centers (including Prison Medical)

3762	HR-HIGH DESERT STATE PRISON	\$ 6,741,713.19	2474:08.00	\$ 65,002.75	36592:41	\$1,653,850.16	41066:49	\$1,718,852.91	
3717	HR-NO NEVADA CORRECTNL CTR	\$ 2,321,378.88	2886:35.00	\$76,784.84	28800:33	\$1,290,773.14	31489:08	\$1,367,557.98	
3759	HR-LOVELOCK CORRECTIONAL CTR	\$ 2,109,002.27	1998:25.00	\$57,360.50	21129:59	\$1,014,809.60	23728:24	\$1,072,170.10	
3761	HR-ELY STATE PRISON	\$ 2,474,850.97	2226:53.00	\$61,600.79	20333:13	\$948,303.96	22560:06	\$1,009,904.75	
3716	HR-WARM SPRINGS CORRECTNL CTR	\$ 867,987.32	1407:30.00	\$36,125.39	11601:19	\$521,266.29	13002:49	\$557,391.68	
3738	HR-SO DESERT CORRECTIONAL CTR	\$ 3,137,363.36	638:55.00	\$18,112.57	1265:108	\$518,132.33	13291:03	\$536,244.90	
3706	HR-PRISON MEDICAL CARE	\$ 3,994,862.95	451:02.00	\$23,612.29	7556:32.00	\$418,685.38	8207:34.00	\$442,204.67	\$ 85.8%

DOC 22Q3 Rsn

\$7,818,066.87

Highest 4 Causes of Overtime by Event Code							
1	11 COVER-AL/MIL	5488:05:00	\$ 152,016.02	78438:21	\$ 3,607,758.37	83926:26	\$ 3,759,774.39
2	33 COVID-19	2989:19:00	\$ 85,488.56	45052:41	\$ 2,080,014.05	48041:00	\$ 2,165,900.61
3	63 HOSPITAL COVERAG	385:48:00	\$ 10,675.50	11948:34	\$ 546,268.70	12334:22	\$ 556,974.20
4	13 FIRE TIME	3418:55:00	\$ 96,160.70	9716:14:00	\$ 281,078.89	13135:09	\$ 377,239.59
						\$ 6,859,488.79	87.7%

Overtime Analysis by Event Date

Overtime Analysis Settings

Agency: ALL

DHHS Pivot 22Q3

DEPT OF HEALTH AND HUMAN SERV

Row Labels	Sum of Dollars12
BACKLOG REDU	\$ 3,338,487.15
COVER-VACANT	\$ 969,370.37
COVER-24 HR	\$ 822,618.35
AGNCY DEFINE	\$ 657,512.78
COVER-HOL/WK	\$ 267,083.06
WORKLOAD	\$ 175,717.24
COVER-SICK	\$ 155,061.46
COVID-19	\$ 135,259.00
CLIENT SVCS	\$ 108,981.39
COVER-ALMIL	\$ 48,633.46
TRAVEL	\$ 46,940.61
TRAINING	\$ 38,950.09
EMERGENCIES	\$ 30,749.70
PROGRAM DEAD	\$ 28,803.97
INVESTIGATE	\$ 28,016.13
ACCT/FISCAL	\$ 18,567.54
ACCIDENTS	\$ 14,218.19
SITE REPAIR	\$ 9,339.98
BUDGET PREP	\$ 8,875.22
COVER-TRAIN	\$ 7,405.48
SPECIAL EVNT	\$ 5,737.84
COVER-INJURY	\$ 4,623.28
ADMIN	\$ 4,012.54
ADMIN SUPPRT	\$ 3,400.20
CLIENT MEET	\$ 2,792.28
STAFF MEET	\$ 2,540.81
WORKSHOPS	\$ 2,506.79
OFFICE SPRT	\$ 2,193.13
TRAIN-PERSON	\$ 1,947.04
MEETINGS	\$ 1,358.57
CONFERENCES	\$ 1,183.41
PERSONNEL	\$ 1,054.97
COURT	\$ 788.01
UNDEFINED	\$ 533.91
UNDEFINED	\$ 330.76
(blank)	
Grand Total	\$ 6,945,574.71

1 BACKLOG REDU	3,338,487.15
2 COVER-VACANT	969,370.37
3 COVER-24 HR	822,618.35
4 AGNCY DEFINE	657,512.78
	5,787,988.65
	83.3%

Row Labels	Sum of Dollars5
406	\$ 1,500,194.89
HR-SO NEV ADULT MENTAL HEALTH	\$ 928,081.28
HR-FAC FOR MENTAL OFFENDER	\$ 412,226.48
HR-NNV ADULT MENTAL HEALTH SVC	\$ 48,657.95
HR-HEALTH CARE FACILITY REG	\$ 23,761.29
HR-OFF OF STATE HEALTH ADMIN	\$ 21,238.85
HR-HHS HD BIOSTATS & EPIDMILG	\$ 15,274.64
HR-IMMUNIZATION PROGRAM	\$ 13,804.29
HR-COMMUNICABLE DISEASES	\$ 9,417.44
HR-COMMUNITY HEALTH SERVICES	\$ 7,981.92
HR-RADIATION CONTROL PROGRAM	\$ 5,644.21
HR-WIC FOOD SUPPLEMENT	\$ 3,454.81
HR-HEALTH STATISTICS&PLANNING	\$ 2,898.34
HR-HEALTH ALERT NETWORK	\$ 2,596.42
HR-CANCER CONTROL REGISTRY	\$ 2,470.14
HR-EMERGENCY MEDICAL SERVICES	\$ 793.29
HR-CHILD CARE SERVICES	\$ 479.28
HR-BEHAVIORIAL HEALTH ADMINSTR	\$ 458.24
HR-BEHAVIORIAL HEALTH PREV & TR	\$ 419.37
HR-MATERNAL CHILD HEALTH SRVC	\$ 366.45
HR-ENVIRONMENTAL HEALTH SRVCS	\$ 137.39
HR-HHS DPBH RURAL CLINICS	\$ 32.81
HR-BEHAVIORIAL HLTH INFO SYSTM	\$ -
HR- MARIJUANA HEALTH REGISTRY	\$ -
HR- MED MARIJUANA ESTABLISHMEN	\$ -
HR-CHRONIC DISEASE	\$ -
HR-EARLY INTERVENTION SVCS	\$ -
(blank)	\$ -
HR-OFFICE OF MINORITY HEALTH	\$ -
402	\$ 691,849.83
HR-DESERT REGIONAL CENTER	\$ 600,026.23
HR-COMMUNITY BASED SERVICES	\$ 82,988.65
HR-AGING FEDERAL PROG & ADMIN	\$ 6,978.10
HR-SIERRA REGIONAL CENTER	\$ 908.17
HR-EARLY INTERVENTION SVCS	\$ 479.28
HR-RURAL REGIONAL CENTER	\$ 469.40
HR-HOME&COMMUNITY BASED PROG	\$ -
HR-SR CITIZEN PROP TAX ASSIST	\$ -
HR-HHS DO CONSUMER HEALTH ASSI	\$ -
(blank)	\$ -
HR-TOBACCO SETTLEMENT PROGRAM	\$ -
HR-HR HOMEMAKER	\$ -
HR-AUTISM TREATMENT PROGRAM	\$ -
HR-COMMUNICATION ACCESS SRVCS	\$ -
HR-SENIOR RX AND DISABILITY RX	\$ -
403	\$ 78,757.16
HR-HEALTH CARE FIN & POLICY	\$ 78,757.16
HR-NEVADA MEDICAID	\$ -
HR-NEVADA CHECK-UP PROGRAM	\$ -
400	\$ 8,095.19
HR-DATA ANALYTICS	\$ 3,084.14
HR-IDEA PART C COMPLIANCE	\$ 2,275.58
HR-DEVELOPMENTAL DISABILITIES	\$ 1,468.28
HR-ADMINISTRATION	\$ 993.59
HR-GRANTS MANAGEMENT UNIT	\$ 273.60
HR-CONSUMER HEALTH ASSISTANCE	\$ -
HR-FUND FOR RESILIENT NEVADA	\$ -
HR- HEALTHY NV FUND ADMIN	\$ -
HR-DISABILITY SERVICES	\$ -
HR-PATIENT PROTECTION COMMISSIO	\$ -
HR-INDIAN COMMISSION	\$ -
HR-PUBLIC DEFENDER	\$ -
(blank)	
(blank)	
407	\$ 3,614,554.04
HR-WELFARE FIELD SERVICES	\$ 3,516,688.06
HR-WELFARE ADMINISTRATION	\$ 71,700.72
HR-ENERGY ASSISTANCE - WELFARE	\$ 26,165.26
HR-CHILD CARE ASSIST & DEVEL	\$ -
HR-CHILD SPRT ENFORCEMNT PROG	\$ -
409	\$ 1,052,123.60
HR-SO NEV CHILD & ADLSCNT SVCS	\$ 307,900.95
HR-NEVADA YOUTH TRAINING CTR	\$ 193,571.51
HR-SUMMIT VIEW YOUTH CENTER	\$ 153,301.32
HR-RURAL CHILD WELFARE	\$ 129,978.75
HR-CALIENTE YOUTH CENTER	\$ 108,282.24
HR-NO NEV CHILD & ADLSCNT SVCS	\$ 86,013.64
HR-CHILDREN/YOUTH/FAMILY ADMIN	\$ 46,996.30
HR-YOUTH PAROLE SERVICES	\$ 24,917.04
HR-COMMUNITY JUV JUSTICE PRG	\$ 932.77
HR-INFORMATION SERVICES	\$ 229.08
HR-CHILD CARE SERVICES	\$ -
HR-VICTIMS OF CRIME	\$ -
(blank)	\$ -

Steve Sisolak
Governor



Susan Brown
Director

Tiffany Greenameyer
Deputy Director

Melanie Young
Administrator

**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: May 2, 2022
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Melanie Young, Budget Administrator *my*
Budget Division
Subject: BOARD OF EXAMINERS **INFORMATION** 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 Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of April 30, 2022.

Additional Information:

The Tort Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds supplement funding for eligible agencies within statutory authority.

Below is the available balance for each account prior to any projected outstanding claims.

Tort Claim Fund	\$ 3,598,122.35
Statutory Contingency Account	\$ 11,553,837.97
Stale Claims Account	\$ 2,124,292.39
Emergency Account	\$ 354,763.00
Disaster Relief Account	\$ 8,011,031.70

IFC Unrestricted Contingency Fund General Fund	\$ 18,847,547.78
IFC Unrestricted Contingency Highway Fund	\$ 1,638,068.35
IFC Restricted Contingency Fund General Fund	\$ 8,150,769.00
IFC Restricted Contingency Highway Fund	\$ 334,796.00

Statutory Authority:

NRS 331.187, 353.097, 353.263, 353.264, 353.266, 353.268, 353.2735 and
AB355, AB464, AB468, AB494 of the 2021 Legislative Session

REVIEWED: _____

ACTION ITEM: _____

BA 4892 Statutory Contingency Account
NRS 353.264
FY 2022 (as of April 30, 2022)

Beginning Cash	12,269,765.00
	-
Total Revenue	\$ 12,269,765.00

Paid Claims:

Wrongful Conviction Berry	(18,668.88)
Wrongful Conviction Delba	(220,922.80)
Attorney General Special Counsel	(209,386.15)
Post Conviction Claims NRS 212.070	(264,428.13)
Juveniles Compact NRS 621.050	(2,521.07)

Total Payments	(715,927.03)
Account Balance	\$ 11,553,837.97

Claims Submitted for Payment:

Post Conviction Claims NRS 212.070
Attorney General Outside Counsel

	\$ -
Submitted for Payment	
Account Balance	\$ 11,553,837.97

Projected Outstanding Claims:

	-
Total Pending Claims	\$ -
Account Balance	\$ 11,553,837.97

BA 1348 TORT Claim Fund
NRS 331.187
FY 2022 (as of April 30, 2022)

Beginning Cash	3,886,164.00	
Credit Card Rebate	121.75	
Insurance Premiums - A	286,692.15	
Insurance Premiums	3,638,858.06	
AG Loan Repayment	5,000.00	
Trans from CRF	-	
	<u>7,816,835.96</u>	
Total Revenue		<u>\$ 7,816,835.96</u>

Paid Claims:

Attorney General's Office (Operating)	(166,063.30)	
Tort Claims	(4,052,650.31)	
Reserve for Reversion	-	
	<u>(4,218,713.61)</u>	
Total Payments		
Account Balance		<u>\$ 3,598,122.35</u>

Claims Submitted for Payment:

Jeffrey David Patterson	(50,000.00)	
Settemeyer Litigation	(150,000.00)	
Tort Claims		
	<u>\$(200,000.00)</u>	
Submitted for Payment		
Account Balance		<u>\$ 3,398,122.35</u>

Projected Outstanding Claims:

Attorney General's Office (projection)	-	
	<u>-</u>	
Total Pending Claims		<u>\$ -</u>
Account Balance		<u>\$ 3,398,122.35</u>

BA 4888 Stale Claims Account
NRS 353.097
FY 2022 as of April 30, 2022

Beginning Cash	3,137,629.00
Transfer from Interim Finance	-
Appropriations	-
Total Revenue	\$ 3,137,629.00

<u>Paid Claims:</u>	
Post Conviction Claims	(228,217.72)
Governor's Office	(4,183.16)
Secretary of State	(34,398.90)
State Treasurer's Office	
State Controller's Office	(55,440.04)
Supreme Court	(1,890.96)
Taxation	(46,593.35)
Veterans Affairs	0.00
DETR - NERC	
Public Defender	(1,506.00)
Dept. of Education	(106,072.27)
Nevada State Library	
Museum	
Military Department	
Health Care Financing and Policy	
Youth Parole	(1,897.50)
Rehabilitation	(251.34)
DHHS - Aging Services	(24,750.30)
DHHS - Health Division	(9,666.21)
DHHS Welfare Division	
DHHS - Mental Health Inst	(22,966.97)
DHHS LV Mental Health	(90,120.24)
DHHS - SO Nev Adult Mental Health	(14,053.07)
DHHS-Rural Clinics	(7,360.48)
DHHS - Mental Health and Dev Services	(121,659.13)
DHHS - NO Nev Mental Health	(9,555.10)
DHHS - SO Nev Mental Health	(31,819.90)
DHHS - LV Children's Behavioral Services	(27,790.60)
Public Safety - Parole & Probation	(1,436.97)
DHHS - RNO Children's Behavioral Services	(838.75)
DCFS - Nevada Youth Training Center	(106.63)
Hearings	
Fire Marshall	(738.72)
Gaming Control Board	(2,245.50)
Parks	(3,515.97)
DCNR -Water Resources	
DCNR - Forestry	(5,302.25)
Employment Security	
DETR - Admin Services	(3,723.34)
Dept. of Administration	
Dept. of Corrections	(134,063.03)
Public Safety - Parole & Probation	
Parole/Pardons Boards	
DHHS-Youth Service Division	(4,801.57)
Judiciary	
DHHS-Child and Family Services	(16,370.64)
Admin Director	
Total Payments	(1,013,336.61)
Account Balance	\$ 2,124,292.39

**BA 4889 Emergency Fund
NRS 353.263
FY 2022 (as of April 30, 2022)**

Beginning Cash 354,763.00

Total Revenue **\$ 354,763.00**

Paid Claims:

-

Payments	\$ -
Account Balance	\$ 354,763.00

Claims Submitted for Payment:

-

Total Submitted Payments	\$ -
Account Balance	\$ 354,763.00

Projected Outstanding Claims

-

Total Pending Claims	\$ -
Estimated Account Balance - Including all Claims	\$ 354,763.00

BA 1335 Disaster Relief Account
NRS 353.2735
FY 2022 (as of April 30, 2022)

Beginning Cash	6,996,569.00
Treasurer's Interest	14,462.70
1st - 2nd Qtr Transfers Per NRS 353.288(4)	500,000.00
3rd Qtr and 4th Transfers Per NRS 353.288(4)	500,000.00

Total Revenue	\$ 8,011,031.70
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Paid Claims:

Transfer to DEM	-
	-
	-
Payments	-
Account Balance	\$ 8,011,031.70

Projected Outstanding Claims :

<u>Reserve for Reversion to GF</u>	0.00
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Total Pending Claims	0.00
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Estimated Account Balance - Including all Claims \$ 8,011,031.70

IFC Contingency Fund Unrestricted
NRS 353.266
FY 2022 (as of April 30, 2022)

Unrestricted General Fund

FY 2021 Beginning Cash Balance	20,015,332.53	
FY 2021 Appropriations	0.00	
Reversion to IFC	6,760,521.00	
Total Revenue		<u><u>26,775,853.53</u></u>

Paid Claims:

Meeting Costs	(34,028.75)	
Controllers Office	(51,680.00)	Approved @ August 2021 IFC
Conservation & Natural Res - Div of Water Resources	(250,000.00)	Approved @ August 2021 IFC
Office of the Military	(303,601.00)	Approved @ October 2021 IFC
Secretary of State	(2,206,158.00)	Approved @ February 2022 IFC
Department of Indigent Defense	(62,010.00)	Approved @ February 2022 IFC
Division of Forestry	(5,020,828.00)	Approved @ February 2022 IFC

Total Payments	(7,928,305.75)	
Account Balance		<u><u>18,847,547.78</u></u>

Pending Reimbursement:

Department of Public Safety	(373,051.00)	At May IFC
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Total Pending	(373,051.00)	
Account Balance-GF		<u><u>18,474,496.78</u></u>

Unrestricted Highway Fund

Beginning Cash	1,638,068.35	
Reversion to IFC	0.00	
Total Revenue		<u><u>1,638,068.35</u></u>

Paid Claims:

Total Payments	0.00	
Account Balance-HWY		<u><u>1,638,068.35</u></u>

IFC Contingency Fund Restricted
NRS 353.266
FY 2022 (as of April 30, 2022)

Restricted General Fund

Beginning Balance July 1, 2021
Appropriations

	3,852,296.00	
	8,307,527.00	
Total Revenue		12,159,823.00

Paid Claims:

Department of Taxation

	(117,659.00)	
Nevada System of Higher Education Leaderverse	(750,000.00)	
Conservation and Natural Resources	(2,500,000.00)	
Department of Employment Training and Rehab	(615,035.00)	
Dept of Indigent Defense	(26,360.00)	
Payments	(4,009,054.00)	
Account Balance		8,150,769.00

Pending:

	0.00	
Total Pending		0.00
Account Balance		8,150,769.00

Restricted Highway Fund

Beginning Balance July 1, 2011

	615,643.00	
	615,643.00	
Total Revenue		615,643.00

Paid Claims:

	(280,847.00)	
Dept of Motor Vehicles	(280,847.00)	
Payments	(280,847.00)	
Account Balance		334,796.00

		8,485,565.00
Total Restricted Balance:		