

Governor Joe Lombardo  
*Chairman*

Amy Stephenson  
*Clerk of the Board*



Attorney General Aaron D. Ford  
*Member*

Secretary of State Francisco V. Aguilar  
*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:** November 12, 2024, 10:00 AM

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

**Video Conference Location:** The McCarran Center, Nevada Building  
1 State of Nevada Way, Governor's Conference Room  
Las Vegas, Nevada 89119

This meeting may be viewed on YouTube.  
The video live stream begins at 10:00 am.  
<https://www.youtube.com/watch?v=ZWftAutvhpQ>

### 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 985 815 151#. 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 October 2, 2024 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 Agriculture                                    | 1             | \$332,495      |
| Department of Public Safety – Nevada Highway Patrol Division | 1             | \$64,381       |

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

**Department of Education**

Pursuant to NRS 333.705, subsection 4, the department seeks a favorable recommendation regarding its determination to use the emergency provision to contract with former employee Heidi Haartz to manage COVID relief funds through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

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

**A. Department of Education**

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Heidi Haartz to provide project management support for COVID relief fund projects for the Department of Education through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

**B. Department of Health and Human Services – Division of Child and Family Services**

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests to contract with former employee Deborah Hassett to assist with Human Resources for the Department of Health and Human Services, Division of Child and Family Services through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

### **C. Department of Transportation**

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Roger Trott to assist with coordinating right-of-way permits for the Nevada Department of Transportation through statewide contract #99SWC-NV21-7576 with Marathon Staffing Group, Inc.

## **7. Reconsideration of October 2, 2024 Approval of Proposed State Administrative Manual Changes** (For possible action)

### **Governor's Finance Office – Budget Division**

At its October 2, 2024 meeting the Board of Examiners approved modifications to the policies and procedures of the State Board of Examiners adopted and collected in the State Administrative Manual. Pursuant to NRS 353.040, the office requests the Board of Examiners to reconsider the effective date of the changes to section 204 regarding Board of Examiners Travel Policy. The requested new effective date of the previously approved changes to section 204 is December 11, 2024.

## **8. Request for Approval of Proposed State Administrative Manual Changes** (For possible action)

### **Governor's Finance Office – Budget Division**

Pursuant to NRS 353.040, the office requests modifications to the policies and procedures of the State Board of Examiners adopted and collected in the following chapters of the State Administrative Manual (SAM). This revision to SAM brings the SAM into alignment with current business practices, Nevada Administrative Code, and Nevada Revised Statutes.

- a. SAM Chapter 2630
- b. SAM Chapter 3610

## **9. 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 Employment, Training and Rehabilitation – Rehabilitation Division**

Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$1,216,748 from the Interim Finance Committee Contingency Account to continue providing vocational services to eligible clients with disabilities.

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

Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$78,728 from the Interim Finance Committee Contingency Account to continue providing vocational services to the blind and visually impaired.

**C. Department of Sentencing and Policy**

Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$57,712 from the Interim Finance Committee Contingency Account to fund a new Management Analyst 2 position and associated costs.

**10. Request for Approval to Pay a Tort Claim Pursuant to NRS 41.036**

(For possible action)

A. Claimant: Maryanne Tallman  
Claim No: TC21331  
Settlement Amount: \$200,000  
Date of Loss: August 16, 2023

B. Claimant: Ronnie Dean Smith  
Claim No: TC21332  
Settlement Amount: \$200,000  
Date of Loss: August 16, 2023

**11. Approval of Proposed Leases (For possible action)**

**12. Approval of Proposed Contracts (For possible action)**

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

**14. 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 September 5, 2024 through October 15, 2024.



## 15. Information Item Reports

### A. Governor's Finance Office – Budget Division

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of October 14, 2024, for State Fiscal Year 2025. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

### B. Department of Motor Vehicles – Complete Streets Program

Pursuant to NRS 482.1825, subsection 2, the department shall certify to the 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 submittal reports program activities by month for the first quarter of fiscal year 2025 for the period beginning July 1, 2024 and ending September 30, 2024.

## 16. 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 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 985 815 151#. 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.

## 17. Adjournment (For possible action)

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body will limit public comments to three minutes per speaker and may place other reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. 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 [dcastillo@finance.nv.gov](mailto:dcastillo@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 Denice Castillo 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 [dcastillo@finance.nv.gov](mailto:dcastillo@finance.nv.gov). Supporting materials for this meeting are available at 209 East Musser Street, Suite 200, Carson City, Nevada 89701 or by contacting Denice Castillo at (775) 684-0223 or by email at [dcastillo@finance.nv.gov](mailto:dcastillo@finance.nv.gov).

### Public Meeting Notice and Agenda Posted at the Following Locations:

1. Blasdel Building, 209 East Musser Street, Suite 200, Carson City, Nevada 89701
2. Internet: <https://notice.nv.gov>
3. Internet: [https://budget.nv.gov/Meetings/Board\\_of\\_Examiners/2024/2024BOE/](https://budget.nv.gov/Meetings/Board_of_Examiners/2024/2024BOE/)

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**Date and Time:** October 2, 2024, 10:00 AM

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

**Video Conference Location:** The McCarran Center, Nevada Building  
1 State of Nevada Way, Governor's Conference Room  
Las Vegas, Nevada 89119

### **MEMBERS PRESENT:**

Governor Joe Lombardo  
Secretary of State Francisco V. Aguilar  
Attorney General Aaron Ford

### **STAFF PRESENT:**

Amy Stephenson, Clerk of the Board  
Greg Ott, Board Counsel

### **OTHERS PRESENT:**

Joy Grimmer, Director, Department of Administration  
Charlie Donohue, Administrator, Department of Conservation and Natural Resources

## MEETING MINUTES

### 1. Call to Order / Roll Call

**Governor:** Let me call to order the State of Nevada Board of Examiners meeting scheduled for today, October 2, 2024 at 10:00 a.m. We'll start with the roll call, Ms. Stephenson.

**Clerk of the Board:** Governor Lombardo.

**Governor:** Here.

**Clerk of the Board:** Attorney General Ford.

**Governor:** Here.

**Clerk of the Board:** Secretary Aguilar.

**Secretary of State:** Here.

**Clerk of the Board:** Let the record reflect we have a quorum, sir.

- 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 904 000 369#. 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:** We will move on to agenda item number two, *Public Comment*. This is the first opportunity for 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 – that telephone number being (775) 321-6111. When prompted, provide the meeting ID number, which is 904 000 369#. When I open up the public comment period, dial \*5 to request to be unmuted. Do we have anybody there for public comment there in Carson City?

**Clerk of the Board:** Yes, sir.

**Gennady Stolyarov, II:** Attachment A

**John Dekoekkoek:** Attachment B

**Governor:** Is there any further comment there in Carson City?

**Clerk of the Board:** We do not, sir.

**Governor:** Is there any public comment here in Las Vegas? Seeing none.

Is there anybody on the phone for public comment?

**Clerk of the Board:** No, sir.

**Governor:** Hearing no further comment, we will close the first opportunity for public comment.

### 3. Approval of the August 13, 2024 and the September 11, 2024 Meeting Minutes (For possible action)

**Governor:** We will move to agenda item number three, *Approval of the August 13, 2024 and the September 11, 2024 Meeting Minutes*. Are there any questions or concerns?

**Secretary of State:** No questions. Motion to approve.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

### 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 Wildlife – Conservation Education Division | 2             | \$93,101       |
| Department of Wildlife – Law Enforcement Division        | 2             | \$96,101       |
| Department of Wildlife – Game Management Division        | 2             | \$94,403       |
| Department of Wildlife – Fisheries Management Division   | 1             | \$55,748       |
| Department of Wildlife – Diversity Division              | 1             | \$45,172       |
| Department of Wildlife – Habitat Division                | 3             | \$141,604      |

**Governor:** We will move on to agenda item number four, *State Vehicle Purchases*.

**Clerk of the Board:** There are six requests under this item. The first request is from the Department of Wildlife, Conservation Education Division requesting approval to purchase of two replacement vehicles for total amount not to exceed \$93,101.

The second request is also from the Department of Wildlife, Law Enforcement Division requesting approval to purchase two replacement vehicles for a total amount not to exceed \$96,101.

The third request is from the Department of Wildlife, Game Management Division requesting to purchase two replacement vehicles for total not to exceed \$94,403.

The fourth request is from the Department of Wildlife, Fisheries Management Division to purchase one replacement vehicle for total amount not to exceed \$55,748.

The next request is from the Department of Wildlife, Diversity Division requests approval to purchase one replacement vehicle for total amount not to exceed \$45,172.

The last request is from the Department of Wildlife, Habitat Division for approval to purchase three replacement vehicles for a total amount not to exceed \$141,604. Are there any questions on any of these items?

**Governor:** Do we have any questions?

**Attorney General:** No questions. I move approval.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

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

### **Department of Transportation**

Pursuant to NRS 333.705, subsection 4, the department seeks a favorable recommendation regarding its determination to use the emergency provision to contract with former employee Kenneth Siri to manage highway maintenance through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

**Governor:** Moving on to agenda item number five, *Authorization for an Emergency Contract with a Current and/or Former State Employee*.

**Clerk of the Board:** This request is from the Department of Transportation pursuant to NRS 333.705, subsection 4. The department seeks a favorable recommendation regarding its determination to use the emergency provision to contract with former employee Kenneth Siri to manage highway maintenance through Manpower. Are there any questions on this item?

**Governor:** I have a question before I entertain a motion. Do we have a particular issue? Is there somebody from the Department of Transportation available?

**Clerk of the Board:** We do not have anybody here.

**Governor:** Are you familiar enough with this item to provide an opinion or clarifications?

**Clerk of the Board:** Yes, sir.

**Governor:** So, reading through, it appears that this individual didn't abide by the 90-day cooling off period on separation per NRS.

**Clerk of the Board:** That is correct.

**Governor:** In reading through the request, it is presented as an emergency request, as this individual has already worked through the contract term provided. Is that correct?

**Clerk of the Board:** That is correct, sir.

**Governor:** So, they didn't abide by the 90-day requirement but they've completed performing this work.

Alright. I'm going to make an unfavorable motion on the recommendation being that it was in violation of the statute of the 90-day cooling off period, but my understanding it would be nothing more than an admonishment, correct? Is that correct, Ms. Stephenson, if it's unfavorable?

**Clerk of the Board:** Yes, sir.

**Governor:** So, hopefully, the unfavorable recommendation will prevent further similar types of action in the future. So, the motion is for an unfavorable recommendation.

**Secretary of State:** With unfavorable, we are not approving the contract.

**Governor:** The contract has already been served. It's nothing more than just to prevent further similar type action in the future.

**Secretary of State:** Understood.

**Governor:** So, all those in favor of the unfavorable recommendation signify by saying aye. The motion passes unanimously. Thank you.

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

### **A. Department of Business and Industry – Office of the Labor Commissioner**

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with a former employee Lupita Martinez to do apprenticeship compliance work for the Department of Business and Industry, Office of Labor Commissioner through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

### **B. Department of Conservation and Natural Resources – Division of Water Resources**

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Jon Benedict to complete review of the final hydrologic model for the Department of

Conservation and Natural Resources, Division of Water Resources through statewide contract #99SWC-NV21-7576 with Marathon Staffing Group, Inc.

**C. Department of Health and Human Services – Division of Public and Behavioral Health**

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Dr. Susan Loring to transfer knowledge and assist with evaluations for the Department of Health and Human Services, Division of Public and Behavioral Health through statewide contract #99SWC-NV20-5284 with Reliable Health Care Services of Southern Nevada, Inc.

**Governor:** We'll move on to agenda item number six, *Authorization to Contract with a Current and/or Former State Employee*.

**Clerk of the Board:** There are three requests under this agenda item. The first request is from the Department of Business and Industry, Office of the Labor Commissioner pursuant to NRS 333.705, subsection 1, the department requests authority to contract with former employee Lupita Martinez to do apprenticeship compliance work with Manpower.

The second request is from the Department of Conservation and Natural Resources, Division of Water Resources pursuant to NRS 333.705, subsection 1, the department requests authority to contract with former employee John Benedict, to complete review of the Final Hydrologic model through Marathon.

The final request is from the Department of Health and Human Services, Division of Public and Behavioral Health pursuant to NRS 333.705, subsection 1, the division requests authority to contract with former employee Dr. Susan Loring to transfer knowledge and assist with the valuations through Reliable Healthcare Services of Southern Nevada. Are there any questions on any of these items?

**Governor:** Do we have any questions?

**Secretary of State:** No questions.

**Governor:** If there are no questions, I'll entertain a motion.

**Secretary of State:** Motion to approve items 6.A-C.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

## **7. Request for Approval of Proposed State Administrative Manual Changes** (For possible action)

### **Governor's Finance Office – Budget Division**

Pursuant to NRS 353.040 the office requests modifications to the policies and procedures of the State Board of Examiners adopted and collected in the following chapters of the State Administrative Manual (SAM). This revision to SAM brings the SAM into alignment with current business practices, Nevada Administrative Code, and Nevada Revised Statutes.

- a. SAM Chapters 0107-3814

**Governor:** Move on to agenda item number seven, *Request for Approval of Proposed State Administrative Manual Changes*.

**Clerk of the Board:** Pursuant to NRS 353.040, the Governor's Finance Office, Budget Division requests modifications to the policies and procedures of the State Administrative Manual chapters 0107 through 3814. These changes were posted for review as required, and there were about 70 feedback forms received. Director of Administration, Joy Grimmer will present a highlight of the changes.

**Joy Grimmer:** Good morning, Board Members. Joy Grimmer, Director of the Department of Administration for the record. This was our best effort to modernize this document. Over the years small changes to the State Administrative Manual, Nevada Revised Statutes, and the Nevada Administrative Code did not carry throughout the document. Prior to the draft document being sent to the Governor's Office and the Board of Examiners, the Department of Administration conducted a peer review process with multiple departments, agencies, and stakeholders. I'll now go over a few of the significant changes in the document.

In section 210, removes one hundred percent of Continental United States rate and allows the Department head to determine and approve an appropriate rate for reimbursement when there's a host hotel for a conference or a special event has raised the GSA rate significantly.

Section 218 allows for gratuity for commercial transportation up to 20 percent and allows scanned copies of original receipts for reimbursement.

Section 305 consolidates various limits for competition on procurement of supplies, materials, equipment, and services.

Section 500 outlines current policies and procedures for various state insurance programs managed by the risk management division.

Section 1323 is a new section dealing with adding telematics in state owned vehicles.

Lastly, section 2630, I would like to suggest a modification to what was presented.



**Governor:** Are you sure you want to do that?

**Joy Grimmer:** Yes, please. To address the Board, the limiting of plants and decor was an effort to protect the assets that the State has recently purchased. This biennium we've made a large investment into building acquisitions, furniture replacement, and renovations of existing offices to provide a more productive and pleasant work environment for staff. These changes to SAM are an effort to limit holes in walls being left when employees move to other positions and damage caused by installing and removing items adhered to walls.

We did several tours of existing buildings. We observed damage to furniture and carpet and the presence of nats due to overwatering of plants. Our hope is these changes will lead to well-maintained offices for current and future employees.

For section 2630, subsection D, I would like to add the following: No live plants are permitted in any state-owned or leased building acquired during the current 2023 - 2025 biennium and going forward.

I would like to amend subsection E to state: Hanging of items on building walls is permitted only if the wall display will be permanent to the State or Department and the work is completed by Department of Administration, State Public Works Division, Buildings and Grounds. This applies to any state-owned or leased building acquired during the current 2023 - 2025 biennium and going forward.

Lastly, section 2652, allows for the purchase of appliances for the break room after consultation with Department of Administration, State Public Works Division, Buildings and Grounds. It prohibits toasters, ovens, and many refrigerators in state-owned and leased buildings when appliances have been provided by Department of Administration, State Public Works Division, Buildings and Grounds.

With that, I'll be happy to take any questions.

**Governor:** Do we have any questions of any Board Members of Ms. Grimmer?

**Attorney General:** Yes, question and maybe a couple comments. Specifically around 2630, I kind of anticipated that these were the reasons for the changes but frankly, I think it's probably a bit too onerous of a response to what I suspect is not too large of a problem. I'm certain you had certain issues where nats were there, and maybe some problems with holes in walls, but it seems to me that there's probably a less restrictive way of approaching this than to disallow folks who, as you've heard in public comment, who will be in these offices for several hours a week to make it feel a little more homely.

That said, I wonder what alternative we have as a Board, although, I'm thinking out loud here, she just amended that I guess we could amend it as well, right? If we were so inclined, we could strike the entirety of the proposed change to section 2630. I guess that's a question for the Board Counsel.

Does Board Counsel know the answer to that question?

**Greg Ott:** Deputy Attorney General Greg Ott. So, there is a requirement in state law under NRS 232.004 to post proposed modifications to the State Administrative Manual 30 days in advance. That's been done. Once the proposed is placed on the agenda, that provision does not restrict this Board from deviating from what has been proposed. So, the Board is free to make amendments so long as those amendments are not so substantial that they would fail to give the general public notice of what was going to go on. So, you can tinker around the edges, but I wouldn't wholly rewrite the SAM in this session.

**Attorney General:** I guess the bottom line is, if I wanted to excise proposed changes to section 2630, this Board could do that.

**Greg Ott:** That would be legal. Yes, you could do that. That's an acceptable motion.

**Attorney General:** Governor, before making a motion, I'd love to hear the thoughts from the Board Members on 2630 and whether there are any amendments that we could make that would address this because my office, I've received quite a lot of opposition to this particular amendment. We've heard public comment. We have 75 responses in writing addressing this. So, I think it's incumbent upon us to have some type of response to it.

**Governor:** I agree with you General. My recommendation would be that we approve the proposed SAM changes with the exception of that particular section pending further evaluation. Then, we could come forward again in a future meeting for approval or disapproval.

Then, I also have a question on one particular section. So, I'm seeking clarification from Ms. Grimmer before we make a motion.

**Attorney General:** Yes, sir. That makes a lot of sense to me. Whenever you're ready for the motion after you get clarification, I'd be happy to make it.

**Governor:** Secretary Aguilar?

**Secretary of State:** Yes. Works for me.

**Governor:** Ms. Grimmer, can you go to section 3610. I was reading through the different public comments that we asked employees to provide. This one was separate from 2630, obviously, but it has to do with first official policy and reading the description of the concern. Apparently, there is a conflict in the language as to current policy here. I can provide you the document if you want to look at it. And then maybe we need some clarification on that before we approve 3610 also.

**Joy Grimmer:** Do we have anyone here from our Purchasing Division that could assist me in addressing this?

**Clerk of the Board:** I don't see anyone, Joy. I'm sorry.

**Joy Grimmer:** Okay. I don't have the answer. I don't have the statement from the Purchasing Division.

**Governor:** So, we can put a stay on that particular section, additionally, until we can get an appropriate answer. General Ford, do you want to make a motion? The motion would be for approval of the proposed SAM changes with the exception of the proposed changes to sections 2630 and 3610.

**Attorney General:** Yes, sir, so moved. With the caveat that I, as a licensed attorney in Nevada, would receive a potential indirect accumulate benefit based on the change of section 2629 that allows for the payment of professional licenses. I'm just putting it out there.

**Governor:** Alright, we have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

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

**A. Office of the Military – Division of Emergency Management**

Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$306,483 from the Interim Finance Committee Contingency Account to cover costs associated with providing supplemental security and enhanced healthcare system availability to Clark County during the November 2024 Formula One race.

**B. Department of Veterans Services**

Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$503,938 from the Interim Finance Committee Contingency Account to cover rental expenses and emergency replacement costs of the Heating, Ventilation, and Air-Conditioning system at the Northern Nevada Veterans Home.

**Governor:** We'll move to agenda item number 8, *Request for a Recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account.*

**Clerk of the Board:** There are two requests under this agenda item. The first request is from the Office of Military, Division of Emergency Management. Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$306,483 from the Interim Finance Committee Contingency Account to cover costs associated with providing supplemental security and enhanced healthcare system availability to Clark County during the November 2024 Formula One race.

The second request is from the Department of Veterans Services. Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$503,938 from the Interim Finance Committee contingency account to cover rental expenses and emergency replacement costs of the heating, ventilation, and air conditioning system at the Northern Nevada State Veterans Home. Are there any questions these items?

**Governor:** Do we have any questions?

**Secretary of State:** No questions.

**Attorney General:** Move to approve.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

**9. Request for Approval to Pay a Stale Claim from the Stale Claims Account Pursuant to NRS 353.097** (For possible action)

**Department of Corrections**

Pursuant to NRS 353.097, subsection 4, the department requests approval to pay a total of \$428,471.42 from the Stale Claims account for a court-ordered settlement for claims from fiscal years 2019, 2020, 2021, 2022, and 2023.

**Governor:** We'll move on to agenda item number nine, *Request for Approval to Pay a Stale Claim from the Stale Claims Account Pursuant to NRS 353.097*.

**Clerk of the Board:** This request is from the Department of Corrections pursuant to NRS 353.097, subsection 4. The department requests approval to pay a total of \$428,471.42 from the Stale Claims Account for a court ordered settlement for claims from fiscal years 2019, 2020, 2021, 2022 and 2023. Are there any questions on this item?

**Governor:** Do we have any questions?

**Secretary of State:** No questions. Motion to approve.

**Governor:** We have a motion for approval on agenda item number 9. All those in favor, signify by saying aye. The motion passes unanimously.

## 10. Request for Approval of Sale or Lease of State Lands (For possible action)

### State Department of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS 321.335, subsection 2, whenever the State Land Registrar deems it to be in the best interests of the State of Nevada that any lands owned by the State and not used or set apart for public purposes be sold or leased, the State Land Registrar may, with the approval of the State Board of Examiners and the Interim Finance Committee, cause those lands to be sold or leased.

The State Land Registrar has determined the following state-owned properties are no longer needed for a public purpose:

- A. Grant Sawyer State Office Building  
555 East Washington Avenue, Las Vegas
- B. Former Fire Marshal Office  
2855 South Jones Boulevard, Las Vegas
- C. Former NDF Residence & Fire Station  
161 Blue Crest Drive, Spring Creek

**Governor:** Moving on to agenda item number 10, *Request for Approval of Sale or Lease of State Lands*.

**Clerk of the Board:** Pursuant to NRS 321.335, subsection 2, whenever the State Land Registrar deems it to be in the best interest of the State of Nevada that any lands owned by the State and not used or set apart for public purposes be sold or leased, the State Land Registrar may, with the approval of the State Board of Examiners and the Interim Finance Committee, cause those lands to be sold or leased. The State Land Registrar has determined the following state-owned properties are no longer needed for a public purpose. The first one is Grant Sawyer State Office Building located at 555 East Washington Avenue in Las Vegas, Nevada. The second one is the former Fire Marshal Office located at 2855 South Jones Boulevard in Las Vegas. The last one is a former Nevada Division of Forestry Residence and Fire Station located at 161 Blue Crest Drive, Spring Creek, Nevada. Are there any questions on this item?

**Governor:** My understanding that the residents and the station and the offices have been removed from the property so, we're not making a decision on buildings, it's just actually the land. Is that correct? This would be specific to B and C.

**Charlie Donohue:** Good morning, Governor Lombardo and Members of the Board. Charlie Donohue – I serve as the State Land Registrar. You're correct. The properties in Elko and on Jones Avenue down in Las Vegas are vacant.

**Governor:** Then, 10.A, the Grant Sawyer State Office Building, it's considered to be completely vacated now, is that correct?

**Charlie Donohue:** That's my understanding.

**Governor:** Alright, with that information, I'll make a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously. Thank you, Charlie.

## **11. Approval of Proposed Leases** (For possible action)

**Governor:** We'll move on to agenda item number 11, *Approval of Proposed Leases*.

**Clerk of the Board:** There are 14 leases under agenda item number 11 for approval by the Board today. Do you have any questions on any of these leases?

**Governor:** We have any questions on any leases? Hearing none, I'll take a motion.

**Attorney General:** Move approval.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

## **12. Approval of Proposed Contracts** (For possible action)

**Governor:** We'll move on to Agenda item number 12, *Approval of Proposed Contracts*.

**Clerk of the Board:** There are 67 contracts for approval by the Board today. Please note that contract number 64 is retroactive to July 1st and not upon BOE approval. Are there any questions on any of these contracts?

**Secretary of State:** No questions. Motion to approve with the amendment to contract number 64 applied retroactively.

**Governor:** We have a motion for approval. All those in favor, signify by saying aye. The motion passes unanimously.

## **13. Approval of Proposed Master Service Agreements** (For possible action)

**Governor:** We will move on to agenda item number 13, *Approval of Proposed Master Service Agreements*.

**Clerk of the Board:** There are 21 Master Service Agreements for approval by the Board today. Are there any questions on these items?

**Governor:** Do we have any questions of any Board Members? No questions. I'll entertain motion for approval.

**Secretary of State:** Motion to approve.

**Governor:** We have a motion. All those in favor, signify by saying aye. The motion is approved unanimously.

## **14. 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 July 17, 2024 through September 4, 2024.

**Governor:** We'll move on to agenda item number 14, Information Item – Clerk of the Board Contracts.

**Clerk of the Board:** There are 119 contracts over \$10,000 and under the \$100,000 threshold that were approved by the Clerk of the Board between July 17, 2024 through September 4, 2024. This item is informational. Are there any questions on these items?

**Governor:** Are there any questions from any Board Members?

**Secretary of State:** No questions.

**Attorney General:** No questions.

**Governor:** There are no questions.

## **15. Information Item Reports**

### **A. Governor's Finance Office – Budget Division**

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of September 11, 2024 for FY 2024. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

### **B. State Department of Conservation and Natural Resources – Division of State Lands – Fiscal Year 2024, 4th 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 report covers the period of April 1, 2024 through June 30, 2024.

### **C. Statewide Quarterly Overtime Report – Fiscal Year 2024, 4th Quarter**

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. This report covers the period of April 1, 2024 through June 30, 2024.

**Governor:** We'll move on to Agenda item number 15, *Information Item Reports*.

**Clerk of the Board:** There are three reports under agenda item number 15. The first report, is from the 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, and the IFC Contingency Fund as of September 11, 2024 for fiscal year 2024.

The following is the available balance for each account prior to any projected outstanding claims. Tort Claim Fund is \$2,638.79. Statutory Contingency Account is \$2,563,338.57. Stale Claims Account \$3,347,420.10. Emergency Account is \$500,000. Disaster Relief Account is \$12,512,757.35. IFC Contingency Unrestricted General Fund is \$13,174,826.04. The IFC Contingency Unrestricted Highway Fund is \$1,184,685.35. IFC Contingency Restricted General Fund is \$126,569,722. IFC Contingency Restricted Highway Fund is \$19,142,217. The Extradition Coordinator Budget Account is \$59,916.08. Are there any questions on this report?

**Governor:** Yes, on the Disaster Relief Account, knowing what you know out of the Governor's Finance Office reference to the Davis Fire, are we well positioned with the amount available in that account?

**Clerk of the Board:** Yes, sir, we're well positioned. I can't say we have an abundance because we don't, but we're well positioned.

**Governor:** Well, thank you for that vote of confidence. We'll move on to the next report.

**Clerk of the Board:** The second report is from the State Department of Conservation and Natural Resources, Division of State Lands for fiscal year 2024, fourth 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 interest in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. This report covers the period of April 1, 2024 through June 30, 2024. Are there any questions on this report?

**Secretary of State:** No questions.



**Attorney General:** No.

**Governor:** No questions. We'll move on to the next report.

**Clerk of the Board:** The third report is the Statewide Quarterly Overtime Report, Fiscal Year 2024, 4th Quarter. Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners their report and the analysis and the analysis of the Budget Division regarding the report. This report covers the period of April 1, 2024 through June 30, 2024. Are there any questions on this report?

**Governor:** Yes. Ms. Stephenson, in reviewing all these charts going through the quarters, do you have any opinion on whether the filling of the vacancies has had a direct effect on the overtime cost?

**Clerk of the Board:** It's somewhat hard to tell because the overtime cost is actually more expensive with the cost-of-living adjustments so, looking at hours and not actual costs, we can correlate the vacancies are truly helping the overtime.

**Governor:** It is tracked by dollars and hours and it looks like each one of those different departments are trending in the right direction. The only one that isn't is the Department of Transportation and I think that's directly related to the number of vacancies.

Are there any questions or concerns or comments from any Board Members on this overtime report?

**Attorney General:** None here.

**Governor:** Hearing none, we will close this item.

**16. 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 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 904 000 369#. 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:** Item 16, *Public Comment*. This is the second opportunity for public comment. Do you have any public comment there in Carson City?

**Clerk of the Board:** No, sir.

**Governor:** Do we have any here in Las Vegas? Do we have anybody on the phone?

**Clerk of the Board:** No, sir.

**Governor:** Hearing none and seeing none, we will close the second opportunity for public comment.

## **17. Adjournment** (For possible action)

**Governor:** Move for adjournment. All those in favor, signify by saying aye. The motion passes. Thank you everybody.

## ATTACHMENT A

**Gennady Stolyarov, II:** Thank you very much. My name is Gennady Stolyarov, II. I'm a State employee, but here on my own time in a personal capacity to reflect the thoughts of what I know to be many state employees' strong opposition to Item E of the proposed changes to the State Administrative Manual in Section 2630 Decorating Offices, which would prohibit non-permanent wall decorations or decorations not installed by buildings and grounds.

These changes are unnecessary, unjustified and would create office environments that are drab, generic, and unenjoyable to work in. They would be a severe detriment to State employee morale and would act to reduce job satisfaction and increase employee turnover, contrary to the goals of this administration, to reduce turnover and lower vacancy rates. Especially given the recent mandates for State employees to return to office settings, many of these employees will be spending 40 hours per week or 23.8% of the best years of their lives in the office without the ability to customize their work environments, to beautify them, and to simultaneously express pride in the great State of Nevada like we do here through imagery and other decorations on the wall.

Many State employees will have suboptimal work experiences. They will be less motivated to do their best work and less productive than they would've been in environments where they or at least their agencies have more discretion about how to configure their surroundings.

Furthermore, there is no evidence that there's any problem this proposed Item E would solve. The vast majority of wall hangings in State offices are currently in good professional taste, and most of them display some aspects of State of Nevada history, notable places and symbolism. Individual agencies currently have the ability to ensure that any decorations brought in by employees are appropriate to an office setting. There is no epidemic of inappropriate office decorations in the State of Nevada.

Indeed, the ability to decorate offices has been an important way to soften many State employee's dissatisfaction with recent return to office mandates, and thus to reduce turnover. While this administration has sought to attract and retain State employees through salary increases, and this is indeed a necessary and salutary approach, money is not the only motivator and sometimes is not even the primary reason why individuals choose to come to and stay at particular jobs. The quality of the work environment and the day-to-day work experience are often even more important. Nor is the quality of the work environment determined by utilitarian or functional considerations alone. Aesthetics are capable of influencing a person's ability and willingness to work on a deeper and more profound level.

The employees of the State of Nevada are dedicated professionals who strive every day to do their best to assist the consumers and businesses of this state. It is fitting to afford a bare modicum of respect to these professionals by allowing them their historic prerogative to customize their immediate work environments and make the day-to-day experience of doing their jobs just a little bit more pleasant. And this is not too much to ask. It is part of the organizational culture and almost every public and private employer in the country. And I urge the administration to reject Item E of section 2630 and simply allow State employees to do what they've been able to do all along, which is to somewhat customize their immediate office surroundings. Thank you very much.

## ATTACHMENT B

**John Dekoekkoek:** My name is John Dekoekkoek. I'm a State employee and I have taken annual leave today so I could be here to provide public comments regarding some of the proposed changes to the State Administrative Manual.

Section 1028 of energy conservation located on page 76 of the proposed changes removes the requirements for temperature ranges in state owned and leased buildings and replaces them with "optimum energy, efficiency, and comfort." There are several reasons why I don't believe this change is in the best interest of the state. Who is going to define what 'comfort' is? It is almost certainty that comfort will be defined very differently between everyone involved. Many, if not all, of state leased property leases include the temperature range language in the BOE approved lease documents. This helps prevent building owners from subjecting state employees to extreme temperature ranges. It also provides remedies for the state if they're not able to maintain these temperatures. If this change is approved, the state leasing documents that include these temperature ranges would no longer align with state policy.

Second, section 2630, again, talking about decorating offices located on page 147 of the proposed changes. Letter D of this section will prohibit "live plants in any state owned or leased building." We all know plants use carbon dioxide and produce oxygen so they actually benefit the environment, including the work environment. There are multiple studies that show plants can help reduce stress, create a calming and pleasing environment, and therefore, increase productivity.

Letter E of this section will prohibit hanging items on walls only if it is permanent and property of the State or department and the work must be done by Buildings and Grounds. Based on the way this policy change is written, if employees have personally owned artwork, pictures of family and friends, a map of Nevada, or even a calendar, it will have to be removed.

State employees spend eight hours per day in an office environment. Many of us work more than eight hours, depending on the time of year, budget session, or legislative session. Some of us spend more time at work than with our families and friends. Many employees have some form of family pictures or artwork made by our children and grandchildren. These items help remind us of why we do what we do for each other and for the State of Nevada.

The proposed changes to 2630 appear to sterilize and depersonalize the workplace. The state workers that I have discussed these changes with believe, as I do, that this would likely have a negative impact on employee morale.

I know this public comment has basically been describing the problems with the proposed changes, and I did provide public possible alternatives in the feedback form on the GFO website. There just isn't enough time to describe those alternatives in three minutes of public comment. I'm asking the Board of Examiners to consider staff concerns regarding the proposed changes to the State Administrative Manual and potentially postpone decisions to a future meeting until these policies can be revised and/or amended to accurately reflect needs of the state in conjunction with supporting an environment state employees deserve to work in. Thank you.

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: September 27, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Dustin Speed, Executive Branch Budget Officer *DS*  
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 AGRICULTURE**

Agenda Item Write-up:

Pursuant to NRS 334.010, the department requests approval to purchase one specialty truck and trailer for a total amount not to exceed \$332,495.

Additional Information:

The division is requesting to purchase one new vehicle. Funding is available through work program #C69241.

Statutory Authority:

NRS 334.010

REVIEWED: *DS*

ACTION ITEM: \_\_\_\_\_

**Department of Agriculture**  
Division of Food and Nutrition



**Memo**

To: Dustin Speed, Executive Branch Budget Officer I  
From: Cathy Balcon, Administrator, Administrative Services Division  
CC: Douglas Farris, Deputy Director  
Patricia Hoppe, Administrator, Division of Food and Nutrition  
Brittany Mally, Deputy Administrator, Division of Food and Nutrition  
Date: August 16, 2024  
Subject: New Vehicles Request for Budget Account 2691

Attached for your review and approval is a Board of Examiners Request for Approval to Purchase a State Vehicle form. This is a new specialty vehicle – semi truck and trailer that was approved by the IFC during the August 15, 2024 meeting.

The Department is requesting the purchase of the following specialty vehicle:

- One (1) 2025 Freightliner CA126SLP  
One (1) VS2RA Tractor trailer with lift gate

The purchase of the new specialty vehicle will ensure that the agency is able to successfully and timely complete all the necessary food deliveries.

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

|   |   |
|---|---|
| <b>Agency Name:</b> Department of Agriculture   | <b>Budget Account #:</b> 2691   |
| <b>Contact Name:</b> Patricia Hoppe   | <b>Telephone Number:</b><br>(702) 688-4562  |
| 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:<br><b>Number of vehicles requested:</b> 1 <b>Amount of the request:</b> \$332,495<br><b>Is the requested vehicle(s) new or used:</b> New<br><b>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:</b><br>Specialty Vehicle - Semi Truck and Trailer<br><b>Mission of the requested vehicle(s):</b><br>This vehicle will support Food and Nutrition throughout the State.   |   |
| <b>Were funds legislatively approved for the request?</b><br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  | <b>If yes, please provide the decision unit number:</b><br><br><b>If no, please explain how the vehicles will be funded?</b><br>WP C69241   |
| <b>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</b><br><br><input checked="" type="checkbox"/> Addition(s) <input type="checkbox"/> Replacement(s)   |   |
| <b>Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain.</b><br><br>Yes  |   |
| <b>Please Complete for Replacement Vehicles Only:</b><br>(For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)<br><br><u><b>Current Vehicle Information:</b></u><br>Vehicle #1 Model Year:<br>Odometer Reading:<br>Type of Vehicle:<br><br><hr/> Vehicle #2 Model Year:<br>Odometer Reading:<br>Type of Vehicle:<br><br><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.<br><br><br><br><br><br><br><br><br><br>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. |
| <b>APPOINTING AUTHORITY APPROVAL:</b><br><div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="text-align: center;">             Digitally signed by Douglas Farris<br/> <b>Douglas Farris</b><br/> <small>Date: 2024.10.23 10:20:22 -07'00'</small> </div> <div style="text-align: center;">             Deputy Director<br/>             Title           </div> <div style="text-align: center;">             10/23/2024<br/>             Date           </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div>Agency Appointing Authority</div> <div>Title</div> <div>Date</div> </div> |   |
| <b>BOARD OF EXAMINERS' APPROVAL:</b><br><br><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase<br><br><div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>Board of Examiners</div> <div>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.

|  |                            |                  |   |
|--|----------------------------|------------------|---|
| <b>Vehicle Item No.,<br/>Make, Model &amp; No.:</b>        | 2025 Freightliner CA126SLP |                  |   |
| <b>Dealer Name:</b>  | Velocity Truck Centers     |                  |   |
| <b>Delivery Location:</b>                                  | Sparks, NV                 |                  |   |
| <b>Vehicle Colors:</b>                                     | Exterior: White            | Interior: Black  | <input checked="" type="checkbox"/> Cloth<br><input type="checkbox"/> Vinyl |
|  | <b>Quantity</b>            | <b>Unit Cost</b> | <b>Total Cost</b>   |
| BASE PRICE<br>(Reno, Carson City or Las Vegas delivery)    | 1                          | \$ 185,510       | \$185,510   |
| SPECIFY OPTIONS: (description)                             |                            |                  | \$  |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            | \$               |   |
|  |                            |                  |   |
| DELIVERY COST:<br>(If other than Reno\Carson or Las Vegas) |                            | \$               | \$  |
| Total purchase price with options                          |                            |                  | \$185,510   |
| DMV Title and DRS Fee's                                    | 1                          | \$28.25          | \$28.25   |
| <b>GRAND TOTAL:</b>  |                            |                  | <b>\$185,538.25</b>   |



|  |   |
|--|---|
| <b>Registered Owner:</b>   | Agency Name & Address:<br>NV Department of Agriculture<br>405 S 21 <sup>st</sup> Street<br>Sparks, NV 89431 |
| <b>Legal Owner:</b>  | Agency Name & Address: SAME   |
| <b>County Vehicle Based In:</b>  | Washoe  |
| <b>Name &amp; Phone of Person to contact when vehicle is ready for delivery:</b> | Patricia Hoppe<br>(702) 688-4562<br>pxhoppe@agri.nv.gov   |

**Prepared for:**  
Brad Bazil  
NEVADA AGRICULTURE DEPT  
OF  
405 S 21ST ST

SPARKS, NV 89431  
Phone: (775) 687-7101

**Prepared by:**  
James Pescitelli  
VELOCITY TRUCK CENTERS  
1550 S MCCARRAN BLVD  
SPARKS, NV 89431  
Phone: 775-690-5401

## Q U O T A T I O N

### CASCADIA 126 INCH SLEEPER CAB

SET BACK AXLE - TRACTOR  
DETROIT DD15 GEN 5 HIGH POWER 14.8L 505 HP @  
1625 RPM, 1900 GOV RPM, 1650 LB-FT @ 975  
RPM  
DT12-1650-OH ON-HIGHWAY 12-SPEED OVERDRIVE  
AUTOMATED MANUAL TRANSMISSION  
CUMMINS-MERITOR MT-40-14X 40,000# R-SERIES  
TANDEM REAR AXLE  
  
AIRLINER 40,000# REAR SUSPENSION  
DETROIT DA-F-12.0-3 12,000# FF1 71.5 KPI/3.74 DROP  
SINGLE FRONT AXLE

12,500# TAPERLEAF FRONT SUSPENSION  
126 INCH BBC ALUMINUM CONVENTIONAL CAB  
48 INCH XT SLEEPER CAB  
5775MM (227 INCH) WHEELBASE  
FONTAINE NO-SLACK II 6000 SERIES 6LWB 16.0 INCH  
AIR SLIDE FIFTH WHEEL - 2 INCH SLIDE  
INCREMENTS  
7.0MM X 88.0MM X 279.0MM STEEL FRAME  
(0.28X3.46X10.98 INCH) 120 KSI  
1350MM (53 INCH) REAR FRAME OVERHANG

|                                  |                         |           | PER UNIT       |           | TOTAL          |
|----------------------------------|-------------------------|-----------|----------------|-----------|----------------|
| VEHICLE PRICE                    | TOTAL # OF UNITS (1)    | \$        | 185,510        | \$        | 185,510        |
| EXTENDED WARRANTY                |                         | \$        | 0              | \$        | 0              |
| DEALER INSTALLED OPTIONS         |                         | \$        | 0              | \$        | 0              |
| <b>CUSTOMER PRICE BEFORE TAX</b> |                         | <b>\$</b> | <b>185,510</b> | <b>\$</b> | <b>185,510</b> |
| <b>TAXES AND FEES</b>            |                         |           |                |           |                |
| TAXES AND FEES                   |                         | \$        | 0              | \$        | 0              |
| OTHER CHARGES                    |                         | \$        | 0              | \$        | 0              |
| <b>TRADE-IN</b>                  |                         |           |                |           |                |
| <b>TRADE-IN ALLOWANCE</b>        |                         | \$        | (0)            | \$        | (0)            |
| <b>BALANCE DUE</b>               | <b>(LOCAL CURRENCY)</b> | <b>\$</b> | <b>185,510</b> | <b>\$</b> | <b>185,510</b> |

#### COMMENTS:

Projected delivery 2024. QUOTE VALID 30 DAYS.

#### APPROVAL:

Please indicate your acceptance of this quotation by signing below:

Customer: X \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Daimler Truck Financial**

Financing that works for you.

See your local dealer for a competitive quote from Daimler Truck Financial, or contact us at [Information@dtfoffers.com](mailto:Information@dtfoffers.com).

Daimler Truck Financial offers a variety of finance, lease and insurance solutions to fit your business needs. For more information about our products and services, visit our website at [www.daimler-truckfinancial.com](http://www.daimler-truckfinancial.com).



### 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.

|  |                                      |                  |  |
|--|--------------------------------------|------------------|--|
| <b>Vehicle Item No.,<br/>Make, Model &amp; No.:</b>        | VS2RA Tractor trailer with lift gate |                  |  |
| <b>Dealer Name:</b>  | Utility Trailer Sales of Utah        |                  |  |
| <b>Delivery Location:</b>                                  | Sparks, NV                           |                  |  |
| <b>Vehicle Colors:</b>                                     | Exterior:                            | Interior: N/A    | <input type="checkbox"/> Cloth<br><input type="checkbox"/> Vinyl |
|  | <b>Quantity</b>                      | <b>Unit Cost</b> | <b>Total Cost</b>  |
| BASE PRICE<br>(Reno, Carson City or Las Vegas delivery)    | 1                                    | \$ 146,928       | \$146,928  |
| SPECIFY OPTIONS: (description)                             |                                      |                  | \$   |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      | \$               |  |
|  |                                      |                  |  |
| DELIVERY COST:<br>(If other than Reno\Carson or Las Vegas) |                                      | \$               | \$   |
| Total purchase price with options                          |                                      |                  | \$146,928  |
| DMV Title and DRS Fee's                                    | 1                                    | \$28.25          | \$28.25  |
| <b>GRAND TOTAL:</b>  |                                      |                  | <b>\$146,956.25</b>  |

|  |   |
|--|---|
| <b>Registered Owner:</b>   | Agency Name & Address:<br>NV Department of Agriculture<br>405 S 21 <sup>st</sup> Street<br>Sparks, NV 89431 |
| <b>Legal Owner:</b>  | Agency Name & Address: SAME   |
| <b>County Vehicle Based In:</b>  | Washoe  |
| <b>Name &amp; Phone of Person to contact when vehicle is ready for delivery:</b> | Patricia Hoppe<br>(702) 688-4562<br>pxhoppe@agri.nv.gov   |



*The First Name In Trailers*

## **Utility Trailer Sales of Utah**

**John Brodie**  
4970 W 2100 S  
Salt Lake City, UT 84120  
Voice (801) 301-3655

Trailer Quote Prepared For

***Nevada State Department of Agriculture***  
***2250 Barnett Way***  
***Reno, NV 89512***

*Mr. Bradley Brazil*  
*1 - VS2RA*  
*June 3, 2024*

**Bradley, please review the below specifications and let me know if anything needs to be added or changed.**

---

**Specifications (☞ = Option to Base Model)**

**1-Model & Payload Capacity**

|                             |   |
|-----------------------------|---|
| MODEL                       | VS2RA   |
| PAYLOAD CAPACITY            | 55,000 LBS EVENLY DISTRIBUTED PAYLOAD CAPACITY  |
| GROSS VEHICLE WEIGHT RATING | 65,000 LBS GVWR   |
| GREENHOUSE GAS COMPLIANCE   | THIS TRAILER IS NOT UTMG GHG2 CERTIFIED, GHG2 CERTIFICATION MAY REQUIRE ADDL OPTIONS\$COSTS |
| FOAM COMPOSITION            | TRAILER CONTAINS NON-HFC FOAM; MAY BE SOLD OR USED IN STATE W HFC RESTRICTION               |
| DQS UPDATE NUMBER           | DQS UPDATE #186 (5/01/24)   |

**2-Dimensions**

|                |   |
|----------------|---|
| LENGTH         | 53'0" OVERALL LENGTH                                      |
| OVERALL HEIGHT | 13'6" O/A HEIGHT ON 46-1/2" FIFTH HT FOR 107-1/8" POST HT |
| WIDTH          | 102-3/8" OVERALL WIDTH                                    |

**3-Deck**

|           |               |
|-----------|---------------|
| DECK TYPE | STRAIGHT DECK |
|-----------|---------------|

**4-Front Subframe**

|                  |  |
|------------------|--|
| FRONT SUBFRAME   | 4-1/4" DEEP BOX BEAM DESIGN FRONT SUBFRAME                 |
| APPROACH PLATE   | 9GA HIGH STRENGTH STEEL FULL WIDTH APPROACH PLATE          |
| KINGPIN PLATE    | 3GA HIGH STRENGTH STEEL FULL WIDTH KINGPIN PLATE           |
| KINGPIN TYPE     | AAR HARDNESS CRUCIFORM KINGPIN                             |
| KINGPIN LOCATION | 36" KINGPIN LOCATION                                       |
| CONDUIT          | (1) CONDUIT THROUGH FRONT SUB 30-1/2" FROM C/L ON ROADSIDE |
| COVER PLATE      | EXTRUDED ALUM COVER ON FRONT FACE OF APPROACH PLATE        |

**5-Support Legs**

|                            |   |
|----------------------------|---|
| SUPPORT LEG LOCATION       | SUPPORT LEG LOCATION OF 105" FROM C/L OF KINGPIN                            |
| SUPPORT LEG CRANK LOCATION | ROADSIDE SUPPORT LEG CRANK LOCATION   |
| SUPPORT LEG BRACING        | BOLT ON SUPPORT LEG X-BRACING W/7GA 3-1/4" DEEP HIGH STRENGTH STEEL CHANNEL |

*SUPPORT LEGS*

JOIST MODEL A401 ENHANCED 50,000 LBS CAPACITY SUPPORT LEGS WITH 10" X 10" CUSHION FOOT

**6-Frame, Rails & Crossmembers**

*BOTTOM RAILS*

11" DEEP HEAVY DUTY EXTRU ALUM BOTTOM RAILS, TAPERED FRT & REAR

*CROSSMEMBERS FRONT SUB TO LEGS*

4" ALUM I BEAM CMEMS W/(4) RIVET ENDCLIPS ON 12" C/L FRONT SUB TO SUPPORT LEGS

*CROSSMEMBERS OVER SUPPORT LEGS*

(5) 4" STEEL I BEAM CMEMS W/(4) RIVET ENDCLIPS ON 12" C/L OVER SUPPORT LEGS

*CROSSMEMBERS LEGS TO REAR SUB*

5-1/2" ALUM I SHAPE CMEMS W/(4) RIVET ENDCLIPS ON 12" C/L SUPPORT LEGS TO REAR SUB

*CROSSMEMBERS OVER REAR SUBFRAME*

4" STEEL I BEAM CMEMS W/(4) RIVET ENDCLIPS ON 12" C/L W/STD REINF OF (1) ADDL CMEM IN REAR 34"

**7-Rear Subframe**

*HORIZONTAL DOCK BUMPER*

BASE SPEC: 7"HRZ BMPR W/ 1/4" REINF PLATE & 2"ADDL DOCK LOCK CLEARANCE X11"LG @ C/L OF BUMPER

*RUBBER DOCK BUMPERS*

(1) PAIR 1/2" PROUD RUBBER DOCK BUMPERS

*VERTICAL & HORIZONTAL DOCK BUMPER*

BASE SPEC: DOT VERT W/NONSLIP 7" HORIZONTAL 22" MAX GROUND CLRN; MEETS IIHS-30% OFFSET TEST

**8-Suspension/Axles/Actuation**

*SLIDER SUSPENSION LOCATION*

70" REAR SUSPENSION LOCATION AND 166" FORWARD SUSPENSION LOCATION FOR 96" OF SLDR TRAVEL

*OIL SEALS*

CONMET PREMIUM OIL SEALS (INCL W/ CONMET PRESET+ WHEEL END SYSTEM)

*AIR BRAKE CHAMBERS*

BENDIX ENDURASURE 3030 AIR BRAKE CHAMBERS

*AIR ACTUATION*

ONE TANK AIR ACTUATION SYSTEM W/SPRING BRAKES

*SLACK ADJUSTERS*

BENDIX VERSAJUST AUTOMATIC SLACK ADJUSTERS FOR USE W/BENDIX ENDURASURE OR TSE BRAKE CHAMBERS

*AIR RIDE DUMP VALVES*

HENDRICKSON AUTOMATIC DUMP VALVE

*BRAKE LINING STYLE*

HENDRICKSON HXS BRAKE LINING STYLE FOR USE W/ INTRAAX

*AXLE SPINDLE NUTS*

CONMET SPINDLE NUT (INCL. W/ CONMET PRESET+ WHEEL END SYSTEM)

*HUB PILOTED SYS W/OUTBOARD DRUMS FOR 16-1/2" X 7" BRAKES*

10 STUD HUB PILOTED SYS W/OUTBRD CAST DRUMS W/16-1/2"X 7"BRKS(STD W/CONMET PRESET+WHEEL END SYS)

*ANTILOCK BRAKE SYSTEMS (ABS)*

BENDIX TABS-8 ADVANCED W/ROLL STABILITY 2S/1M ABS

*WHEEL BEARING LUBRICATION*

FACTORY CHOICE 80W-90 OIL

|   |   |
|---|---|
| <i>AXLE MANUFACTURER</i>                                    | HENDRICKSON "VENTED" AXLES  |
| <i>AXLE SPINDLE TYPE</i>                                    | N-SPINDLE TYPE (STANDARD WITH CONMET PRESET+ WHEEL END SYSTEM)                                  |
| <i>WHEEL BEARINGS (CONES) AND RACES (CUPS) MANUFACTURER</i> | CONMET BEARINGS (INCL W/ CONMET PRESET+ WHEEL END SYSTEM)                                       |
| <i>HENDRICKSON AIRRIDE SYSTEMS WITH INTEGRAL AXLES</i>      | BASE SPEC:HEND ULTRAA-K AIRRIDE/ SLDR SYS,INCLS 49" AXL SPRD,HD SLDR & ZERO MAINT DAMPING (ZMD) |
| <i>SLIDER PIN RELEASE MECHANISM</i>                         | HENDRICKSON QUIK DRAW AIR OPERATED SLIDER REPOSITIONING SYSTEM                                  |
| <i>CONMET WHEEL END SYSTEMS</i>                             | BASE SPEC:CONMET PRESET+IRON HUB SYSTEM,INCL:CONMET PREMIUM SEAL,BEARING,SPACER &SPINDLE NUT    |

#### **9-Front Wall**

|   |  |
|---|--|
| <i>FRONT CORNER POST</i>                                  | BASE SPEC: .080 EXTRUDED ALUM 4-3/4" RADIUS FRONT CORNER POST WITHOUT INSERT RECEIVERS             |
| <i>FRONT WALL POSTS</i>                                   | 1" "J" EXTRU ALUM FRT WALL POST W(2) ADDL 3-1/4" DEEP STEEL REEFER UNIT SUPPORT POSTS              |
| <i>FRONT PANELS</i>                                       | .040 ALUM FRONT PANELS   |
| <i>ELECTRICAL NOSEBOX</i>                                 | ➡ UTM MULTI-FUNCT ZINC RECEPT/BOX W/BRAKE ACT RELAY;DUAL CIRCUIT; 60MIN TIMER;SWITCH;INDICATOR LGT |
| <i>REEFER UNIT AIR RETURN BULKHEADS</i>                   | ➡ RETURN AIR BULKHEAD INSTALLED  |
| <i>REEFER UNIT INSTALLATION</i>                           | ➡ THERMO KING PRECEDENT S-700-50 230 AMP REEFER UNIT INSTALLED                                     |
| <i>REFRIGERATION UNIT ACCESSORIES</i>                     | ➡ THERMO KING STANDARD STATUS LIGHT  |
| <i>REFRIGERATION UNIT ACCESSORIES</i>                     | ➡ FG RE-FLEX MOVABLE BULKHEAD WITH TWO TEMP FAN KIT  |
| <i>GLADHANDS AND RECEPTACLE</i>                           | GLADHANDS (W/SCREEN) AND RECEPTACLE MOUNTED ON AN ALUM EXTRU OFFSET TO R/S 30"                     |
| <i>AIR CHUTE</i>  | ➡ NO AIR CHUTE   |
| <i>REFRIGERATION UNIT FUEL TANK INSTALLATION</i>          | ➡ 50 GALLON ALUMINUM FUEL TANK INSTALLED   |
| <i>PREP FOR THERMO KING FRONTMOUNT REFRIGERATION UNIT</i> | ➡ PREP FOR TK PRECDNT S750I SINGLE TEMP 460V 30AMP 3 PHASE FRT MNT REEFER UNIT W/ELECTRIC STANDBY  |
| <i>PLUG TO REAR FOR HIGH VOLTAGE REEFER UNITS</i>         | ➡ INST HBL430B7W PLUG/CABLE-30AMP/ 480V/3PHASE SHORE PWR@RR RS CRNR GUSSET (TK HIGH VOLT REEFER)   |
| <i>PALLET STOPS AT FRONT WALL</i>                         | ➡ (6) H.D. ALUM PALLET STOPS 6" HIGH W/RUBBER BUMPER INSERTS                                       |



REFRIGERATION UNIT  
OPENING COVER

SHEET METAL COVER (INCLS SEALANT FULL PERIMETER OF  
OPENING)

**10-Side Walls**

SIDE PANELS

.040 ALUM FLAT SIDE PANELS

SIDE POSTS

1" "J" SHAPE EXTRU ALUM SIDE POST W/16" MAX C/L FROM FRT TO  
REAR OF SUPT LEGS W/24" C/L LEGS TO REAR

**11-Roof**

TOP RAILS

6-3/8" HEAVY DUTY EXTRUDED ALUM TOP RAILS

ROOF SKIN

.025 ONE PIECE ALUM COIL ROOF SKIN

ROOF BOWS

1" EXTRU ALUM "J" SHAPED ROOF BOWS ON 48" C/L

**12-Rear Doors**

REAR CASE & BUCKPLATE  
MATERIAL

☞ \*\*NOTE\*\* SST Rear Door Case for Roll-up Door

REAR DOOR ROLLUP TYPE

☞ TODCO 2-1/2" "TODCOLD" INSULATED ROLL-UP DOOR W/ PPW  
FIBERGLASS FACE

INSTALL REAR LIFT GATE

☞ INSTALL CUSTOMER FURNISHED MAXON BMR WELD-ON LIFTGATE  
WITH HEADER KIT FOR USE WITH PREP OPTION

INSTALL REAR LIFT GATE

☞ FACTORY TO INSTALL MAXON COLUMN LIFT GATE PER ATTACHED  
SPECIFICATIONS

INSTALL REAR LIFT GATE

☞ LIFTGATE SPECIFICATIONS PER MAXON QUOTE # 75199

REAR GUSSETS

ENHANCED REAR CORNER GUSSET DESIGN FOR IMPROVED  
BOTTOM RAIL STRENGTH AT REAR OF TRAILER

PREP FOR REAR LIFT GATE

☞ PREP FOR MAXON BMR (BOLT-ON OR WELD-ON) LIFTGATE INCL  
LOWERED BOLT-ON S/T/T LGTS FOR 7" BUMPER

REAR LIFT GATE ACCESSORIES

☞ (2) DEEP CYCLE BATTERIES FOR LIFTGATE

ROLL UP DOOR TRACK GUARD

☞ EXTRUDED ALUMINUM TRACK GUARD FOR ROLL UP DOOR

**13-Side Door**

SIDE DOOR

☞ SIDE DOOR TYPE "E" AT 12"  
REQUIRED INFORMATION:  
Must specify R/S or C/S

>> Locate side door on C/S

SIDE DOOR STEP &  
GRABHANDLE

☞ MILD STEEL RETRACTING SIDE DOOR STEP W/EXPANDED METAL  
ON STEP  
REQUIRED INFORMATION:

If there is more than (1) side door on this order, please specify which  
side door gets this step/grabhandle

>>

*GRAB HANDLE*

- (1) 36" VERTICAL BOLT-ON CHROME PLATED GRABHANDLE AT SIDE DOOR ON THE LOCK ROD SIDE

**14-Floor**

*FLOOR TYPE*

- 1-3/8" NOM HD EXTRU ALUM HIGH WEAR DRY FRT FLOOR KNURLED

*FLOOR TURN UP*

10" HIGH 3/16" HEAVY DUTY EXTRU ALUM NONTAPERED W/B INTEGRAL W/FLOOR (INCLUDES REINFORCING)

*TROUGHS*

- **\*\*NOTE\*\*** EXTRU ALUM TROUGH AT FRONT ONLY

*DRAINS*

(2) DRAINS FRONT AND (2) REAR

*REAR THRESHOLD*

- **\*\*NOTE\*\*** Roll up door Rear Threshold

*FORK LIFT REINFORCING*

BEARING GRID SYS AT REAR WHDWD FILLERS FULL LENGTH & ALUM I CORES REAR 36" OF FLR IN CTR 68"

*STUB POSTS*

SIDEWALL STUB POST ON 48" C/L

**15-Insulation**

*INSULATION TYPE*

POLYURETHANE INSULATION FOAMED IN PLACE

*FRONT WALL THICKNESS*

4" THICK FRONT WALL

*SIDE WALL THICKNESS*

- 2-1/2" SIDE WALL INSULATION

*ROOF THICKNESS*

3" THICK ROOF

*FLOOR THICKNESS*

3" THICK FLOOR

*CROSSMEMBER FLOOR FILLERS*

HARDWOOD FLOOR FILLERS FULL LENGTH

*FLOOR UNDERSKIN*

.035 THERMOPLASTIC FLOOR UNDERSKIN

*SIDE DOOR THICKNESS*

- 2-1/2" SIDE DOOR INSULATION

**16-Lining**

*FRONT WALL LINING*

.065 (NOM) VERSITEX-UTILITY VR2U FRONT WALL LINING

*SIDE WALL LINING*

- .085 (NOM) VERSITEX-UTILITY VR3U SIDE WALL LINING\*\*\*SEE NOTES FOR DISCLAIMER\*\*\*

*ROOF LINING*

.065 (NOM) VERSITEX-UTILITY VR2U ROOF LINING

*WEARBAND*

- 6" EXTRA HEIGHT 3/16" EXTRU ALUM HEAVY DUTY WEARBAND TOTAL OF 16" INCL REINFORCING BEHIND WEARBAND

*LOGISTIC RAILS*

- 2 - (1) ROW SERIES "E" GALV RECESS MTD LOG TRACK ON SIDE WALLS

REQUIRED INFORMATION:

Locate E-track \_\_\_\_\_ inches from centerline of track to top of floor.

>> Located first row of "E" track at 30" from floor to C/L of track and second row at 60" from floor to C/L of track.

### 17-Electrical System

|                                       |   |
|---------------------------------------|---|
| MAIN HARNESS                          | UTM MOISTURE RESISTANT "MULTI- PURPOSE" HARNESS<br>W/INTERNAL GROUND AND 7-WAY PLUG                       |
| ELECTRICAL RECEPTACLE                 | 7-WAY ELECTRICAL RECEPTACLE W/O CIRCUIT BREAKERS  |
| CLEARANCE LIGHT QUANTITY              | 0-1-2-5 D.O.T. MINIMUM CLEARANCE LIGHT QUANTITY   |
| DOMELIGHTS MOUNTED IN<br>CEILING      | ➤ 6 - PHILLIPS 9-DIODE CRNR DOMELIGHT MTD LONGITUDINALLY @<br>SIDEWALL TO CEILING CONNECTION, SWITCH REQD |
| SIDE MOUNTED DIRECTIONAL<br>LIGHT     | GROTE SUPERNOVA LED COMBO SIDE MTD DIR/CLRN LIGHT ON<br>BRACKET BELOW BOTTOM RAIL EACH SIDE               |
| STOP/TAIL/TURN LIGHTS                 | GROTE 4" L.E.D. (10-DIODE) STOP/ TAIL/TURN LIGHTS (2) PER SIDE<br>WITH BLACK SNAP-IN FLANGE               |
| LICENSE LIGHT                         | GROTE MICRONOVA L.E.D. LICENSE LIGHT  |
| CONSPICUITY TAPE LOCATION             | CONSPICUITY TAPE ON BOTTOM RAILS AND AT REAR OF TRAILER<br>(FOR D.O.T. MINIMUM LOCATION)                  |
| CONSPICUITY TAPE                      | FACTORY CHOICE CONSPICUITY TAPE   |
| UPPER CLEARANCE LIGHTS                | FACTORY CHOICE LED UPPER SIDE RAIL CLEARANCE LIGHTS WITH<br>3" MOUNTING HOLE C/L                          |
| LOWER CLEARANCE LIGHTS                | GROTE MICRONOVA LED PC RATED LIGHT  |
| ABS (ANTI-LOCK) WARNING<br>LIGHT      | GROTE MICRONOVA L.E.D. PC RATED LIGHT   |
| STOP/TAIL/TURN LIGHT<br>CONFIGURATION | GROUPED STOP/TAIL/TURN LIGHTS   |
| REAR HEADER CLEARANCE<br>LIGHTS       | GROTE MICRONOVA L.E.D. PC RATED GROMMET MOUNTED REAR<br>HEADER ID/ CLR LIGHTS                             |
| AUXILIARY POWER                       | ➤ INSTALL PURKEYS TAPPS 300 TO CHARGE PALLET JACK   |

### 18-Finish Specifications

|                                     |   |
|-------------------------------------|---|
| TOP FRONT & TOP SIDE RAIL<br>FINISH | NATURAL ALUM FINISH TOP FRONT & TOP SIDE RAILS  |
| BOTTOM SIDE RAIL FINISH             | NATURAL ALUM FINISH BOTTOM SIDE RAILS   |
| FRONT CORNER POST FINISH            | NATURAL ALUMINIUM FINISH FRONT CORNER POSTS   |
| FRONT PANEL FINISH                  | PREPAINTED WHITE FRONT PANELS   |
| SIDE PANEL FINISH                   | PREPAINTED WHITE SIDE PANELS  |
| FRONT APPROACH PLATE<br>FINISH      | NATURAL ALUM FINISH FRONT APPROACH PLATE  |
| FRONT SUBFRAME ASSEMBLY<br>FINISH   | FRONT SUBFRAME FULLY IMMERSSED IN BLACK RUST<br>PREVENTATIVE FINISH(ZERO VOC HOT DIP) |
| SUPPORT LEG FINISH                  | UTM BLACK SCHARPF ON SUPPORT LEGS   |

|                                     |  |
|-------------------------------------|--|
| REAR SUBFRAME FINISH                | UTM BLACK SCHARPF ON REAR SUBFRAME   |
| REAR CASE FINISH                    | SATIN FINISH STAINLESS STEEL REAR CASE   |
| VRTCL & HORZNTL DOCK<br>BMPR FINISH | UTM BLACK ENAMEL FINISH ON HORIZ DOCK BUMPER; BLACK<br>SCHARPF ON VERTICAL DOCK BUMPER |
| ROOF EXTERIOR FINISH                | NATURAL ALUM ROOF EXTERIOR FINISH  |

#### 19-Miscellaneous

|   |   |
|---|---|
| MUDFLAP TYPE                                  | MICHELIN ENERGY GUARD AERODYNMIC 24"X28" BLACK PLASTIC<br>MUDFLAP MTD W/ STEEL REINFORCING STRAPS   |
| PERMIT HOLDER                                 | <p>☛ TRUCKLITE #97960 ROUND PERMIT HOLDER MTD ON FRONT WALL<br/>REQUIRED INFORMATION:<br/> <u>Dealer must specify location of permit/document/registration holder on<br/>either R/S, C/S or C/L in special instructions unless otherwise stated in<br/>the option description.</u></p> <p>&gt;&gt; Locate permit holder on front wall R/S</p> |
| DEALER SUPPLIED MATL AND<br>LABOR             | ☛ FREIGHT CHARGES TO DELIVER TRAILER TO RENO  |
| DEALER SUPPLIED MATL AND<br>LABOR             | ☛ ON SPOT TIRE CHAINS MOUNTED ON FRONT AXLE   |
| FHWA INSPECTION REPORT                        | <p>☛ FHWA INSPECTION REPORT COPY EMAILED TO DEALER<br/>SALESPERSON FOR EACH UNIT<br/>REQUIRED INFORMATION:<br/> <u>Send the FHWA report to the following email address:</u></p> <p>&gt;&gt;</p>   |
| SIDE MOUNTED<br>AERODYNAMIC AIR<br>DEFLECTORS | ☛ OMIT BASE SPEC UTM USS120A-4 AERODYNAMIC SIDESKIRTS   |

#### 20-Tires and Wheels

|                                     |   |
|-------------------------------------|---|
| 22.5"X8.25"STANDARD WIDTH<br>WHEELS | 8 - 22.5X8.25 F.C. STL 10 HUB PILOT   |
| 22.5" LOW PROFILE TIRES             | 8 - 295/75R 22.5 MICH X-LINE ENERGY -T2 14PLY 39.70"T/D,LOAD<br>RG'G' MAX SPEED RATED@75 MPH; |

## Special Instructions

None.

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## Pricing

|                     |               |
|---------------------|---------------|
| Base Price          | \$146,928.00  |
| Federal Excise Tax  |               |
| State Tax @ 8.50%   |               |
| Net Trailer Price   | \$146,928.00  |
| x Unit(s)           | <u>1</u>      |
| Selling Price       | \$146,928.00  |
| Total Trades        | <u>\$0.00</u> |
| Total Selling Price | \$146,928.00  |

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## Terms & Conditions

Pricing is FOB Salt Lake City unless otherwise noted. Terms are payable in full before delivery. A document preparation fee of \$325 will be added to each sales order. Licensing and sales tax, if applicable, is not included. Pricing is good for 30 days and stock trailers are subject to prior sale. We can also provide a North American Permanent Plate (NAPP) for an additional \$235 per trailer. This is a one time fee and the plates expire when you sell your trailer. No yearly fees.

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: September 11, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Kirk Hawkins, 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 PUBLIC SAFETY – NEVADA HIGHWAY PATROL DIVISION**

Agenda Item Write-up:

Pursuant to NRS 334.010, the division requests approval to purchase one new vehicle for a total amount not to exceed \$64,381.

Additional Information:

The division is requesting to purchase one new van for mobile commercial inspection activities. Funding for the vehicle is provided by a federal US Department of Transportation Federal Motor Carrier Safety grant.

Statutory Authority:

NRS 334.010

|              |   |
|--------------|---|
| REVIEWED:    |  |
| ACTION ITEM: |   |

Joe Lombardo  
*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

**Memorandum**

DATE: August 19, 2024

TO: Kirk Hawkins, Executive Branch Budget Officer  
Governor's Finance Office, Budget Office

THROUGH: Kristi Defer, Senior Fiscal Officer *KD*  
Department of Public Safety, Director's Office

FROM: Jennifer Ramos, 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) for a new purchase of a Ford Transit Van for a mobile commercial vehicle inspection. Transit Van will be outfitted with specialized equipment capable of conducting mobile roadside inspections. The new vehicle cost is \$64,380.25 and will be funded by Budget Account 4721 (56) ITD Grant Program. A Work Program C70516 totaling \$769,673 reflecting the remaining unobligated grant authority will be used to fund the van and associated equipment.

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

|  |  |                  |       |            |                             |       |      |                    |      |
|--|--|------------------|-------|------------|-----------------------------|-------|------|--------------------|------|
| <b>Agency Name:</b><br>Department of Public Safety/State Police/ Nevada Highway Patrol   | <b>Budget Account #:</b><br>4721   |                  |       |            |                             |       |      |                    |      |
| <b>Contact Name:</b><br>Kristi Defer /Major James Simpson  | <b>Telephone Number:</b><br>775-684-4536 / 775) 684-4958   |                  |       |            |                             |       |      |                    |      |
| <p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p><b>Number of vehicles requested:</b> <u>1</u>                      <b>Amount of the request:</b> <u>\$64,381.00</u></p> <p><b>Is the requested vehicle(s) new or used:</b> <u>New</u></p> <p><b>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:</b></p> <p><b>Mission of the requested vehicle(s):</b></p>   |  |                  |       |            |                             |       |      |                    |      |
| <b>Were funds legislatively approved for the request?</b><br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | <b>If yes, please provide the decision unit number:</b><br><br><b>If no, please explain how the vehicles will be funded?</b><br>Federal MCSAP grant work program C70516  |                  |       |            |                             |       |      |                    |      |
| <p><b>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</b></p> <p><input checked="" type="checkbox"/> <u>1</u> Addition(s)    <input type="checkbox"/> Replacement(s)</p>   |  |                  |       |            |                             |       |      |                    |      |
| <p><b>Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain.</b></p> <p>yes</p>  |  |                  |       |            |                             |       |      |                    |      |
| <p><b>Please Complete for Replacement Vehicles Only:</b><br/>(For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p><b><u>Current Vehicle Information:</u></b><br/>Vehicle #1 Model Year:<br/>Odometer Reading:<br/>Type of Vehicle:<br/>_____<br/><br/>Vehicle #2 Model Year:<br/>Odometer Reading:<br/>Type of Vehicle:<br/>_____<br/><br/>_____<br/><br/><i>Please attach an additional sheet if necessary</i></p>   | <p>Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced.</p> <p>_____</p> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p> <p>_____</p> |                  |       |            |                             |       |      |                    |      |
| <p><b>APPOINTING AUTHORITY APPROVAL:</b></p> <table style="width: 100%; border: none;"><tr><td style="width: 40%; border-bottom: 1px solid black; text-align: center;">James T. Simpson</td><td style="width: 40%; border-bottom: 1px solid black; text-align: center;">Major</td><td style="width: 20%; border-bottom: 1px solid black; text-align: center;">09/13/2024</td></tr><tr><td style="text-align: center;">Agency Appointing Authority</td><td style="text-align: center;">Title</td><td style="text-align: center;">Date</td></tr></table> <p><b>BOARD OF EXAMINERS' APPROVAL:</b></p> <p><input type="checkbox"/> Approved for Purchase      <input type="checkbox"/> Not Approved for Purchase</p> <table style="width: 100%; border: none;"><tr><td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Board of Examiners</td><td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Date</td></tr></table> |  | James T. Simpson | Major | 09/13/2024 | Agency Appointing Authority | Title | Date | Board of Examiners | Date |
| James T. Simpson   | Major  | 09/13/2024       |       |            |                             |       |      |                    |      |
| Agency Appointing Authority  | Title  | Date             |       |            |                             |       |      |                    |      |
| Board of Examiners   | Date   |                  |       |            |                             |       |      |                    |      |



### 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.

|  |   |                   |   |
|--|---|-------------------|---|
| <b>Vehicle Item No.,<br/>Make, Model &amp; No.:</b>                                | 2024 TRANSIT T350 HIGH ROOF AWD EXTENDED LENGTH           |                   |   |
| <b>Dealer Name:</b>  | Corwin Ford   |                   |   |
| <b>Delivery Location:</b>  | Nevada Highway Patrol, 357 Hammill Lane<br>Reno, NV 89511 |                   |   |
| <b>Vehicle Colors:</b>   | Exterior:<br>Silver                                       | Interior:<br>Gray | <input checked="" type="checkbox"/> Cloth<br><input type="checkbox"/> Vinyl |
|  | Quantity  | Unit Cost         | Total Cost  |
| BASE PRICE<br>(Reno, Carson City or Las Vegas delivery)                            | 1   | 64,352.00         | \$ 64,352.00  |
| SPECIFY OPTIONS: (description)   |   |                   |   |
| 3.5 ECOBOOST ENGINE - included   | 1   | \$0.00            | 0   |
| ALL SEASON TIRES - included  | 1   | \$0.00            | 0   |
| HEAVY DUTY TRAILER TOW PACKAGE<br>- included                                       | 1   | \$0.00            | 0   |
| DUAL ALTERNATORS - included  | 1   | \$0.00            | 0   |
| TRAILER BRAKE CONTROLLER- included   | 1   | \$0.00            | 0   |
| UPFITTING Add and Install Specialized Emer<br>Equipment (see attached information) | 0   |                   | \$0.00  |
|  |   |                   |   |
| DELIVERY COST:<br>(If other than Reno\Carson or Las Vegas)                         |   |                   |   |
| Total purchase price with options  |   | \$64,352.00       | \$64,352.00   |
| DMV Title and DRS Fee's  | 1   | \$28.25           | \$ 28.25  |
| <b>GRAND TOTAL:</b>  |   |                   | <b>\$64,380.25</b>  |

|  |   |
|--|---|
| <b>Registered Owner:</b>   | Agency Name & Address:<br>DPS/ State Police/ Nevada Highway Patrol<br>555 Wright Way<br>Carson City, Nevada 89711 |
| <b>Legal Owner:</b>  | Agency Name & Address:<br>DPS/ State Police/ Nevada Highway Patrol<br>555 Wright Way<br>Carson City, Nevada 89711 |
| <b>County Vehicle Based In:</b>  | Washoe County   |
| <b>Name &amp; Phone of Person to contact when vehicle is ready for delivery:</b> | Denny Gortari<br>Fleet Administrator/ASO II NHP<br>775-684-4825   |

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# Corwin | Ford Reno

3600 Kietzke Lane Reno, NV 89502 Office:775.829.3206 FAX:775.829.3364

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QUOTE 2024 TRANSIT T350 HIGH ROOF AWD EXTENDED LENGTH

07/29/2024

3.5 ECOBOOST ENGINE

SILVER EXTERIOR

GRAY CLOTH SEATS

ALL SEASON TIRES

HEAVY DUTY TRAILER TOW PACKAGE —

DUAL ALTERNATORS

TRAILER BRAKE CONTROLLER

REMOVE REAR PASSENGER SEATS

CRUISE CONTROL

\*\*\* PRICE DOES NOT INCLUDE SHIPPING TO UPFITTER IT WILL BE DELIVERED TO CORWIN FORD THEN UPFITTER WILL ARRANGE SHIPMENT TO AND FROM THEIR FACILITY

\$64352 PLUS \$28.25 TITLE FEE

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 31, 2024

To: Amy Stephenson, 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 of Venus B. Fajota, is written over the "From:" line.

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 333.705, subsection 4, the department seeks a favorable recommendation regarding its determination to use the emergency provision to contract with former employee Heidi Haartz to provide project management support for COVID relief fund projects through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Additional Information:

Ms. Haartz retired from the department as Deputy Superintendent on January 3, 2023 and is receiving pension benefits. The agency is finalizing their COVID relief fund projects and Ms. Haartz's knowledge and expertise in the established projects allows the agency to identify projects that will not be completed by the grant deadline and identify alternative projects to reallocate funds. The department intends to use the emergency provision to contract with Ms. Haartz from August 21, 2024 through September 6, 2024.

Statutory Authority:  
NRS 333.705 (4)

REVIEWED: \_\_\_\_\_  
ACTION ITEM: \_\_\_\_\_

Joe Lombardo  
Governor

Jhone M. Ebert  
Superintendent of  
Public Instruction



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

**STATE OF NEVADA**  
**DEPARTMENT OF EDUCATION**  
700 E. Fifth Street | Carson City, Nevada 89701-5096  
Phone: (775) 687-9200 | [www.doe.nv.gov](http://www.doe.nv.gov) | Fax: (775) 687-1116

**MEMORANDUM**

**TO:** Amy Stephenson, Director, Governor's Finance Office

**FROM:** Megan Peterson, Deputy Superintendent, Student Investment Division *mp*

**DATE:** October 30, 2024

**SUBJECT:** Authorization to Contract with Former Employee-Heidi Haartz

In accordance with the State Administrative Manual Chapter 0115 (B2) "A contract with a current employee or former employee for 4 months or less, where the executive head of the department/division/agency determines an emergency exists that necessitates the contract."

The Nevada Department of Education (NDE) is requesting an emergency contract with Manpower to contract with retired State employee Heidi Haartz. Ms. Haartz retired from state service on January 03, 2023, Ms. Haartz will be supporting the Student Investment Division in office to perform project management of COIVD relief funds.

Currently, given the agencies' vacancy rate of 16% and the workload associated with the legislative session, existing staff do not have the capacity to take on a project of this magnitude. The Department wants to ensure a dedicated person with unique knowledge of the lifespan of the COVID relief funds can focus on the work. This includes, but is not limited to, assisting with identifying projects which may not meet the intended deadline and are available to reallocate to projects of greater need. This is helping ensure all federal relief funds are expended timely.

In her previous position, Ms. Haartz was a Deputy Superintendent for the Student Investment Division responsible for the administrative and fiscal oversight of the Department's state and federal funds because Ms. Haartz has experience and knowledge of Department procedures and fiscal operations as the former Student Investment Division Deputy Superintendent, she is uniquely positioned to provide much needed technical assistance.

Due to ongoing need to intensely manage the COVID relief funds hiring Ms. Haartz part-time on an emergency intermittent basis since August 21, 2024, to address staffing shortages and mitigate any negative impact will fulfill the Student Investment Division's needs to provide project management support of the COVID relief funds.

If additional information or clarification is needed, please contact Kaylene Hoyt, Contracts Manager at 775-687-9101 or [NDEcontracts@doe.nv.gov](mailto:NDEcontracts@doe.nv.gov).

cc: Jhone Ebert, Superintendent of Public Instruction  
Michael Rankin, Executive Branch Budget Officer I, Governor's Finance Office  
Venus Fajota, Executive Branch Budget Officer I, Governor's Finance Office



**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:      | Heidi Haartz            |         |        |              |
| Former Employee ID Number: | 10008                   |         |        |              |
| Former Job Title:          | Deputy Superintendent   |         |        |              |
| Former Employee Agency:    | Department of Education |         |        |              |
| Former Class and Grade:    | Class:                  | U4302   | Grade: | Unclassified |
| Former Employment Dates:   | From:                   | 07/1994 | To:    | 01/03/2023   |
| Requesting Agency:         | Department of Education |         |        |              |
| Vendor:                    | Manpower                |         |        |              |

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

|          |   |
|----------|---|
| <b>X</b> | 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.   |
|          | Summarize scope of contract work.   |
| <b>A</b> | The employee will provide project management support of the COVID relief funds; assisting with identifying projects which may not meet the intended deadline and are available to reallocate to projects of greater need. This will ensure all federal relief funds are expended timely.  |
|          | Document former job description.  |
| <b>B</b> | Previously, the employee served as the Deputy Superintendent of the Student Investment Division. They were responsible for the administrative and fiscal oversight of the Departments state and federal funds.  |
|          | 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?   |
| <b>C</b> | Yes. This employee worked intimately to identify and establish the initial projects funded by the COVID relief funds. They were responsible for the establishing the initial work programs and assisted with early reallocation of funds when emerging needs were identified. As a result, they have specialized knowledge of this project. With the departure of the current project manager, the Department would like to work with this employee to transfer the requisite knowledge needed to keep these vital projects moving forward until the next project manager is hired. |

|  |   |
|--|---|
| <b>D</b>   | <b>Explain why existing State employees within your agency cannot perform this function.</b><br>Given the agencies current vacancy rate, approximately 16%, and the workload associated with the legislative session, existing staff have no extra capacity to take on a project of this magnitude. The Department wants to ensure a dedicated person with no distractions can focus on the work. |
| <b>E</b>   | <b>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.</b><br>There is no relationship as defined in NAC 284.750.   |
| <b>F</b>   | <b>List contractors' hourly rate and employee's hourly rate.</b><br>Employees Rate \$72.75 Contractors rate with Employee rate \$90.94  |
| <b>G</b>   | <b>List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.</b><br>\$72.75, U4302, unclassified Deputy Superintendent, Student Investment Division  |
| <b>H</b>   | <b>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?</b><br>N/A   |
| <b>I</b>   | <b>Document justification for hiring contractor.</b><br>The Department is seeking temporary support in the absence of the project manager that was originally hired to complete the work. Due to the time sensitive nature of the COVID relief funds, the Department does not want to lose time   |
| <b>J</b>   | <b>Will the employee be collecting PERS at any time during the contract?</b><br>Yes. This employee retired with 30 years of state service in January of this year.  |
| <b>K</b>   | <b>What is the duration of the contract with the former employee? (Include start and end date)</b><br>August 21, 2024 through September 6, 2024.  |
| <b>L</b>   | <b>Will the former employee be working full time or part time? If part time, how many hours?</b><br>Part-time, approximately 24 hours/week.   |
| <b>M</b>   | <b>Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</b><br>No.  |
| <b>Comments – Provide any additional comments:</b> |   |

**Approval for Authorization to Contract with a Former Employee:**

  
Signature of Agency Head Authorizing Request

09/20/24  
Date

Purchasing Administrator Signature (if a Statewide Contract)

Date

  
Budget Analyst Signature

10/31/24  
Date

Clerk of the Board of Examiners Signature

Date



Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: September 27, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Matthew Brown, 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, Department of Administration, Purchasing Division requests authority to contract with former employee Heidi Haartz to provide project management support for COVID relief fund projects for the Department of Education through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Additional Information:

Ms. Haartz retired from the Department of Education as the Deputy Superintendent on January 3, 2023 and is receiving pension benefits. The agency is finalizing their COVID relief fund projects and Ms. Haartz's knowledge and expertise in the established projects will allow the agency to identify projects that will not be completed by deadline and identify alternative projects to reallocate funds. The department requests to contract with Ms. Haartz from November 12, 2024 through May 12, 2025 on a part-time basis up to 24 hours per week working in the office.

Statutory Authority:  
NRS 333.705 (1)

REVIEWED: \_\_\_\_\_

A blue ink signature, likely of the reviewer, is written over the line.

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**

September 25, 2024

**MEMORANDUM**

To: Matthew Brown

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 Heidi Haartz who Manpower wants to hire. Heidi has recently left state service and will be collecting PERS.

Manpower is aware that this request will need BOE approval.

If you have any questions, please contact me at 684-0185 or [amorfin@admin.nv.gov](mailto:amorfin@admin.nv.gov)

Joe Lombardo  
Governor

Jhone M. Ebert  
Superintendent of  
Public Instruction



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

**STATE OF NEVADA**  
**DEPARTMENT OF EDUCATION**  
700 E. Fifth Street | Carson City, Nevada 89701-5096  
Phone: (775) 687-9200 | [www.doe.nv.gov](http://www.doe.nv.gov) | Fax: (775) 687-1116

**MEMORANDUM**

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

**FROM:** Megan Peterson, Deputy Superintendent, Student Investment Division *mp*

**DATE:** September 20, 2024

**SUBJECT:** Authorization to Contract with Former Employee-Heidi Haartz

The Nevada Department of Education (NDE) is requesting to contract with a former State employee Heidi Haartz, using Manpower Temporary Services. The request is made in accordance with the State Administrative Manual Chapter 0323. In her previous position, Ms. Haartz was a Deputy Superintendent for the Student Investment division responsible for the administrative and fiscal oversight of the Departments state and federal funds. Ms. Haartz has experience and knowledge of Department procedures and fiscal operations as the former Student Investment Division Deputy Superintendent. Ms. Haartz will be contracting with NDE for 6 months part time to fulfill the Student Investment Divisions needs to provide project management support of the COVID relief funds.

Through this contract Ms. Haartz will perform project management duties in office for the Student Investment Division. This includes, but is not limited to, assisting with identifying projects which may not meet the intended deadline and are available to reallocate to projects of greater need. This will ensure all federal relief funds are expended timely.

If additional information or clarification is needed, please contact Kaylene Hoyt, Contracts Manager at 775-687-9101 or [NDEcontracts@doe.nv.gov](mailto:NDEcontracts@doe.nv.gov).

cc: Jhone Ebert, Superintendent of Public Instruction



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:      | Heidi Haartz            |         |        |              |
| Former Employee ID Number: | 10008                   |         |        |              |
| Former Job Title:          | Deputy Superintendent   |         |        |              |
| Former Employee Agency:    | Department of Education |         |        |              |
| Former Class and Grade:    | Class:                  | U4302   | Grade: | Unclassified |
| Former Employment Dates:   | From:                   | 07/1994 | To:    | 01/03/2023   |
| Requesting Agency:         | Department of Education |         |        |              |
| 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 | <b>Summarize scope of contract work.</b><br>The employee will provide project management support of the COVID relief funds; assisting with identifying projects which may not meet the intended deadline and are available to reallocate to projects of greater need. This will ensure all federal relief funds are expended timely.  |
| B | <b>Document former job description.</b><br>Previously, the employee served as the Deputy Superintendent of the Student Investment Division. They were responsible for the administrative and fiscal oversight of the Departments state and federal funds.   |
| C | <b>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?</b><br>Yes. This employee worked intimately to identify and establish the initial projects funded by the COVID relief funds. They were responsible for the establishing the initial work programs and assisted with early reallocation of funds when emerging needs were identified. As a result, they have specialized knowledge of this project. With the departure of the current project manager, the Department would like to work with this employee to transfer the requisite knowledge needed to keep these vital projects moving forward until the next project manager is hired. |

|  |   |
|--|---|
| <b>D</b>   | <b>Explain why existing State employees within your agency cannot perform this function.</b>  |
|  | Given the agencies current vacancy rate, approximately 16%, and the workload associated with the legislative session, existing staff have no extra capacity to take on a project of this magnitude. The Department wants to ensure a dedicated person with no distractions can focus on the work. |
| <b>E</b>   | <b>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.</b>  |
|  | There is no relationship as defined in NAC 284.750.   |
| <b>F</b>   | <b>List contractors' hourly rate and employee's hourly rate.</b>  |
|  | Employees Rate \$72.75 Contractors rate with Employee rate \$90.94  |
| <b>G</b>   | <b>List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.</b>   |
|  | \$72.75, U4302, unclassified Deputy Superintendent, Student Investment Division   |
| <b>H</b>   | <b>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?</b>  |
|  | N/A   |
| <b>I</b>   | <b>Document justification for hiring contractor.</b>  |
|  | The Department is seeking temporary support in the absence of the project manager that was originally hired to complete the work. Due to the time sensitive nature of the COVID relief funds, the Department does not want to lose time   |
| <b>J</b>   | <b>Will the employee be collecting PERS at any time during the contract?</b>  |
|  | Yes. This employee retired with 30 years of state service in January of this year.  |
| <b>K</b>   | <b>What is the duration of the contract with the former employee? (Include start and end date)</b>  |
|  | Anticipated start date, presuming BOE approval is November 12, 2024. The contract will end no later than May 12, 2025   |
| <b>L</b>   | <b>Will the former employee be working full time or part time? If part time, how many hours?</b>  |
|  | Part-time, approximately 24 hours/week.   |
| <b>M</b>   | <b>Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</b>   |
|  | No.   |
| <b>Comments – Provide any additional comments:</b> |   |
|  |   |

**Approval for Authorization to Contract with a Former Employee:**

  
\_\_\_\_\_  
Signature of Agency Head Authorizing Request      09/20/24  
Date

  
\_\_\_\_\_  
Purchasing Administrator Signature (if a Statewide Contract)      9/26/24  
Date

  
\_\_\_\_\_  
Budget Analyst Signature      Sept 27 2024  
Date

\_\_\_\_\_  
Clerk of the Board of Examiners Signature      Date

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 8, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: Matthew Brown, 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, Department of Administration, Purchasing Division requests to contract with former employee Deborah Hassett to assist with Human Resources for the Department of Health and Human Services, Division of Child and Family Services through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Additional Information:

Ms. Hassett retired from the Department of Health and Human Services, Division of Child and Family Services on January 14, 2023 and is receiving pension benefits. Her experience as a Division Administrator benefits the Human Resource section, which has been resource constrained due to extensive workload of recruitment, retention and hiring of contracted employees. Ms. Hassett will assist with employee relations and agency initiatives. The office requests to contract with Ms. Hassett from November 12, 2024 through May 12, 2025 on a full-time basis for up to 40 hours per week working in the office.

Statutory Authority:  
NRS 333.705(1)

REVIEWED:   
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

October 7, 2024

**MEMORANDUM**

To: Matthew Brown

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 Deborah Hassett who Manpower wants to hire. Deborah has recently left state service and will be collecting PERS.

Manpower is aware that this request will need BOE approval.

If you have any questions, please contact me at 775-531-3301 or [amorfin@admin.nv.gov](mailto:amorfin@admin.nv.gov)



Joe Lombardo  
Governor

Richard Whitley, MS  
Director



**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIVISION OF CHILD AND FAMILY SERVICES  
*Helping people. It's who we are and what we do.*



Marla McDade  
Williams  
Administrator

Date: September 30, 2024

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

From: Marla McDade Williams, MPA, Administrator *MMdw*  
Division of Child and Family Services

Subject: Authorization to Contract with Former Employee – Deborah Hassett

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The Division of Child and Family Services (DCFS) is requesting to contract with a former employee, Deborah Hassett, through the use of Manpower Temporary Employment Services statewide contract. The request is made in accordance with the State Administrative Manual Chapter 0323. In her previous position, Ms. Hassett worked for the Department of Health and Human Services and in the realm of human resource management.

Human resources have been impacted by staff vacancies, recruiting, increase employee relation issues, and increased workload due to increased complexity from multiple Collective Bargaining Agreements. The increased workload and expanded recruitment efforts has resulted in the need for a additional support at this time.

Through this contract, she will work up to 40 hours as needed assisting the HR Officer with employee relations, disciplines, investigations, and support the Divisions culture-change initiatives.

Ms. Hassett will be working on-site.



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 Current Employee**

| Employee Information     |                                       |         |        |              |
|--------------------------|---------------------------------------|---------|--------|--------------|
| Employee Name:           | Deborah Hassett                       |         |        |              |
| Employee ID Number:      | 11664                                 |         |        |              |
| Job Title:               | Division Administrator                |         |        |              |
| Current Employee Agency: | DHHS/DCFS                             |         |        |              |
| Current Class and Grade: | Class:                                | U4108   | Grade: | Unclassified |
| Employment Dates:        | From:                                 | 9/26/22 | To:    | 1/14/23      |
| Requesting Agency:       | Division of Child and Family Services |         |        |              |
| Vendor:                  | Manpower                              |         |        |              |

| Please mark which of the following applies and complete Sections 'A' through 'M' below: |   |
|---|---|
| X   | Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee.   |
|   | Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services.  |
| A   | <b>Summarize scope of contract work.</b><br>This position will work up to 40 hours as needed assisting the HR Officer with employee relations, disciplines, investigations, and provide some relief to workload due to the increased complexity from multiple Collective Bargaining Agreements and system changes. This position will also develop work-plans, create curriculum, improve, manage and expand employee orientation and support the Divisions culture-change initiatives.                                       |
| B   | <b>Document the employee's current job description.</b>   |
| C   | <b>Explain how this differs from current State duties.</b><br>Ms. Hassett has worked for the Department of Health and Human Services and in the realm of human resource management. Her experience, knowledge and skill set will benefit the Human Resource section which has been resource constrained due to extensive workload of recruitment, retention and hiring of contracted employees. Ms. Hassett would be able to start with little training and make a material impact for our recruitment of staffing resources. |

|   |  |
|---|--|
| D | <b>Explain why existing State employees within your agency cannot perform these duties.</b>  |
|   | Human resources have been impacted by staff vacancies, recruiting, hiring of temporary contracted staff, background checks for staff and HR investigations.  |
| E | <b>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.</b> |
|   | No   |
| F | <b>List contractors' hourly rate and employee's hourly rate.</b>   |
|   | \$43.82 hr / \$54.34 hr  |
| G | <b>List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.</b>  |
|   | Grade 34 step 1 \$29.56 – step 10 \$43.82; <i>Personnel Analyst 2</i>  |
| H | <b>Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%).</b>   |
|   |  |
| I | <b>Document justification for hiring contractor.</b>   |
|   | Staffing shortages, increased employee relation issues, assist with cultural change initiatives.   |
| J | <b>Will the employee be collecting PERS at any time during the contract?</b>   |
|   | Yes  |
| K | <b>What is the duration of the contract with the current employee? (Include start and end date)</b>  |
|   | 11/12/2024 – 05/12/2025  |
| L | <b>Will the current employee be working full time or part time? If part time, how many hours?</b>  |
|   | Up to 40 hours per week  |
| M | <b>Is the employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</b>   |
|   | No   |

**Comments – Provide any additional comments:**

|  |
|--|
|  |
|--|

**Approval for Authorization to Contract with a Former Employee:**



Signature of Agency Head Authorizing Request

10/3/24

Date



Purchasing Administrator Signature (if a Statewide Contract)

10/07/2024

Date



Budget Analyst Signature

Oct 08 2024

Date

Clerk of the Board of Examiners Signature

Date

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 1, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Matthew Brown, 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, Department of Administration, Purchasing Division requests authority to contract with former employee Roger Trott to assist with coordinating right-of-way permits for the Nevada Department of Transportation through statewide contract #99SWC-NV21-7576 with Marathon Staffing Group, Inc.

Additional Information:

Mr. Trott retired from the department on February 3, 2023 and is receiving pension benefits. He will assist in the progression of permit approval and training of new staff. The office requests to contract with Mr. Trott from November 13, 2024 through May 13, 2025 on a part-time basis up to 20 hours per week working remotely.

Statutory Authority:

NRS 333.705(1)

REVIEWED:                       
ACTION ITEM:



**STATE OF NEVADA  
DEPARTMENT OF ADMINISTRATION**

***Purchasing Division***

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

August 20, 2024

**MEMORANDUM**

To: Matthew Brown

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 Roger Trott who Marathon wants to hire. Roger recently left state service and is collecting PERS.

Marathon is aware they will not be able to hire Roger until November BOE approval.

If you have any questions, please contact me at [amorfin@admin.nv.gov](mailto:amorfin@admin.nv.gov)



JOE LOMBARDO  
Governor

STATE OF NEVADA  
DEPARTMENT OF TRANSPORTATION  
1263 S. Stewart Street  
Carson City, Nevada 89712

TRACY LARKIN THOMASON, P.E.  
Director

August 19, 2024

To: Annette Morfin, Purchasing Officer II, Department of Administration, Purchasing Division  
From: Chris Young, Chief, Environmental Services Program *CY*  
Subject: Authorization to Contract with Former Employee – Roger Trott

---

The Nevada Department of Transportation (NDOT) is requesting to employ a former employee, Roger Trott, through Marathon Staffing. The request is made in accordance with the State Administrative Manual Chapter 0323. At NDOT one of Mr. Trott's duties was to coordinate the Environmental Division review of right-of-way permits. Mr. Trott is proficient in coordinating right-of-way permit reviews within the 10 discipline sections within the Environmental Division and in the use of NDOT's cumbersome Integrated Right-of-Way Information Network (IRWIN) application which is used to process right-of-way permits statewide. NDOT Environmental completed reviews of more than 800 occupancy and encroachment permits in each of FY23 and FY24.

NDOT right-of-way permits support the delivery of hundreds of smaller private and public projects as well as upcoming major projects such as the \$12 billion Brightline West high speed rail project and the installation of more than a thousand miles of high-speed internet fiber optic line and power transmission lines. It is critical to NDOT's goal of supporting Nevada's continuing economic growth to have Mr. Trott perform the services needed of him as NDOT Environmental continues to be understaffed and cannot provide timely processing of the unprecedented volume of NDOT right-of-way permits.

With BOE approval, following his retirement from NDOT on February 3, 2023, Mr. Trott began working as a contracted employee through Marathon Staffing on March 27, 2023 (51 days after his retirement). His employment continued through June 30, 2024.

In May 2024, NDOT was notified that an agreement for renewal with Marathon/Trott was pulled from the May BOE's Agenda because a "90-day period" (between retirement and working for a public employer) was not adhered to.

Mr. Trott has not worked for NDOT since July 1, 2024. Having in excess of 90 "cooling off" days, NDOT intends to reemploy Mr. Trott through Marathon Staffing again immediately following the November BOE meeting, assuming an approval of his authority to work. Mr. Trott will continue to work remotely.

Please contact me (775-888-7687, cyoung@dot.nv.gov) if additional information or clarification is needed. 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              |                              |                             |               |                  |
|-----------------------------------|------------------------------|-----------------------------|---------------|------------------|
| <b>Former Employee Name:</b>      | Roger L. Trott               |                             |               |                  |
| <b>Former Employee ID Number:</b> | 56911                        |                             |               |                  |
| <b>Former Job Title:</b>          | Environmental Scientist III  |                             |               |                  |
| <b>Former Employee Agency:</b>    | Department of Transportation |                             |               |                  |
| <b>Former Class and Grade:</b>    | <b>Class:</b>                | Environmental Scientist III | <b>Grade:</b> | 36               |
| <b>Former Employment Dates:</b>   | <b>From:</b>                 | April 27, 2015              | <b>To:</b>    | February 3, 2023 |
| <b>Requesting Agency:</b>         | Department of Transportation |                             |               |                  |
| <b>Vendor:</b>                    | Marathon Staffing            |                             |               |                  |

| Please mark which of the following applies and complete Sections 'A' through 'M' below: |  |
|---|--|
| <b>X</b>  | 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.  |
| <b>A</b>  | <b>Summarize scope of contract work.</b><br>Coordination of NDOT right-of-way occupancy and encroachment permit reviews within the Environmental Division.   |
| <b>B</b>  | <b>Document former job description.</b><br>Essential functions of the former job held by Mr. Trott are:<br>1) Provide reviews for department projects and activities to assess the potential impact of a project/activity to environmental and human resources. May require conducting field visits, utilizing existing data, preparing reports and documentation, consultation with regulatory agencies and other interested parties.<br>2) Coordinate and manage the Environmental Division Local Public Agency NEPA compliance program; prepare draft approvals.<br>3) Coordinate and manage the Environmental Division Material Site environmental compliance program; prepare material site clearance memos.<br>4) Review and develop studies/reports/documentation needed to address social and economic issues for environmental NEPA) compliance documents.<br>5) Coordinate and manage large EA and EIS project NEPA compliance during the final design of individual phases; prepare EA and EIS re-evaluation documents. |



|          |   |
|----------|---|
|          | 6) Coordinate the Environmental Division reviews and approvals of NDOT right-of-way permits.  |
| <b>C</b> | <p><b>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?</b></p> <p>The Environmental Division completed reviews of more than 800 right-of-way permits in each of FY23 and FY24. Mr. Trott understands the processes unique to the Environmental Division, NDOT, and the IRWIN permitting system required to ensure permits and projects are reviewed by the 10 discipline sections within the Environmental Division in a timely manner. The contract includes language to train permanent NDOT employees in these skills. Due to the exceptional amount of project specific work, at present and for the next 12 months, no current staff will have the capacity to accept the permitting tasks Mr. Trott would perform without impairing the timely delivery of NDOT construction and maintenance projects.</p> |
| <b>D</b> | <p><b>Explain why existing State employees within your agency cannot perform this function.</b></p> <p>Due to staff constraints and increased workloads, existing Environmental Division staff do not have the available capacity to perform this activity within the 10-day turnaround period allowed. Additionally, existing staff don't have the required experience with the cumbersome permitting computer system to perform these duties efficiently. Project delivery times and permit review times would be substantively delayed by having existing staff do this work.</p>  |
| <b>E</b> | <p><b>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.</b></p> <p>No relationship.</p>   |
| <b>F</b> | <p><b>List contractors' hourly rate and employee's hourly rate.</b></p> <p>Contractor's rate \$48.16, employee's rate \$38.56</p>   |
| <b>G</b> | <p><b>List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.</b></p> <p>\$38.56 Environmental Scientist III, Grade 36</p>   |
| <b>H</b> | <p><b>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?</b></p> <p>N/A</p>  |
| <b>I</b> | <p><b>Document justification for hiring contractor.</b></p> <p>Existing staff don't have the available time or the required experience with the cumbersome permitting computer system to perform these duties efficiently. All NDOT project delivery times and permit review times would be substantively delayed by having existing staff do this work.</p>  |
| <b>J</b> | <p><b>Will the employee be collecting PERS at any time during the contract?</b></p> <p>Yes</p>  |
| <b>K</b> | <p><b>What is the duration of the contract with the former employee? (Include start and end date)</b></p> <p>Start: <i>Upon approval</i> End: May 13, 2025.</p>   |
| <b>L</b> | <p><b>Will the former employee be working full time or part time? If part time, how many hours?</b></p> <p>Part-time, variable, 10-20 hrs./week</p>   |
| <b>M</b> | <p><b>Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</b></p>  |

|  |    |
|--|----|
|  | No |
|  |    |

**Comments – Provide any additional comments:**

Right-of-way permits support the delivery of hundreds of smaller private and public projects as well as upcoming major projects such as the \$12 billion Brightline West high speed rail project and the installation of more than a thousand miles of high-speed internet fiber optic line and power transmission lines. It is critical to NDOT's goal of supporting Nevada's continuing economic growth to have Mr. Trott perform the services needed of him as NDOT Environmental continues to be understaffed and cannot provide timely processing of the unprecedented volume of NDOT right-of-way permits. Mr. Trott will continue to work remotely.

Approval for Authorization to Contract with a Former Employee:

DocuSigned by:  
  
Signature of Agency Head Authorizing Request  
08/20/2024  
Date

  
Purchasing Administrator Signature (if a Statewide Contract)  
8/20/24  
Date

  
Budget Analyst Signature  
Oct 1 2024  
Date

Clerk of the Board of Examiners Signature  
Date

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: November 6, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: David Lenzner, 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.

**GOVERNOR'S FINANCE OFFICE**

Agenda Item Write-up:

At its October 2, 2024 meeting the Board of Examiners approved modifications to the policies and procedures of the State Board of Examiners adopted and collected in the State Administrative Manual. Pursuant to NRS 353.040, the office requests the Board of Examiners to reconsider the effective date of those changes. The requested new effective date of the previously approved changes to SAM 0204 is December 11, 2024.

Statutory Authority:

NRS 353.040

REVIEWED:   
ACTION ITEM: \_\_\_\_\_

**Joe Lombardo**  
*Governor*



**Joy Grimmer**  
*Director*

**Rober "Bob" Ragar**  
*Deputy Director*

**STATE OF NEVADA**  
**DEPARTMENT OF ADMINISTRATION**  
**515 E. Musser Street | Carson City, Nevada 89701**  
**Phone: (775) 684-0299 | [admin.nv.gov](http://admin.nv.gov) | Fax: (775) 684-0298**

**Date:** November 6, 2024

**To:** Amy Stephenson, Clerk of the Board  
Governor's Finance Office

**From:** Joy Grimmer, Director  
Department of Administration

**Subject:** SAM SECTION 0204

A handwritten signature in black ink that reads "Joy Grimmer".

---

At its October 2, 2024 meeting the Board of Examiners approved modifications to the policies and procedures of the State Board of Examiners adopted and collected in the State Administrative Manual. Pursuant to NRS 353.040, the department requests the Board of Examiners to reconsider the effective date of those changes. The requested new effective date of the previously approved changes to SAM 0204 is December 11, 2024.

The change is requested because employees who travelled shortly after the travel reimbursement changes were adopted who did not receive notice of the potential reimbursement changes expended personal dollars and are now prohibited from being reimbursed.

The change will allow reimbursement payments to employees who travelled in or around the time of the previous adoption in line with the prior policy.

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 28, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: Aaron Frantz, 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.

**GOVERNOR'S FINANCE OFFICE**

Agenda Item Write-up:

Pursuant to NRS 353.040 the office requests modifications to the policies and procedures of the State Board of Examiners adopted and collected in the following chapters of the State Administrative Manual (SAM).

1. SAM Charter 2600, Section 2630 – adds clarification and guidance on decorating offices.
2. SAM Chapter 3600, Section 3610 – Eliminates language and adds reference to NRS 286.297 for list of those who are ineligible for membership.

Statutory Authority:

NRS 353.040

REVIEWED:                       
ACTION ITEM:

## REQUEST FOR CHANGES TO THE STATE ADMINISTRATIVE MANUAL (SAM)

Agency Code: 087

Department: ADMINISTRATION

Division (if applicable): DIRECTOR'S OFFICE

Appointing authority: JOY GRIMMER

Agency contact (name, phone and e-mail): JOY GRIMMER,  
JOYGRIMMER@ADMIN.NV.GOV

Budget Division Analyst (name, phone and e-mail): ROXANA GIFFORD  
GIFFORDR@FINANCE.NV.GOV

Proposed BOE date: NOVEMBER 12, 2024

Proposed effective date: UPON APPROVAL

1. Reason/purpose for requested change:  
*Update to Sections 2630 and 3610.*
2. Explain how the recommended change(s) will benefit agencies or create consistencies or efficiencies, etc. (provide examples if applicable):  
*An update to Section 2630 will add clarification and guidance.  
The update to Section 3610 is needed as it is no longer accurate. The change will provide reference to the correct Nevada Revised Statute.*
3. Will recommended change have a fiscal impact (if yes, explain): *Cannot Determine.*
4. Existing and recommended language in SAM (*blue bold italics* is new language being proposed and ~~red strikethrough~~ is deleted language being proposed). (please provide requested change as an attachment):

Appointing Authority: \_\_\_\_\_

*Amg: Stephenson*

BOARD OF EXAMINERS APPROVAL DATE: \_\_\_\_\_

*(for BOE use only)*

## 2630 Decorating Offices

- A. It is the policy of the State to furnish offices with appropriate furniture and equipment for the position.
- B. *To the extent budgetary authority is available for this purpose, expenses for decorating common areas of State offices are allowable.*
- C. **Personal decorations are not an allowable State expense.**
- D. *Live plants in State-owned or leased buildings must be maintained in a manner that prevents damage to State property and maintains a neat and sanitary work environment.*
- E. *Permanent wall displays may be installed by Buildings and Grounds in State offices.*
- F. *Hanging of personal items on walls of State-owned and leased buildings is permitted so long as they are appropriate to the State or agency and are installed in a secure manner that permits removal without damage to the surface.*
- G. *Employees are responsible for the repair of any damage caused by plants or wall hangings.*



### 3610 Persons Ineligible for Membership

- ~~1. Independent contractors or persons rendering professional services on a fee, retainer, or contract basis;~~
- ~~2. Substitute teachers and students who are employed by the institution that they attend;~~
- ~~3. Retired employees who are employed by a participating public employer, except as provided in NRS 286.523;~~
- ~~4. Members of boards or commissions of the State or its political subdivisions when such boards or commissions are advisory or directive and when membership is not compensated except for expenses incurred;~~
- ~~5. Inmates of State institutions even though they may be receiving compensation for services performed for the institution;~~
- ~~6. District Judges and Supreme Court Justices who are first elected or appointed on or after July 1, 1977, who are not enrolled in the System at the time of election or appointment;~~
- ~~7. Members of the professional staff of the Nevada System of Higher Education who are employed on or after July 1, 1977 except as provided in NRS 286.520;~~
- ~~8. People assigned to intermittent or temporary positions unless the assignment exceeds six months, except as provided in NRS 286.293;~~
- ~~9. Nurses who are not full-time employees, are paid an hourly wage on a daily basis, do not receive the employee benefits received by other employees of the same employer and do not work a regular schedule or are requested to work for a shift at a time.~~

*Certain persons are not eligible to become members of the Public Employees' Retirement System. See NRS 286.297 for a list of those ineligible for membership.*

## 2630 Decorating Offices

- A. It is the policy of the State to furnish offices with appropriate furniture and equipment for the position.
- B. To the extent budgetary authority is available for this purpose, expenses for decorating common areas of State offices are allowable.
- C. Personal decorations are not an allowable State expense.
- D. Live plants in State-owned or leased buildings must be maintained in a manner that prevents damage to State property and maintains a neat and sanitary work environment.
- E. Permanent wall displays may be installed by Buildings and Grounds in State offices.
- F. Hanging of personal items on walls of State-owned and leased buildings is permitted so long as they are appropriate to the State or agency and are installed in a secure manner that permits removal without damage to the surface.
- G. Employees are responsible for the repair of any damage caused by plants or wall hangings.

## 3610 Persons Ineligible for Membership

Certain persons are not eligible to become members of the Public Employees' Retirement System (PERS).

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 14, 2024

To: Amy Stephenson, Director  
Governor's Finance Office

From: Lesley Volkov, 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 Examiner's meeting.

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

Agenda Item Write-up:

Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$1,216,748 from the Interim Finance Committee Contingency Account to continue providing vocational services to eligible clients with disabilities.

Additional Information:

The division requests funds to cover its vocational services to eligible individuals and disabilities obligations in fiscal year 2025.

Statutory Authority:

NRS 353.268

REVIEWED: \_\_\_\_\_

ACTION ITEM: \_\_\_\_\_



JOE LOMBARDO  
GOVERNOR

CHRISTOPHER SEWELL  
DIRECTOR

DRAZEN ELEZ  
ADMINISTRATOR

**DATE:** October 15, 2024

**TO:** State Board of Examiners (BOE)

**SUBJECT:** December 2024 - Interim Finance Committee - Contingency Request - Budget Account 3265

The Bureau of Vocational Rehabilitation (BVR) seeks approval from the Board of Examiners to request funds in the amount of \$1,216,748 from the Interim Finance Committee Contingency Account to support an increase in services being provided to Nevadans with disabilities.

The Bureau has seen an increase in the need for its services since coming out of the COVID-19 pandemic. Prior to the COVID-19 pandemic, Nevada VR received approximately 150 new paper applications per month. Now, with the development of a website and online application process, Nevada VR applications have grown to approximately 350-400 per month which is a 267% increase.

The state funds being requested are also needed to fulfill the match requirement for the federal grant award that the Bureau receives from the Rehabilitation Services Administration (RSA). Per the terms of the award, all Federal funds drawn down for use must be matched in an amount equivalent to at least 21.3% of the total amount expended under the VR program. The additional \$1,216,748 in state funds will allow the Bureau to draw down an additional \$4,495,684 in federal funds.

Thank you for your attention to this matter,

*Drazen Elez*

10/15/2024

DRAZEN ELEZ  
Rehabilitation Administration  
Administrator

Phone: (702) 486-0506  
Cell: (702) 239-3481



d-elez@detr.nv.gov  
VRNevada.org



3016 W. Charleston Blvd. Suite 210  
Las Vegas, NV 89102

# State of Nevada Work Program

WP Number: C69007

FY 2025

☐ 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             |
|----------|------|--------|--------|----------------------------------|
| 09/16/24 | 101  | 901    | 3265   | DETR - VOCATIONAL REHABILITATION |

## Funds Available

| 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 | 1,216,748 | 0                 | 1,216,748         |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
| Subtotal Budgetary General Ledgers |             | 0         | Subtotal Revenue General Ledgers(RB) |                               | 1,216,748 |                   | 1,216,748         |
| Total Budgetary & Revenue GLs      |             |           |                                      |                               | 1,216,748 |                   |                   |

## Expenditures

| CAT                             | Amount    | CAT | Amount    |
|---------------------------------|-----------|-----|-----------|
| 09                              | 1,216,748 |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
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|                                 |           |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
|                                 |           |     |           |
| Sub Total Category Expenditures |           |     | 1,216,748 |

## Remarks

This work program requests an increase in State General Funds through the Interim Finance Committee Contingency funds, to the Client Services category, to fund a projected shortfall for the remainder of the fiscal year

Total Budgetary General Ledgers and  
Category Expenditures (AP)

1,216,748

**bmartin7**

Authorized Signature

**10/15/24**

Date

Controller's Office Approval

Does not require Interim Finance approval since Pursuant to NRS 353.268

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 17, 2024

To: Amy Stephenson, Director  
Governor's Finance Office

From: Lesley Volkov, 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 Examiner's meeting.

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

Agenda Item Write-up:

Pursuant to NRS 353.268, the division requests a recommendation to the Interim Finance Committee for an allocation of \$78,728 from the Interim Finance Committee Contingency Account to continue providing vocational services to the blind and visually impaired.

Additional Information:

The division requests funds to cover its vocational services to eligible individuals and disabilities obligations in fiscal year 2025.

Statutory Authority:

NRS 353.268

REVIEWED: \_\_\_\_\_

ACTION ITEM: \_\_\_\_\_



JOE LOMBARDO  
GOVERNOR

CHRISTOPHER SEWELL  
DIRECTOR

DRAZEN ELEZ  
ADMINISTRATOR

**DATE:** October 15, 2024

**TO:** State Board of Examiners (BOE)

**SUBJECT:** December 2024 - Interim Finance Committee - Contingency Request - Budget Account 3254

The Bureau of Services to the Blind and Visually Impaired (BSBVI) seeks approval from the Board of Examiners to request funds in the amount of \$78,728 from the Interim Finance Committee Contingency Account to support an increase in services being provided to Nevadans with disabilities.

The Bureau has seen an increase in the need for its services since coming out of the COVID-19 pandemic. Prior to the COVID-19 pandemic, Nevada VR received approximately 150 new paper applications per month. Now, with the development of a website and online application process, Nevada VR applications have grown to approximately 350-400 per month which is a 267% increase.

The state funds being requested are also needed to fulfill the match requirement for the federal grant award that the Bureau receives from the Rehabilitation Services Administration (RSA). Per the terms of the award, all Federal funds drawn down for use must be matched in an amount equivalent to at least 21.3% of the total amount expended under the VR program. The additional \$78,728 in state funds will allow the Bureau to draw down an additional \$290,887 in federal funds.

Thank you for your attention to this matter,

*Drazen Elez*

10/15/2024

DRAZEN ELEZ  
Rehabilitation Administration  
Administrator

Phone: (702) 486-0506  
Cell: (702) 239-3481



d-elez@detr.nv.gov  
VRNevada.org



3016 W. Charleston Blvd. Suite 210  
Las Vegas, NV 89102

# State of Nevada Work Program

WP Number: C72730

FY 2025

☐ 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                          |
|----------|------|--------|--------|---|
| 10/04/24 | 101  | 901    | 3254   | DETR - SERVICES TO BLIND OR VISUALLY IMPAIRED |

## Funds Available

| Budgetary GLs (2501 - 2599)        | Description           | WP Amount | Revenue GLs (3000 - 4999)            | Description | WP Amount | Current Authority | Revised Authority |
|------------------------------------|-----------------------|-----------|--------------------------------------|-------------|-----------|-------------------|-------------------|
| 2501                               | APPROPRIATION CONTROL | 78,728    |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
|                                    |                       |           |                                      |             |           |                   |                   |
| Subtotal Budgetary General Ledgers |                       | 78,728    | Subtotal Revenue General Ledgers(RB) |             | 0         |                   | 0                 |
| Total Budgetary & Revenue GLs      |                       |           |                                      |             | 78,728    |                   |                   |

## Expenditures

| CAT | Amount | CAT | Amount |
|-----|--------|-----|--------|
| 09  | 78,728 |     |        |
|     |        |     |        |
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|     |        |     |        |
|     |        |     |        |

Sub Total Category Expenditures

78,728

## Remarks

This work program requests an increase in State General Funds through the Interim Finance Committee Contingency funds, to the Client Services category, to fund a projected shortfall for the remainder of the fiscal year.

Total Budgetary General Ledgers and Category Expenditures (AP)

157,456

bmartin7

Authorized Signature

10/15/24

Date

Controller's Office Approval

Requires Interim Finance approval since IFC Contingency Funds Request



Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 31, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: Bridgette Mackey-Garrison, 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 SENTENCING AND POLICY**

Agenda Item Write-up:

Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$57,712 from the Interim Finance Committee Contingency Account to fund a new Management Analyst 2 position and associated costs.

Additional Information:

The department provides staff support to the Nevada Sentencing Commission (NSC) to fulfill its statutory reporting. During the 2023 Legislative Session, additional workload was added to the department when Senate Bill 103 passed and created a subcommittee within the NSC to study misdemeanor laws, policies, and practices in Nevada and in other states, and requires the NSC to submit a report and recommendations to the 2025 Legislative Session.

Pursuant to the meeting Minutes of the Senate Committee on Finance meeting on May 25, 2023, the Legislature asked the Nevada Sentencing Commission to return to the Interim Finance Committee if it's determined a new Management Analyst 2 position is necessary.

Statutory Authority:  
NRS 353.268

REVIEWED:   
ACTION ITEM: \_\_\_\_\_

Joe Lombardo  
Governor



Joy Grimmer  
Director

Bob Ragar  
Deputy Director

Daniel Marlow  
Administrator


**STATE OF NEVADA**  
**DEPARTMENT OF ADMINISTRATION**  
**ADMINISTRATIVE SERVICES DIVISION**

209 E. Musser Street, Suite 304 | Carson City, Nevada 89701  
Phone: (775) 531-3200 | [www.adminsucs.nv.gov](http://www.adminsucs.nv.gov) | Fax: (775) 684-5846

DATE: October 7, 2024

TO: Bridgette Mackey-Garrison, EBBO  
Governor's Finance Office

FROM: Daniel Marlow, Administrator

THROUGH: Jorja Powers, Director   
Nevada Department Sentencing Policy

SUBJECT: Fiscal Year 2025 Interim Finance Committee (IFC) Contingency Funds for  
Additional Staff to Comply with Senate Bill (SB) 103 of the 82<sup>nd</sup> Legislature

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This request is for approval for the Nevada Department of Sentencing Policy (NDSP) to seek additional funding of \$57,712 from the Interim Finance Committee (IFC) Contingency Account to request a new position, Management Analyst II and associated costs.

The purpose of this request is to provide an additional position, Management Analyst II for the NDSP to handle the increased workload created by SB103 of the 82<sup>nd</sup> Legislative Session while still ensuring the department can meet their statutory requirements.

In the 82<sup>nd</sup> Legislative Session, additional workload was added to NDSP when SB103 passed and created a subcommittee within the Nevada Sentencing Commission (NSC) to study misdemeanor laws, policies, and practices in Nevada and in other states, and requires the NSC to submit a report and recommendations to the Legislature of the 83<sup>rd</sup> session. The NDSP provides staff support to the NSC to fulfill its statutory reporting.

NDSP must collect data from every law enforcement agency, jail, prosecutor, public defender, district, justice, and municipal court in Nevada to conduct the study. Misdemeanor data collected will be raw and at the case level. The raw data will then need to be cleaned, filtered, organized, and housed to make it functional for analysis and to provide reporting.

This position, Management Analyst II was put in contingency upon the passing of SB103 should the agency need additional support as a result of the passage of SB103. NDSP respectfully requests for one new full-time Management Analyst II and associated operating costs to the next Board of Examiners and Interim Finance Committee meetings. Work program C72663 has been submitted for this request.

# State of Nevada Work Program

WP Number: C72663

FY 2025

☐ 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            |
|----------|------|--------|--------|---------------------------------|
| 10/07/24 | 101  | 161    | 1010   | DEPARTMENT OF SENTENCING POLICY |

## Funds Available

| 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 | 57,712    | 0                 | 57,712            |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
|                                    |             |           |                                      |                               |           |                   |                   |
| Subtotal Budgetary General Ledgers |             | 0         | Subtotal Revenue General Ledgers(RB) |                               | 57,712    |                   | 57,712            |
| Total Budgetary & Revenue GLs      |             |           |                                      |                               | 57,712    |                   |                   |

## Expenditures

| CAT                             | Amount | CAT | Amount |
|---------------------------------|--------|-----|--------|
| 01                              | 57,251 |     |        |
| 04                              | 120    |     |        |
| 26                              | 341    |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
|                                 |        |     |        |
| Sub Total Category Expenditures |        |     | 57,712 |

## Remarks

This work program requests a position and associated operating costs from the Interim Finance Committee Contingency Account to comply with Senate Bill (SB) 103 of the 82nd Nevada Legislative Session. This request is contingent upon Board of Examiner's approval in November 2024.

Total Budgetary General Ledgers and Category Expenditures (AP)

57,712

Authorized Signature

Date

Controller's Office Approval

Does not require Interim Finance approval since IFC Action Item

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 11, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Budd Milazzo, Executive Branch Budget Officer *BM*  
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 Claims request for approval:

Claimant: Maryanne Tallman  
Claim No: TC21331  
Settlement Amount: \$200,000  
Date of Loss: August 16, 2023

Payment of this claim to be made to Claimant's counsel:

Bradley, Drendel and Jeanney  
PO Box 1987  
Reno, NV 89505

Claimant: Ronnie Dean Smith  
Claim No: TC21332  
Settlement Amount: \$200,000  
Date of Loss: August 16, 2023

Payment of this claim to be made to Claimant's counsel:

Bradley, Drendel and Jeanney  
PO Box 1987  
Reno, NV 89505

Additional Information:

A settlement agreement and full and final release of further claims has been entered into for the total amount of \$200,000 for each claimant. A total of \$400,000 will be paid from the Tort Claim Fund.

Statutory Authority:

NRS 41.036

REVIEWED:  \_\_\_\_\_

ACTION ITEM: \_\_\_\_\_

AARON D. FORD  
*Attorney General*

CRAIG A. NEWBY  
*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

TERESA BENITEZ-  
THOMPSON  
*Chief of Staff*

LESLIE NINO PIRO  
*General Counsel*

HEIDI PARRY STERN  
*Solicitor General*

## MEMORANDUM

**To:** Budd Milazzo, Executive Branch Budget Officer

**From:** Nancy Katafias, Tort Claims Manager

**Date:** October 7, 2024

**Subject:** BOE Agenda Submittal  
Maryanne Tallman and Ronnie Dean Smith

---

Please place the following items on the November 12, 2024, Board of Examiner's agenda for approval. Upon approval, these payments will be paid from Budget 1348/15.

**Plaintiff:** Maryanne Tallman

**Claim No.:** TC 21331

**Payment:** \$200,000

**Payable to:** **T 27043366** Bradley Drendel and Jeanney  
PO Box 1987  
Reno NV 89505

**Plaintiff:** Ronnie Dean Smith

**Claim No.:** TC 21332

**Payment:** \$200,000

**Payable to:** **T 27043366** Bradley Drendel and Jeanney  
PO Box 1987  
Reno NV 89505

## TORT CLAIM RECOMMENDATION

DATE: September 27, 2024  
CLAIMANT: Maryanne Tallman  
CLAIM NUMBER: TC21331  
DATE OF LOSS: August 16, 2023  
AGENCY: NDOT

### DISCUSSION

In the lawsuit filed against the State of Nevada, Department of Transportation, through counsel, the claimant alleged that the NDOT employee executed an unsafe lane change in front of the vehicle occupied by the claimant and her husband. This claim is submitted for the personal injuries of Ms. Tallman. Please see TC 21332 for the personal injuries of her husband and recommended for payment in the amount of \$200,000. Please see TC 20961 for the property damage to the totaled 2010 Dodge Ram 3500 which was paid in the amount of \$29,133.47.

The investigation found that the NHP responded to the scene and cited the NDOT employee for an unsafe lane change.

Because the NDOT employee was in the course and scope of employment and driving a State vehicle, it appears the State is liable for the damages.

Payment of \$200,000 is recommended, pending Board of Examiner approval.

### RECOMMENDATION

It is recommended that the claim be paid in the amount of \$200,000.00

#### RECOMMENDATION: PAY

G/L 7352 Bradley, Drendel and Jeanney  
PO Box 1987  
Reno NV 89505

Approved:

Nancy Katafias September 27, 2024  
NANCY KATAFIAS, CLAIMS MANAGER DATE

Leslie Nino Piro September 27, 2024  
LESLIE NINO PIRO, GENERAL COUNSEL DATE

## TORT CLAIM RECOMMENDATION

DATE: September 27, 2024  
CLAIMANT: Ronnie Dean Smith  
CLAIM NUMBER: TC21332  
DATE OF LOSS: August 16, 2023  
AGENCY: NDOT

### DISCUSSION

In the lawsuit filed against the State of Nevada, Department of Transportation, through counsel, the claimant alleged that the NDOT employee executed an unsafe lane change in front of the vehicle occupied by the claimant and his wife. This claim is submitted for the personal injuries of Mr. Smith. Please see TC 21331 for the personal injuries of his wife and recommended for payment in the amount of \$200,000. Please see TC 20961 for the property damage to the totaled 2010 Dodge Ram 3500 which was paid in the amount of \$29,133.47.

The investigation found that the NHP responded to the scene and cited the NDOT employee for an unsafe lane change.

Because the NDOT employee was in the course and scope of employment and driving a State vehicle, it appears the State is liable for the damages.

Payment of \$200,000 is recommended, pending Board of Examiner approval.

### RECOMMENDATION

It is recommended that the claim be paid in the amount of \$200,000.00

#### RECOMMENDATION: PAY

G/L 7352 Bradley, Drendel and Jeanney  
PO Box 1987  
Reno NV 89505

Approved:

Nancy Katafias September 27, 2024  
NANCY KATAFIAS, CLAIMS MANAGER DATE

Leslie Nino Piro September 27, 2024  
LESLIE NINO PIRO, GENERAL COUNSEL DATE



1     **SETTLEMENT AGREEMENT AND RELEASE OF ALL CLAIMS, CONDITIONAL UPON**  
2     **APPROVAL BY THE STATE OF NEVADA BOARD OF EXAMINERS**

3     This Settlement Agreement and Release of All Claims ("Settlement Agreement") is made and  
4 entered into by and between Plaintiff MARYANNE TALLMAN ("PLAINTIFF TALLMAN"), Plaintiff  
5 RONNIE DEAN SMITH ("PLAINTIFF SMITH"), and Defendant THE STATE OF NEVADA, ON  
6 RELATION OF ITS DEPARTMENT OF TRANSPORTATION ("DEFENDANT STATE"), and  
7 Defendant Samuel Moore ("DEFENDANT MOORE").

8     WHEREAS, on or about November 9, 2023, PLAINTIFFS TALLMAN and SMITH filed a  
9 Complaint within the First Judicial District Court of the State of Nevada, in and for Carson City, Case  
10 No. 23TRT000751B, entitled: *"MARYANNE TALLMAN and RONNIE DEAN SMITH, individually and*  
11 *as Husband and Wife, Plaintiffs, vs. STATE OF NEVADA. EX REL. NEVADA DEPARTMENT OF*  
12 *TRANSPORTATION and SAMUEL MOORE; DOES 1 through X, inclusive; ABC CORPORATIONS I*  
13 *THROUGH X, inclusive; and BLACK and WHITE COMPANIES, I through X Defendants* ("Subject  
14 Litigation"); and

15     WHEREAS, the Subject Litigation arises from a vehicular accident of August 16, 2023,  
16 occurring on Interstate 80, near Mile Marker 69, located in Nevada, at which time, PLAINTIFF  
17 TALLMAN, while driving a vehicle also occupied by her husband Plaintiff Smith, struck  
18 DEFENDANT STATE's road maintenance vehicle driven by DEFENDANT MOORE, while  
19 DEFENDANT MOORE and DEFENDANT STATE were engaged in road maintenance operations  
20 ("Subject Accident"); and

21     WHEREAS, because of the Subject Accident, PLAINTIFFS TALLMAN and SMITH have  
22 brought their negligence action against DEFENDANT STATE, and DEFENDANT MOORE, for  
23 injuries and damages received in the Subject Accident; and

24     WHEREAS, PLAINTIFFS TALLMAN and SMITH, and DEFENDANTS STATE and  
25 MOORE desire to resolve and settle all existing and potential disputes between them, that have and  
26 could have been raised in the Subject Litigation, without an admission of liability made by  
27 DEFENDANTS STATE and MOORE.

28     NOW, THEREFORE, in consideration of the mutual covenants and other good and valuable

1 consideration as set forth herein, PLAINTIFFS TALLMAN and SMITH, AND DEFENDANTS  
2 STATE and MOORE agree as follows:

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

4 For and in consideration of:

5 (A) DEFENDANT STATE'S payment to PLAINTIFF MARYANNE TALLMAN, the sum  
6 of Two Hundred Thousand and 00/100 Dollars (\$200,000.00) made payable to the Bradley, Drendel &  
7 Jeanney Trust Fund; and

8 (B) DEFENDANT STATE'S payment to PLAINTIFF RONNIE DEAN SMITH, the sum of  
9 Two Hundred Thousand and 00/100 Dollars (\$200,000.00) made payable to the Bradley, Drendel &  
10 Jeanney Trust Fund; and

11 (C) The parties' signatures, as well as those of their authorized representatives to this  
12 Settlement Agreement and Release of All Claims, and its accompanying Stipulation and Order for  
13 Dismissal With Prejudice, in the content and form attached hereto and incorporated herein as Exhibit A.

14 PLAINTIFFS TALLMAN and SMITH hereby fully and forever release, acquit and discharge  
15 DEFENDANTS STATE, and MOORE, together with The State of Nevada, as well as their  
16 administrators, agencies, assignees. Attorneys, contractors, departments, directors, divisions,  
17 employees, employers, executors, heirs, insurers, officers, principals, representatives, servants,  
18 subrogees, subsidiaries, successors, spouses, former spouses, and future spouses, of and from any and  
19 all attorney's fees, causes of action, claims, costs, damagers, expenses, indemnities, liabilities, liens,  
20 including but not limited to medical liens, Medicare liens, Medicaid liens, attorney's liens, towing liens,  
21 storage liens, and obligations of every kind and nature, in law, equity, or otherwise, filed or otherwise,  
22 presently known and unknown, suspected and unsuspected, disclosed and undisclosed, which they now  
23 have or may hereafter acquire by reason of any injuries, losses, and damages, actual and consequential,  
24 arising out of or in any way related to the Subject Accident, occurrence, casualty, event and/or series of  
25 events arising from the vehicular accident alleged, or which could have been alleged by PLAINTIFFS  
26 TALLMAN and SMITH within the Subject Litigation, and relating to the vehicular accident alleged by  
27 PLAINTIFFS TALLMAN and SMITH to have occurred on or about August 16, 2023, occurring on  
28 Interstate 80, near Mile Marker 69, located in Nevada.

1           (D)    The Settlement of the Subject Litigation as contemplated by this Settlement Agreement  
2 and Release Of All Claims, is conditioned upon approval by the State of Nevada, Board of Examiners,  
3 which approval will be sought by DEFENDANTS STATE and MOORE, upon the full and complete  
4 execution of this Settlement Agreement and Release Of All Claims.

5           (E)    PLAINTIFFS TALLMAN and SMITH expressly understand and recognize that their  
6 injuries, damages, and losses may not be fully known, and may be more numerous and more serious  
7 than now expected. PLAINTIFFS TALLMAN and SMITH specifically recognize and accept the risk  
8 of the possible existence of any presently unknown and unanticipated injuries and damages resulting  
9 from the Subject Accident, which may be discovered after the execution of this Settlement Agreement  
10 and Release of All Claims, and/or the possibility that a known injury and damage may be or become  
11 more serious than now expected.

12           (F)    PLAINTIFFS TALLMAN and SMITH understand and acknowledge that the payment  
13 and receipt of the aforementioned settlement proceeds shall constitute a full and complete satisfaction  
14 of all of the Parties' alleged, existing and potential disputes and claims that the aforementioned parties  
15 have and could have raised against one another relative to the Subject Litigation and Subject Accident  
16 and concerning all matters relating to their subject matters.

17           **II.    DISMISSAL OF ACTION WITH PREJUDICE:**

18           This Settlement Agreement and Release of All Claims is expressly contingent upon approval of  
19 the State of Nevada, Board of Examiners, and the Court's issuance of an Order for Dismissal of the  
20 Subject Litigation, With Prejudice. Counsel for PLAINTIFFS TALLMAN and SMITH, and  
21 DEFENDANTS STATE and MOORE shall execute a Stipulation and Order for Dismissal with  
22 Prejudice in the content and form attached hereto as Exhibit A, dismissing the Subject Litigation, with  
23 Prejudice, and providing that each party hereto shall bear their own costs and attorney's fees, and  
24 further providing that the Court Clerk shall return jury fees to those parties who have posted the same.

25           **III.   NO ADMISSIONS:**

26           It is understood and agreed by the parties hereto that this Settlement Agreement and Release of  
27 All Claims represents a compromise and settlement of various matters, and that the promises of  
28 payment made in consideration of this Settlement Agreement and Release of All Claims shall not be

1 construed to be an admission of any liability or obligation by any Party hereto.

2 **IV. TAXES:**

3 DEFENDANTS STATE and MOORE shall not withhold any amounts for taxes or social  
4 security or other deductions from the Settlement Payments made pursuant to this Settlement Agreement  
5 and Release of All Claims. PLAINTIFFS TALLMAN and SMITH shall consult with their own  
6 certified public accountants and/or tax attorneys and shall be responsible for all taxes, if any, which  
7 may be due on the Settlement Payments.

8 **V. OTHER BENEFITS:**

9 Except as specifically set forth in this Settlement Agreement and Release of All Claims,  
10 PLAINTIFFS TALLMAN and SMITH shall be entitled to no other benefits or other remuneration or  
11 compensation in the settlement of their claims against DEFENDANTS STATE and MOORE, arising  
12 from and related to the Subject Accident, and the matters that have and could have been raised in the  
13 Subject Litigation, and concerning all matters relating to their subject matters, and relating to any and  
14 all disputes between the parties to this Settlement Agreement and Release of all Claims.

15 **VI. LIENS:**

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

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

27 PLAINTIFFS TALLMAN and SMITH recognize that other persons and entities may possess  
28 certain rights to reimbursement or payment from the proceeds of this settlement. PLAINTIFFS

1 TALLMAN and SMITH covenant and agree to protect, hold harmless, defend and indemnify  
2 DEFENDANTS STATE and MOORE, and all other persons and entities herein released of and from  
3 any losses, liabilities, claims, expenses, demands, and causes of action of any kind or character,  
4 including claims for attorney's fees, court costs, and liens of any nature, including but not limited to  
5 medical liens, Medicare liens, Medicaid liens, attorney's liens, towing liens, and storage liens, arising  
6 from or through the assertions made by any strangers hereto of a claim or claims connected with the  
7 subject matter of the Subject Accident, and Subject Litigation, and connected with this Settlement  
8 Agreement and Release of All Claims, and or connected with and incurred through any breach by  
9 PLAINTIFFS TALLMAN and SMITH, of their obligations, warranties and representations herein  
10 contained.

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

12 Each party to this Settlement Agreement and Release of All Claims shall pay their own  
13 attorney's fees and costs arising out of or in any way related to and/or connected with the Subject  
14 Litigation, and Subject Accident, with the exception that DEFENDANT STATE shall pay the  
15 attorney's fees and costs associated with the representation of DEFENDANT MOORE within the  
16 Subject Litigation.

17 **IX. ASSIGNMENT:**

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

21 **X. CONSTRUCTION OF AGREEMENT:**

22 Each Party to this Settlement Agreement and Release of All Claims has participated in the  
23 preparation and drafting of the same. As such, the parties acknowledge that with regard to any  
24 ambiguity in this Settlement Agreement and Release of All Claims, any doctrine of law which may  
25 operate to imply any ambiguity in this Settlement Agreement and Release of All Claims against any  
26 party hereto as the profferer of the Settlement Agreement and Release of All Claims, is not applicable  
27 to this Settlement Agreement and Release of All Claims. Accordingly, this Settlement Agreement and  
28 Release of All Claims shall be interpreted as if the parties jointly and equally prepared and drafted each

1 word, sentence, and paragraph therein.

2 **XI. APPLICABLE LAW:**

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

8 **XII. TERMS:**

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

16 **XIII. NON-CONFIDENTIAL PUBLIC RECORD:**

17 Pursuant to the provisions of NRS 41.0375, this Settlement Agreement and Release of All  
18 Claims shall be non-confidential and shall constitute a public record open for inspection pursuant to the  
19 provisions of NRS 239.010.

20 **XIV. SUCCESSORS AND ASSIGNS:**

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

26 **XV. SEVERABILITY:**

27 The illegality or invalidity of any provision or portion of this Settlement Agreement and Release  
28 of All Claims shall not affect the validity of the remainder of the Settlement Agreement and Release of

1 All Claims, and this Settlement Agreement and Release of All Claims shall be construed as if such  
2 provision did not exist. The unenforceability of such provision shall not be held to render any other  
3 provision or provisions of this Settlement Agreement and Release of All Claims unenforceable.

4 Any provision of this Settlement Agreement and Release of All Claims which conflicts with  
5 NRS 41.0375, is void.

6 **XVI. BREACH OF SETTLEMENT AGREEMENT AND RELEASE OF ALL**  
7 **CLAIMS:**

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

11 **XVII. ENTIRETY OF AGREEMENT:**

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

23 **XVIII. AUTHORITY TO EXECUTE:**

24 The parties hereto represent that they have the authority to execute this Settlement Agreement  
25 and Release of All Claims on behalf of the persons and entities on whose behalf they are signing. The  
26 parties hereto further represent that the signatures on this Settlement Agreement and Release of All  
27 Claims are the genuine, usual and customary signatures of the persons executing this Settlement  
28 Agreement and Release of All Claims, and are fully binding on such persons and entities, and each

1 person signing is legally and mentally competent to sign this Settlement Agreement and Release of All  
2 Claims, and is fully authorized by law to bind himself, herself, itself, or the principal on whose behalf  
3 they are signing. The parties hereto may execute this Settlement Agreement and Release of All Claims  
4 in counterparts.

5 WHEREFORE, THE FOLLOWING PERSONS AND ENTITIES FREELY AND  
6 VOLUNTARILY SIGN THIS SETTLEMENT AGREEMENT AND RELEASE OF ALL CLAIMS  
7 ON THE DATES INDICATED BELOW:

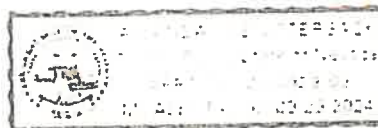
8 DATED this 26 day of September, 2024.

9  
10  
11 By: Maryanne Tallman  
12 MARYANNE TALLMAN, individually and as wife  
13 to RONNIE DEAN SMITH

14 STATE OF NEVADA )  
15 ) SS  
16 COUNTY OF Humboldt )

17 On this 26<sup>th</sup> day of September, 2024, before me the undersigned, a Notary  
18 Public in and for said County and State, appeared MARYANNE TALLMAN, known to me, or proven  
19 to me by reliable evidence, to be the person who executed the above and foregoing instrument, and who  
20 acknowledged to me that this instrument is freely and voluntarily executed for the purposes therein  
21 mentioned

22 Ahmeda J. Uttabach  
23 NOTARY PUBLIC



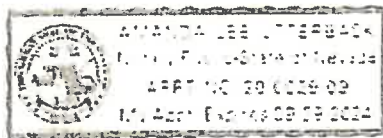


1 DATED this 26 day of September, 2024.

2  
3  
4 By: Ronnie Dean Smith  
5 RONNIE DEAN SMITH, individually, and as  
6 husband to MARYANNE TALLMAN

7 STATE OF NEVADA )  
8 COUNTY OF Humboldt ) SS.

9 On this 26<sup>th</sup> day of September, 2024, before me the undersigned, a Notary  
10 Public in and for said County and State, appeared RONNIE DEAN SMITH, an individual, known to  
11 me, or proven to me by reliable evidence, to be the person who executed the above and foregoing  
12 instrument, and who acknowledged to me that this instrument is freely and voluntarily executed for the  
13 purposes therein mentioned.



18  
19 Amanda Lee Utterback  
20 NOTARY PUBLIC

21 APPROVED AS TO FORM AND CONTENT:

22 DATED this 26 day of September, 2024.

23 LAW OFFICES OF BRADLEY, DRENDEL, & JEANNEY

24 By: [Signature] for NV 15534  
25 WILLIAM C. JEANNEY, ESQ. (Bar No. 1235)  
26 P. O. Box 1987  
27 6900 S. McCarren Blvd, Suite 2000  
28 Reno, NV 8950  
Email: wjeanne@bdjlaw.com  
Telephone: (775)335-9999  
Fax: (775)335-9993

Attorneys for Plaintiff MARYANNE TALLMAN  
And RONNIE DEAN SMITH

1 DATED this 26 day of September, 2024.

2  
3 THE STATE OF NEVADA, acting by and through its  
4 DEPARTMENT OF TRANSPORTATION

5 By: Tracy Larkin Thomason  
6 TRACY LARKIN THOMASON, P.E. Director  
7 Nevada Department of Transportation

8 STATE OF NEVADA )  
9 COUNTY OF Carson City ) SS.

10 On this 26<sup>th</sup> day of September, 2024, before me the undersigned, a Notary Public  
11 in and for said County and State, appeared TRACY LARKIN THOMASON, P. E., DIRECTOR,  
12 NEVADA DEPARTMENT OF TRANSPORTATION, known to me, or proven to me by reliable  
13 evidence, to be the person who executed the above and foregoing instrument, and who acknowledged to  
14 me that this instrument is freely and voluntarily executed for the purposes therein mentioned.



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NOTARY PUBLIC

A handwritten signature in blue ink, likely belonging to the Notary Public, Lisa Shinkevich, written over the "NOTARY PUBLIC" text.

1 DATED this 26 day of September, 2024.

2  
3 By: Sam Moore  
4 SAMUEL MOORE, an individual

5 STATE OF NEVADA )  
6 ) SS.  
7 COUNTY OF Humboldt )

8 On this 26 day of September, 2024, before me the undersigned, a Notary Public  
9 in and for said County and State, appeared SAMUEL MOORE, an individual, known to me, or proven  
10 to me by reliable evidence, to be the person who executed the above and foregoing instrument, and who  
11 acknowledged to me that this instrument is freely and voluntarily executed for the purposes therein  
12 mentioned.



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Tamera L. Cruz  
NOTARY PUBLIC

APPROVED AS TO FORM AND CONTENT:

DATED this 26th day of September 2024.

AARON D. FORD  
Attorney General

By: Roger Kent Miles  
ROGER KENT MILES (Bar No. 4467)  
Senior Deputy Attorney General  
Department of Transportation  
1263 South Stewart Street, Room 315  
Carson City, Nevada 89712  
Email: [rmiles@ag.nv.gov](mailto:rmiles@ag.nv.gov)  
Telephone: (775) 888-7420  
Fax: (775) 684-4601

*Attorneys for Defendants State of Nevada  
on relation of its Department of Transportation, and  
Samuel Moore*

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EXHIBIT A

EXHIBIT A

1 AARON D. FORD  
2 Attorney General  
3 ROGER KENT MILES (NV Bar No. 4467)  
4 Senior Deputy Attorney General  
5 1263 South Stewart Street, Room 315  
6 Carson City, Nevada 89712  
7 rmiles@ag.nv.gov  
8 Tel.: (775) 888-7419  
9 Fax: (775) 684-4601  
10 *Attorneys for Defendants State of Nevada,*  
11 *on relation of its Department of*  
12 *Transportation, and Samuel Moore*

8  
9 **IN THE FIRST JUDICIAL DISTRICT COURT OF**  
10 **THE STATE OF NEVADA IN AND FOR CARSON CITY**

11 MARY ANNE TALLMAN and RONNIE  
12 DEAN SMITH, individually and as Husband and  
13 Wife,

Case No. 23-TRT-00075 1B

Dept. No. 1

13 Plaintiffs,

**STIPULATION AND ORDER FOR  
DISMISSAL WITH PREJUDICE**

14 vs.

15 STATE OF NEVADA, EX REL, NEVADA  
16 DEPARTMENT OF TRANSPORTATION; and  
17 SAMUEL MOORE; DOES I through X,  
18 inclusive; ABC CORPORATIONS I through X,  
19 inclusive, and BLACK AND WHITE  
20 COMPANIES I through X inclusive,

21 Defendants.  
22 \_\_\_\_\_/


23 IT IS HEREBY STIPULATED AND AGREED by and between Plaintiffs MARYANNE  
24 TALLMAN and RONNIE DEAN SMITH, and Defendants STATE OF NEVADA, ON RELATION  
25 OF ITS DEPARTMENT OF TRANSPORTATION, and SAMUEL MOORE, by and through their  
26 respective undersigned counsel of record, that the above-entitled action shall be dismissed with  
27 prejudice, in its entirety, with each party to bear their own costs and attorney's fees, with the exception  
28 that Defendant STATE OF NEVADA, ON RELATION OF ITS DEPARTMENT OF  
TRANSPORTATION shall bear the attorney's fees and costs arising from the representation of

1 Defendant SAMUEL MOORE within the instant action. Further, the Court Clerk shall return jury fees  
2 to those parties having posted the same.

3 Further, the undersigned do hereby affirm that this document does not contain the Social  
4 Security Number of any person.

5 IT IS SO STIPULATED

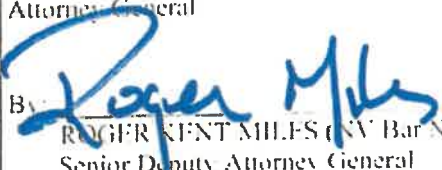
6  
7 BRADLEY, DRENDEL & JEANNEY

8 By:  for <sup>NV15534</sup>  
9 WILLIAM C. JEANNEY, ESQ. (NV Bar No. 1235)  
10 P. O. Box 1987  
11 6900 S. McCarran Blvd, Suite 2000  
12 Reno, NV 8950

DATED September 26 2024.

*Attorneys for Plaintiffs Maryanne Tallman, and  
Ronnie Dean Smith*

13  
14 ARRON D. FORD  
15 Attorney General

16 By:   
17 ROGER KENT MILES (NV Bar No. 4467)  
18 Senior Deputy Attorney General  
19 Department of Transportation  
20 1263 South Stewart Street, Room 315  
21 Carson City, Nevada 89712

DATED September 26 2024.

*Attorneys for Defendants State of Nevada, on relation of  
its Department of Transportation, and Samuel Moore*

22  
23 IT IS SO ORDERED:

24  
25 DATED \_\_\_\_\_  
26 DISTRICT COURT JUDGE

**CERTIFICATE OF SERVICE**

I certify that I am an employee of the Office of the Attorney General, State of Nevada, and that  
on \_\_\_\_\_, 2024, I filed and served the foregoing STIPULATION AND ORDER FOR  
DISMISSAL WITH PREJUDICE, by depositing a copy of the above-referenced document for mailing  
in the United States Mail, first-class postage prepaid, at Carson City, Nevada to the following:

WILLIAM C. JEANNEY, ESQ.  
BRADLEY, DRENDEL & JEANNEY  
P. O. Box No. 1987  
Reno, Nevada 89505

By: /s/ Pamela Rollings  
Pamela Rollings, an employee of  
the Office of the Nevada Attorney General

# LEASES SUMMARY

| BOE # | LESSEE   |  | LESSOR                                 | AMOUNT                        |
|-------|--|--|--|-------------------------------|
| 1.    | DEPARTMENT OF ADMINISTRATION – DIVISION OF RISK MANAGEMENT |  | NEVADA PUBLIC AGENCY INSURANCE POOL    | \$183,955                     |
|       |  | This is an extension of an existing lease. |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>02/01/2025<br/>–<br/>01/31/2030</b> | <b>Located in Carson City</b> |
| 2.    | DEPARTMENT OF MOTOR VEHICLES                               |  | BUCKINGHAM HOLDINGS, LLC               | \$490,581                     |
|       |  | This is an extension of an existing lease. |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>07/01/2024<br/>–<br/>06/30/2029</b> | <b>Located in Winnemucca</b>  |
| 3.    | DEPARTMENT OF TAXATION                                     |  | INCLINE CAPITAL GROUP, LLC             | \$1,795,822                   |
|       |  | This is a new location.                    |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>03/01/2025<br/>–<br/>02/28/2030</b> | <b>Located in Reno</b>        |
| 4.    | NEVADA FUNERAL AND CEMETERY SERVICES BOARD                 |  | GRIFFIN PRO LLC                        | \$114,097                     |
|       |  | This is an extension of an existing lease. |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>02/01/2025<br/>–<br/>01/31/2030</b> | <b>Located in Reno</b>        |
| 5.    | OFFICE OF THE MILITARY                                     |  | REAL ONYX MANAGEMENT GROUP LLC         | \$86,636                      |
|       |  | This is an extension of an existing lease. |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>07/01/2024<br/>–<br/>06/30/2026</b> | <b>Located in Las Vegas</b>   |
| 6.    | PRIVATE INVESTIGATORS LICENSING BOARD                      |  | DURANGO DRIVE NV LLC                   | \$286,649                     |
|       |  | This is an extension of an existing lease. |  |                               |
|       |  | <b>Term of Lease:</b>                      | <b>12/01/2024<br/>–<br/>11/30/2029</b> | <b>Located in Las Vegas</b>   |



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:                 |  |
| Reviewed by:                 |  |
| Reviewed by:                 |  |

### STATEWIDE LEASE INFORMATION

|  |  |                           |               |                                       |                                     |                                |                             |
|--|--|---------------------------|---------------|---------------------------------------|-------------------------------------|--------------------------------|-----------------------------|
| 1. Agency:   | Department of Administration<br>Division of Risk Management<br>201 South Roop Street, Suite 201<br>Carson City, Nevada 89701<br>Mandy Hagler<br>T: (775) 687-1755 E: mhagler@admin.nv.gov  |                           |               |                                       |                                     |                                |                             |
| Remarks:   | 5 year lease renewal with a 3% increase year one (1) and every other year for the remainder of the lease, and includes two (2) conference rooms at no charge to the tenant. Lease renewal approved by Director Joy Grimmer. No tenant improvements.                                |                           |               |                                       |                                     |                                |                             |
| Exceptions/Special notes:                                  |  |                           |               |                                       |                                     |                                |                             |
| 2. Lessee:   | Department of Administration, Public Works Division, Buildings and Grounds   |                           |               |                                       |                                     |                                |                             |
| 3. Name of Lessor:   | Nevada Public Agency Insurance Pool  |                           |               |                                       |                                     |                                |                             |
| 4. Address of Lessor:                                      | 201 South Roop Street, Suite 102<br>Carson City, Nevada 89701  |                           |               |                                       |                                     |                                |                             |
| 5. Property contact:                                       | Wayne Carlson<br>T: (775) 885-7475 E: waynecarlson@poolpact.com  |                           |               |                                       |                                     |                                |                             |
| 6. Address of Lease property:                              | 201 South Roop Street, Suite 201<br>Carson City, Nevada 89701  |                           |               |                                       |                                     |                                |                             |
| a. Square Footage:   | <input type="checkbox"/> Rentable<br><input checked="" type="checkbox"/> Usable 1,809  |                           |               |                                       |                                     |                                |                             |
| 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 |
|  | 3%   | \$ 2,993.53               | 12            | \$ 35,922.36                          | February 1, 2025 - January 31, 2026 | \$0.00                         | \$1.65                      |
|  | 0%   | \$ 2,993.53               | 12            | \$ 35,922.36                          | February 1, 2026 - January 31, 2027 | \$0.00                         | \$1.65                      |
|  | 3%   | \$ 3,083.34               | 12            | \$ 37,000.08                          | February 1, 2027 - January 31, 2028 | \$0.00                         | \$1.70                      |
|  | 0%   | \$ 3,083.34               | 12            | \$ 37,000.08                          | February 1, 2028 - January 31, 2029 | \$0.00                         | \$1.70                      |
|  | 3%   | \$ 3,175.84               | 12            | \$ 38,110.08                          | February 1, 2029 - January 31, 2030 | \$0.00                         | \$1.76                      |
| c. Total Lease Consideration:                              | 60   |                           | \$ 183,954.96 |                                       |                                     |                                |                             |
| d. Total Improvement Cost:                                 |  |                           |               |                                       | \$0.00                              |                                |                             |
| e. Option to renew:  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |                           | 90            | Renewal terms: One (1) Identical Term |                                     |                                |                             |
| f. Holdover notice:  | # of Days required   |                           | 30            | Holdover terms: 5%/90                 |                                     |                                |                             |
| g. Term:   | Five (5) Years   |                           |               |                                       |                                     |                                |                             |
| h. Pass-thrus/CAM/Taxes                                    | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant   |                           |               |                                       |                                     |                                |                             |
| i. Utilities:  | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant   |                           |               |                                       |                                     |                                |                             |
| j. Janitorial:   | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes) |                           |               |                                       |                                     |                                |                             |
| k. Repairs:  | Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant  |                           |               |                                       |                                     |                                |                             |
| l. Comparable Area Market Rate Average:                    | \$1.52   |                           |               |                                       |                                     |                                |                             |
| m. Specific termination clause in lease:                   | Breach/Default lack of funding   |                           |               |                                       |                                     |                                |                             |
| n. Lease will be paid for by Agency Budget Account Number: | 1352   |                           |               |                                       |                                     |                                |                             |

7. 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

RECEIVED  
 OCT 03 2024  
 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

Mandy Hagler

Mandy Hagler (Sep 30, 2024 11:13 PDT)

09/30/2024

Authorized Agency Signature

Date

7

For Public Works Information:

8. 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 type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/> |  |
| e. Ownership Type (Domestic, Foreign, Government, etc.):                               |   |  |
| f. Nevada Business ID Number:  | NV20121663710   | Exp: 11/30/2024                        |
| 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 | <input checked="" type="checkbox"/> YES   | <input type="checkbox"/> NO            |
| i. State of Nevada Vendor number:  | T32000480   |  |
| j. Is this an Arms Length Transaction (No Conflict of Interest)                        | <input checked="" type="checkbox"/> YES   | <input type="checkbox"/> NO            |
| **If No, explain....   |   |  |

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

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

[Signature]  
Authorized Signature  
Public Works Division

09/30/2024

Date

For Board of Examiners

☒ YES

☐ NO

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

### STATEWIDE LEASE INFORMATION

|  |  |                           |               |                              |                                  |
|--|--|---------------------------|---------------|------------------------------|----------------------------------|
| 1. Agency:   | Department of Motor Vehicles<br>555 Wright Way<br>Carson City, Nevada 89711<br>Jarrod Carpenter<br>T: 775-684-4804 E: jarrodcarpenter@dmv.nv.gov   |                           |               |                              |                                  |
| Remarks:   | Lease Renewal Rural Area   |                           |               |                              |                                  |
| Exceptions/Special notes:                                  | Director Robb approved for 5 year term. Current rate \$1.41, negotiated rate \$1.60 Market rate is for 1 location at a MG rate of \$1.99. Tenant Improvements to include addition of new counter work stations, Tenant improvements cost of \$64,193 to be paid by lessor and Tenant to reimburse for 24months. This is a retroactive lease as lessor had difficulty finding a contract for Tenant Improvements in rural area. |                           |               |                              |                                  |
| 2. Lessee:   | Department of Administration, Public Works Division, Building and Grounds  |                           |               |                              |                                  |
| 3. Name of Lessor:   | Buckingham Holdings, LLC   |                           |               |                              |                                  |
| 4. Address of Lessor:                                      | PO Box 10<br>Paradise Valley, Nevada 89426   |                           |               |                              |                                  |
| 5. Property contact:                                       | Kendall Swenson<br>T: 775-623-3388 E: kendall@swensoncocpa.com   |                           |               |                              |                                  |
| 6. Address of Lease property:                              | 3505 Construcion Way<br>Winnemucca, Nevada 89445   |                           |               |                              |                                  |
| a. Square Footage:   | <input type="checkbox"/> Rentable<br><input type="checkbox"/> Usable 3,166 77,636 square feet fenced training course   |                           |               |                              |                                  |
| b. Cost:   | cost per month   | # of months in time frame | cost per year | time frame                   | Approximate cost per square foot |
|  | \$ 7,740.34  | 24                        | \$ 185,768.16 | July 1, 2024 - June 30, 2026 | \$1.60                           |
| 3%   | \$ 5,217.57  | 12                        | \$ 62,610.84  | July 1, 2026 - June 30, 2027 | \$1.65                           |
| 3%   | \$ 5,374.10  | 12                        | \$ 64,489.20  | July 1, 2027 - June 30, 2028 | \$1.70                           |
| 3%   | \$ 5,535.32  | 12                        | \$ 66,423.84  | July 1, 2028 - June 30, 2029 | \$1.75                           |
| Office Space   |  |                           | \$ 379,292.04 |                              | \$1.67                           |
| 3%   | \$ 1,746.81  | 12                        | \$ 20,961.72  | July 1, 2024 - June 30, 2025 | \$0.0225                         |
| 3%   | \$ 1,799.21  | 12                        | \$ 21,590.52  | July 1, 2025 - June 30, 2026 | \$0.0232                         |
| 3%   | \$ 1,853.19  | 12                        | \$ 22,238.28  | July 1, 2026 - June 30, 2027 | \$0.0239                         |
| 3%   | \$ 1,908.78  | 12                        | \$ 22,905.36  | July 1, 2027 - June 30, 2028 | \$0.0246                         |
| 3%   | \$ 1,966.04  | 12                        | \$ 23,592.48  | July 1, 2028 - June 30, 2029 | \$0.0253                         |
| Fenced Course  |  |                           | \$ 111,288.36 |                              | \$0.0240                         |
| c. Total Lease Consideration:                              | 60 \$ 490,580.40   |                           |               | \$64,193.00                  |                                  |
| d. Total Improvement Cost:                                 |  |                           |               |                              |                                  |
| 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 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)   |                           |               |                              |                                  |
| 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:                    | Market Rate \$1.99, Current rate \$1.41, Negotiated Rate \$1.60  |                           |               |                              |                                  |
| m. Specific termination clause in lease:                   | Breach/Default lack of funding   |                           |               |                              |                                  |
| n. Lease will be paid for by Agency Budget Account Number: | 4735   |                           |               |                              |                                  |
| 7. This lease constitutes:                                 | <input checked="" type="checkbox"/> An extension of an existing lease<br><input type="checkbox"/> An addition to current facilities (requires estimated expenses)<br><input type="checkbox"/> A relocation (requires estimated expenses)<br><input type="checkbox"/> A new location (requires estimated expenses)<br><input type="checkbox"/> Remodeling only<br><input type="checkbox"/> Other                                |                           |               |                              |                                  |
| a. Estimated Expenses:                                     | Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00   |                           |               |                              |                                  |

**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

Beth M 9/30/2024  
Authorized Agency Signature Date

For Public Works Information:

**8. 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 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 |  |
| e. Ownership Type (Domestic, Foreign, Government, etc.):                                       | Domestic  |  |
| f. Nevada Business ID Number:  | NV20121067943   | Exp: 1/31/2024                         |
| 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:  | T32001614   |  |
| j. Is this an Arms Length Transaction (No Conflict of Interest)                                | <input checked="" type="checkbox"/> YES   | <input type="checkbox"/> NO            |
| **If No, explain....   |   |  |

**9. Compliance with NRS 331.110, Section 1, Paragraph 2:**

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

[Signature] 10.2.24  
Authorized Signature Date  
Public Works Division  
GM  
For Board of Examiners ☒ YES ☐ NO

Joe Lombardo  
Governor



Joy Grimmer  
Director

Bob Ragar  
Deputy Director

Wilfred J. Lewis, Jr.  
Administrator

Carson City Office:  
680 W. Nye Ln, Suite 103  
Carson City, Nevada 89703  
Phone: (775) 684-4141

**STATE OF NEVADA**  
**DEPARTMENT OF ADMINISTRATION**  
**PUBLIC WORKS DIVISION**

Las Vegas Office:  
7115 Amigo Street, Suite 100  
Las Vegas, NV 89119  
Phone: (702) 486-5115

Date: October 2, 2024

To: Vince Young-Brown, Budget Analyst

From: Grace Mason, Public Works Division, Leasing Services

Subject: Retroactive Memo for placement on November's 2024 BOE agenda

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Projected BOE Date: November 12<sup>th</sup>, 2024

BOE Deadline Date: October 8<sup>th</sup>, 2024

Lessor: Buckingham Holdings, LLC

Tenant: Department of Motor Vehicles

Property Location: 3505 Construction Way, Winnemucca, Nevada 89445

This memo is a clarification for a retroactive start date of July 1, 2024, for the lease referenced above, which houses the Department of Motor Vehicles.

Due to an unanticipated delay with the lessor having difficulty finding a contractor/vendor in a rural area to complete the agencies requested tenant improvements, further delaying negotiations, this created a delay for submittal to BOE prior to the July 1<sup>st</sup> start date.

Current rate is 1.60 per SF, Tenant improvements include new counter work stations. TI costs are being paid by the Lessor. Tenant to amortized cost of TI for 2 years.

This lease is for placement on the November 12<sup>th</sup> Board of Examiners meeting.

Thank You,

Grace Mason

**RECEIVED**  
**OCT 03 2024**  
GOVERNOR'S FINANCE OFFICE  
BUDGET DIVISION



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:   | Department of Taxation<br>3850 Arrowhead Drive, 2nd Floor<br>Carson City, NV 89706<br>Contact: Bonnie Long<br>Phone: (702)486-2317<br>Email: blong@tax.state.nv.us  |                           |                                       |               |                                   |                                |                             |
| Remarks:   | This is a NEW full service lease for Department of Taxation. The lease was negotiated at \$2.32 per SF with 3.5% increases annually. Tenant improvements include installation glass & bullet proof windows, carpet and paint, addition of 6 offices, Mother's room, conference room, fax/copy room. RTW funds are being utilized to pay for the agencies furniture.                             |                           |                                       |               |                                   |                                |                             |
| Exceptions/Special notes:                                  |   |                           |                                       |               |                                   |                                |                             |
| 2. Lessee:   | Department of Administration, Public Works Division, Buildings and Grounds  |                           |                                       |               |                                   |                                |                             |
| 3. Name of Lessor:   | Incline Capital Group, LLC  |                           |                                       |               |                                   |                                |                             |
| 4. Address of Lessor:                                      | P.O Box 18135<br>Reno, Nevada 89521   |                           |                                       |               |                                   |                                |                             |
| 5. Property contact:                                       | Matt Grimes<br>T: 775.356.6290 E: matt.grimes@cbre.com  |                           |                                       |               |                                   |                                |                             |
| 6. Address of Lease property:                              | 9850 Double R Blvd, Suite 101<br>Reno, Nevada 89521   |                           |                                       |               |                                   |                                |                             |
| a. Square Footage:   | <input checked="" type="checkbox"/> Rentable<br><input type="checkbox"/> Usable 12,029  |                           |                                       |               |                                   |                                |                             |
| 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%  | \$ 27,907.28              | 12                                    | \$ 334,887.36 | March 1, 2025 - February 28, 2026 | \$0.00                         | \$0.00                      |
|  | 3.5%  | \$ 28,884.03              | 12                                    | \$ 346,608.36 | March 1, 2026 - February 28, 2027 | \$0.00                         | \$0.00                      |
|  | 3.5%  | \$ 29,894.97              | 12                                    | \$ 358,739.64 | March 1, 2027 - February 29, 2028 | \$0.00                         | \$0.00                      |
|  | 3.5%  | \$ 30,941.29              | 12                                    | \$ 371,295.48 | March 1, 2028 - February 28, 2029 | \$0.00                         | \$0.00                      |
|  | 3.5%  | \$ 32,024.24              | 12                                    | \$ 384,290.88 | March 1, 2029 - February 28, 2030 | \$0.00                         | \$0.00                      |
| c. Total Lease Consideration:                              |   | 60                        | \$1,795,821.72                        |               |                                   |                                |                             |
| e. Option to renew:  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |                           | Renewal terms: One (1) Identical Term |               |                                   |                                |                             |
| f. Holdover notice:  | # of Days required 30   |                           | Holdover terms: 5%/90                 |               |                                   |                                |                             |
| g. Term:   | Five (5) Years  |                           |                                       |               |                                   |                                |                             |
| h. Pass-thrus/CAM/Taxes                                    | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant  |                           |                                       |               |                                   |                                |                             |
| i. Utilities:  | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant  |                           |                                       |               |                                   |                                |                             |
| j. Janitorial:   | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)  |                           |                                       |               |                                   |                                |                             |
| k. Repairs:  | Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant   |                           |                                       |               |                                   |                                |                             |
| l. Comparable Area Market Rate Average:                    | \$2.12  |                           |                                       |               |                                   |                                |                             |
| m. Specific termination clause in lease:                   | Breach/Default lack of funding  |                           |                                       |               |                                   |                                |                             |
| n. Lease will be paid for by Agency Budget Account Number: | 2361  |                           |                                       |               |                                   |                                |                             |
| 7. This lease constitutes:                                 | <input type="checkbox"/> An extension of an existing lease<br><input type="checkbox"/> An addition to current facilities (requires estimated expenses)<br><input type="checkbox"/> A relocation (requires estimated expenses)<br><input checked="" type="checkbox"/> A new location (requires estimated expenses)<br><input type="checkbox"/> Remodeling only<br><input type="checkbox"/> Other |                           |                                       |               |                                   |                                |                             |
| a. Estimated Expenses:                                     | Moving: \$0.00  |                           | Furnishings: \$0.00                   |               | Data/Phones: \$0.00               |                                |                             |

### 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  
32

10/8/24  
Date

For Public Works Information:

#### 8. 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 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 Liability Company   |  |
| f. Nevada Business ID Number:  | NV19981051267  | Exp: 9/30/2024                         |
| 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:  | T29048840  |  |
| j. Is this an Arms Length Transaction (No Conflict of Interest)                                | <input checked="" type="checkbox"/> YES  | <input type="checkbox"/> NO            |
| **If No, explain....   |  |  |

#### 9. Compliance with NRS 331.110, Section 1, Paragraph 2:

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

  
Authorized Signature  
Public Works Division

10.8.24  
Date

GM

For Board of Examiners

☒ YES

☐ NO

| For Budget Division Use Only |             |
|------------------------------|-------------|
| Reviewed by:                 | At 10-08-24 |
| Reviewed by:                 |             |
| Reviewed by:                 |             |

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

1. Tenant:

Nevada Funeral and Cemetery Services Board  
3740 Lakeside Drive, Suite 201  
Reno, NV 89509  
Stephanie McGee, Executive Director  
T: 775-825-5535 E: director@fb.nv.gov

Remarks:

Exceptions/Special notes:

2. Name of Lessor:

Griffin Pro LLC

3. Address of Lessor:

PO Box 4199  
Incline Village, NV 89450

4. Property Contact:

Johnson Group  
5255 Longley Lane, Ste 105, Reno, NV 89511  
Ryan Johnson  
T: 775-232-8551 E: ryan@johnsongroup.net

5. Address of Lease property:

3740 Lakeside Drive, Suite 201  
Reno, NV 89521

a. Square Footage:

☒ Rentable 924  
☐ Usable 924

b. Cost:

| cost per month | # of months in time frame | cost per year | time frame                   | Improve-ment cost per square foot | Base Rent cost per square foot | Actual or Approximate cost per square foot |
|----------------|---------------------------|---------------|------------------------------|-----------------------------------|--------------------------------|--|
| \$ 1,791.00    | 12                        | \$ 21,492.00  | Feb 1, 2025, to Jan 31, 2026 |                                   |                                | \$1.94                                     |
| 3% \$ 1,845.00 | 12                        | \$ 22,140.00  | Feb 1, 2026, to Jan 31, 2027 |                                   |                                | \$2.00                                     |
| 3% \$ 1,900.00 | 12                        | \$ 22,800.00  | Feb 1, 2027, to Jan 31, 2028 |                                   |                                | \$2.06                                     |
| 3% \$ 1,957.00 | 12                        | \$ 23,484.00  | Feb 1, 2028, to Jan 31, 2029 |                                   |                                | \$2.12                                     |
| 3% \$ 2,015.00 | 12                        | \$ 24,180.00  | Feb 1, 2029, to Jan 31, 2030 |                                   |                                | \$2.18                                     |
|                |                           | \$ -          |                              |                                   |                                |  |
|                |                           | \$ -          |                              |                                   |                                |  |
|                |                           | \$ -          |                              |                                   |                                |  |
|                |                           | \$ -          |                              |                                   |                                |  |
|                |                           | \$ -          |                              |                                   |                                |  |
|                |                           | \$ -          |                              |                                   |                                |  |
|                | 60                        | \$ 114,096.00 |                              |                                   |                                |  |

c. Total Lease Consideration:

d. Total Improvement Cost:

\$0.00

e. Option to renew:

☒ Yes ☐ No Renewal terms:

f. Holdover notice:

# of Days required Holdover terms:

g. Term:

60 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:

\$24 to \$25.82 per square foot per year (\$2 to \$2.15 per square foot per month)

m. Specific termination clause in lease:

Breach/default/lack of funding

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

B009

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)  
☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

**RECEIVED**

OCT 04 2024



**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

 10/11/2024  
Authorized Agency Signature Date  
*staff count*

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.):                      | <u>Domestic</u>  |  |
| f. Nevada Business ID Number:   | <u>NV20101825415</u>   | Exp: <u>Perpetual</u>                  |
| 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 checked="" type="checkbox"/> YES | <input 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:                 | mk |
| Reviewed by:                 |    |
| Reviewed by:                 |    |

### STATEWIDE LEASE INFORMATION

|  |   |                           |               |                              |                                  |
|--|---|---------------------------|---------------|------------------------------|----------------------------------|
| 1. Agency:   | Office of the Military<br>Nevada Army National Guard Recruiting<br>2450 Fairview Drive<br>Carson City, Nevada 89701<br>Devin Earl<br>T: 775.887.7280 E: devin.m.earl.ngf@army.mil   |                           |               |                              |                                  |
| Remarks:   | This is a lease renewal to an existing lease. Retroactively commencing July 1, 2024   |                           |               |                              |                                  |
| Exceptions/Special notes:                                  |   |                           |               |                              |                                  |
| 2. Lessee:   | Department of Administration, Public Works Division, Buildings and Grounds  |                           |               |                              |                                  |
| 3. Name of Lessor:   | 8454 Steller Drive, LLC<br>C/O Real Onyx Management Group   |                           |               |                              |                                  |
| 4. Address of Lessor:                                      | 1151 Buffalo Drive #220<br>Las Vegas, Nevada 89117  |                           |               |                              |                                  |
| 5. Property contact:                                       | Tonette Martinez<br>T: 702.703.3892 E: tonette@realonyx.com   |                           |               |                              |                                  |
| 6. Address of Lease property:                              | 2021 North Rainbow Boulevard #103<br>Las Vegas, NV 89103  |                           |               |                              |                                  |
| a. Square Footage:   | <input type="checkbox"/> Rentable<br><input checked="" type="checkbox"/> Usable 1,200   |                           |               |                              |                                  |
| b. Cost:   | cost per month  | # of months in time frame | cost per year | time frame                   | Approximate cost per square foot |
|  | 2% \$ 3,574.08  | 12                        | \$ 42,888.96  | July 1, 2024 - June 30, 2025 | \$2.98                           |
|  | 2% \$ 3,645.56  | 12                        | \$ 43,746.72  | July 1, 2025 - June 30, 2026 | \$3.04                           |
| c. Total Lease Consideration:                              |   | 24                        | \$ 86,635.68  |                              |                                  |
| e. Option to renew:  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 365 Renewal terms: One (1) Identical Term   |                           |               |                              |                                  |
| f. Holdover notice:  | # of Days required 30 Holdover terms: 5%/90   |                           |               |                              |                                  |
| g. Term:   | Five (5) Years  |                           |               |                              |                                  |
| h. Pass-thrus/CAM/Taxes                                    | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant  |                           |               |                              |                                  |
| i. Utilities:  | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant  |                           |               |                              |                                  |
| j. Janitorial:   | <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special)  |                           |               |                              |                                  |
| 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:                    | \$2.59  |                           |               |                              |                                  |
| m. Specific termination clause in lease:                   | Breach/Default lack of funding  |                           |               |                              |                                  |
| n. Lease will be paid for by Agency Budget Account Number: | 3650  |                           |               |                              |                                  |
| 7. This lease constitutes:                                 | <input checked="" type="checkbox"/> An extension of an existing lease<br><input type="checkbox"/> An addition to current facilities (requires estimated expenses)<br><input type="checkbox"/> A relocation (requires estimated expenses)<br><input type="checkbox"/> A new location (requires estimated expenses)<br><input type="checkbox"/> Remodeling only<br><input type="checkbox"/> Other |                           |               |                              |                                  |
| a. Estimated Expenses:                                     | Moving: \$0.00      Furnishings: \$0.00      Data/Phones: \$0.00  |                           |               |                              |                                  |

**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**

*Cheryl Tyler*

9/3/24

Authorized Agency Signature

Date

5

For Public Works Information:

8. 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 |  |
| e. Ownership Type (Domestic, Foreign, Government, etc.):                                       |   |  |
| f. Nevada Business ID Number:  | NV20222648826   | Exp: _____                             |
| 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:  | T27044327   |  |
| j. Is this an Arms Length Transaction (No Conflict of Interest)                                | <input checked="" type="checkbox"/> YES   | <input type="checkbox"/> NO            |
| **If No, explain....   |   |  |

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

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

Authorized Signature  
Public Works Division

Date

JW

For Board of Examiners

☒ YES

☐ NO



## STATE OF NEVADA OFFICE OF THE MILITARY

Office of the Adjutant General  
2460 Fairview Drive  
Carson City, Nevada 89701-6807



JOE LOMBARDO  
Governor

DAN R. WATERS  
Brigadier General  
The Adjutant General

November 5, 2024

### MEMORANDUM

To: Lesley Volkov, Executive Branch Budget Officer  
Governor's Finance Office, Budget Office

From: Cheryl Tyler, ASO IV  
State Administrative Office

Subject: Justification for Retroactive Approval

---

The following justification is provided to request retroactive approval of the attached contract between Real Onyx Management and the State of Nevada, Office of the Military.

The Nevada National Guard, the State of Nevada and Nevada National Guard were in negotiations with Real Onyx Management with an agreed upon pricing for the recruitment office. Unfortunately, the negotiations took a little longer than anticipated.

Your favorable approval of the retroactive start date enables us to pay the vendor for services that have already been performed. The staff understands that all emergencies, to ensure there is continued services, to contact Purchasing Department for approval.

If you need additional information or explanation, please contact me at 775-884-8478.

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:                 | At 10/24 |
| Reviewed by:                 |          |
| Reviewed by:                 |          |

### STATEWIDE LEASE INFORMATION

|  |   |                           |               |              |                                      |                                |                             |
|--|---|---------------------------|---------------|--------------|--------------------------------------|--------------------------------|-----------------------------|
| 1. Agency:   | Private Investigators Licensing Board<br>3110 South Durango Drive, Suite 203<br>Las Vegas, Nevada 89117<br>Vincent Saladino<br>T: 702-486-5066 E: vsaladino@pilb.nv.gov   |                           |               |              |                                      |                                |                             |
| Remarks:   | This is 5 year lease renewal. No TIs at this time   |                           |               |              |                                      |                                |                             |
| Exceptions/Special notes:                                  |   |                           |               |              |                                      |                                |                             |
| 2. Lessee:   | Department of Administration, Public Works Division, Buildings and Grounds  |                           |               |              |                                      |                                |                             |
| 3. Name of Lessor:   | Durango Drive NV, LLC   |                           |               |              |                                      |                                |                             |
| 4. Address of Lessor:                                      | c/o Moonbeam Leasing and Management LLC<br>9101 Alta Drive, Suite 1801<br>Las Vegas, Nevada 89145   |                           |               |              |                                      |                                |                             |
| 5. Property contact:                                       | Ruslan Aronov<br>T: 702-504-6079 E: r.aronov@mlgpllc.com  |                           |               |              |                                      |                                |                             |
| 6. Address of Lease property:                              | 3110 South Durango Drive, Suite 203<br>Las Vegas, Nevada 89117  |                           |               |              |                                      |                                |                             |
| a. Square Footage:   | <input type="checkbox"/> Rentable<br><input checked="" type="checkbox"/> Usable 2,235   |                           |               |              |                                      |                                |                             |
| 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 |
|  | 3%  | \$ 4,664.68               | 12            | \$ 55,976.16 | December 1, 2024 - November 30, 2025 | \$0.00                         | \$2.09                      |
|  | 0%  | \$ 4,664.68               | 12            | \$ 55,976.16 | December 1, 2025 - November 30, 2026 | \$0.00                         | \$2.09                      |
|  | 3%  | \$ 4,804.62               | 12            | \$ 57,655.44 | December 1, 2026 - November 30, 2027 | \$0.00                         | \$2.15                      |
|  | 0%  | \$ 4,804.62               | 12            | \$ 57,655.44 | December 1, 2027 - November 30, 2028 | \$0.00                         | \$2.15                      |
|  | 3%  | \$ 4,948.76               | 12            | \$ 59,385.12 | December 1, 2028 - November 30, 2029 | \$0.00                         | \$2.21                      |
| c. Total Lease Consideration:                              |   | 60                        | \$ 286,648.32 |              |                                      | \$0.00                         |                             |
| d. Total Improvement Cost:                                 |   |                           |               |              |                                      |                                |                             |
| e. Option to renew:  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 90 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 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:                    | \$3.18  |                           |               |              |                                      |                                |                             |
| m. Specific termination clause in lease:                   | Breach/Default lack of funding  |                           |               |              |                                      |                                |                             |
| n. Lease will be paid for by Agency Budget Account Number: | 1032  |                           |               |              |                                      |                                |                             |
| 7. This lease constitutes:                                 | <input checked="" type="checkbox"/> An extension of an existing lease<br><input type="checkbox"/> An addition to current facilities (requires estimated expenses)<br><input type="checkbox"/> A relocation (requires estimated expenses)<br><input type="checkbox"/> A new location (requires estimated expenses)<br><input type="checkbox"/> Remodeling only<br><input type="checkbox"/> Other |                           |               |              |                                      |                                |                             |
| a. Estimated Expenses:                                     | Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00  |                           |               |              |                                      |                                |                             |

**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  
10

9/24/2024  
Date


For Public Works Information:

8. 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 type="checkbox"/> YES   | <input checked="" 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.):                               | Exp: _____   |  |
| f. Nevada Business ID Number:  | TBD  |  |
| 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 | <input type="checkbox"/> YES   | <input checked="" type="checkbox"/> NO |
| i. State of Nevada Vendor number: T29028485  |  |  |
| j. Is this an Arms Length Transaction (No Conflict of Interest)                        | <input checked="" type="checkbox"/> YES  | <input type="checkbox"/> NO            |
| **If No, explain....   |  |  |

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

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

  
Authorized Signature  
Public Works Division

9/25/24  
Date

JW  
For Board of Examiners ☒ YES ☐ NO

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                  | FUNDING SOURCE             | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|-----------------------------|----------------------------|-------------|---|
| 1.    | 015                   | GOVERNOR'S OFFICE OF FINANCE - BUDGET DIVISION  | JUSTICE PLANNERS, LLC       | GENERAL                    | \$535,535   |   |
|       | Contract Description: | This is a new contract to provide a study of the prisoner population.   |                             |                            |             |   |
|       |                       | Term of Contract:   | Upon Approval - 11/11/2028  | Contract # 29858           |             |   |
| 2.    | 040                   | SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE  | CAESARS ENTERTAINMENT, INC. | GENERAL                    | \$153,258   |   |
|       | Contract Description: | This is a new contract to provide conference hosting services for the 2024 Nevada Election Official Training Conference.  |                             |                            |             |   |
|       |                       | Term of Contract:   | Upon Approval - 12/30/2024  | Contract # 29831           |             |   |
| 3.    | 040                   | SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE  | GARTNER, INC.               | GENERAL                    | \$570,000   |   |
|       | Contract Description: | This is the fourth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides procurement acquisition support services. This service agreement provides project oversight and quality assurance services for the enhancements and modifications to the business registration and filing system. This amendment increases the maximum amount from \$993,500 to \$1,563,500 due to the continued need for these services.               |                             |                            |             |   |
|       |                       | Term of Contract:   | 08/08/2023 - 03/31/2025     | Contract # 27918           |             |   |
| 4.    | 040                   | SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM   | GARTNER, INC.               | GENERAL 65%<br>FEDERAL 35% | \$1,218,500 |   |
|       | Contract Description: | This is the fifth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides acquisition support services. This service agreement provides independent validation and verification services for the new centralized statewide database and election management system. This amendment increases the maximum amount from \$1,950,500 to \$3,169,000 due to the addition of risk assessment and monitoring activities and deliverables. |                             |                            |             |   |
|       |                       | Term of Contract:   | 05/09/2023 - 03/31/2025     | Contract # 27474           |             |   |



# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                             | FUNDING SOURCE   | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|--|-------------|---|
| 5.    | 040                   | SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM   | SHI INTERNATIONAL CORP.                | GENERAL  | \$226,654   |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-12771 which provides software licensing, maintenance, and related services. This service agreement provides a one-time compromise assessment to identify evidence of past or ongoing malicious activity and identify weaknesses in security configurations that increase risk or inhibit investigations. |  |  |             |   |
|       |                       | Term of Contract:   | 09/05/2024 - 10/01/2025                | Contract # 29744   |             |   |
| 6.    | 050                   | TREASURER'S OFFICE - STATE TREASURER  | WELLS FARGO BANK, NATIONAL ASSOCIATION | OTHER: MERCHANT; DEDUCTION FROM UNDISTRIBUTED INTEREST     | \$5,000,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing general banking, lockbox, and merchant services to state agencies.  |  |  |             |   |
|       |                       | Term of Contract:   | 01/01/2025 - 12/31/2028                | Contract # 29734   |             |   |
| 7.    | 051                   | TREASURER'S OFFICE - COLLEGE SAVINGS TRUST  | MEKETA INVESTMENT GROUP, INC.          | OTHER: TRANSFER FROM COLLEGE SAVINGS ENDOWMENT             | \$1,100,000 |   |
|       | Contract Description: | This is a new contract to provide investment consulting services for the Prepaid Tuition and College Savings programs.  |  |  |             |   |
|       |                       | Term of Contract:   | Upon Approval - 12/31/2028             | Contract # 29719   |             |   |
| 8.    | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | ENTERPRISE JANITORIAL, INC.            | GENERAL 13% OTHER: BUILDINGS AND GROUNDS RENTAL INCOME 87% | \$964,859   |   |
|       | Contract Description: | This is a new contract to provide janitorial services for the Professional Circle building located in Reno.   |  |  |             |   |
|       |                       | Term of Contract:   | Upon Approval - 11/30/2028             | Contract # 29835   |             |   |



# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                       | FUNDING SOURCE                             | AMOUNT    | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|----------------------------------|--|-----------|---|
| 9.    | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | KITTRELL JENSEN CONTRACTORS, LLC | GENERAL                                    | \$200,000 | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide removal and storage of statues, benches, and engraved stones at the Veteran's Memorial Park located at the Grant Sawyer building in Las Vegas.   |                                  |  |           |   |
|       |                       | Term of Contract:  | Upon Approval - 06/30/2025       | Contract # 29860                           |           |   |
| 10.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | NLS GROUNDS MANAGEMENT LLC.      | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$439,640 |   |
|       | Contract Description: | This is a new contract to provide landscaping maintenance services for the Department of Motor Vehicles' Donovan, Flamingo, Sahara, and Campos locations in Las Vegas.   |                                  |  |           |   |
|       |                       | Term of Contract:  | 12/01/2024 - 11/30/2028          | Contract # 29826                           |           |   |
| 11.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC  | DOWL, LLC                        | BONDS                                      | \$237,371 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the Northern Nevada Correctional Center - Electrical Distribution Upgrade CIP Project: CIP Project No. 21-M16; SPWD Contract No. 116484. This amendment increases the maximum amount from \$328,705.76 to \$566,076.70 due to additional construction administration services resulting from extended construction delays. |                                  |  |           |   |
|       |                       | Term of Contract:  | 05/14/2024 - 06/30/2025          | Contract # 29048                           |           |   |
| 12.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC  | BURKE CONSTRUCTION GROUP, INC.   | GENERAL                                    | \$106,643 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides Owner Construction Manager At-Risk services for the Health and Human Services - Southern Nevada Forensic Facility Advanced Planning CIP Project: CIP Project No. 23-P06; SPWD Contract No. 116144. This amendment increases the maximum amount from \$329,074 to \$435,717 due to preconstruction services including schematic design through Guaranteed Maximum Price.        |                                  |  |           |   |
|       |                       | Term of Contract:  | 01/09/2024 - 06/30/2027          | Contract # 28614                           |           |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                                 | FUNDING SOURCE | AMOUNT    | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|----------------|-----------|---|
| 13.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC  | CARPENTER SELLERS DEL GATTO ARCHITECTS, PC | GENERAL        | \$200,000 | Professional Service                          |
|       | Contract Description: | This is the second amendment to the original contract which provides professional architectural/engineering services for the Las Vegas Purchased Building Improvements CIP Project: CIP Project No. 23-C36; SPWD Contract No. 115630. This amendment increases the maximum amount from \$400,000 to \$600,000 due to additional design services, general consulting, and tenant improvements for additional buildings.            |  |                |           |   |
|       | Term of Contract:     | 09/12/2023 - 06/30/2027   | Contract # 28054                           |                |           |   |
| 14.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC  | PAUL CAVIN ARCHITECT LLC                   | GENERAL        | \$3,450   | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the Northern Nevada Children's Home - Demolition of Cottages CIP Project: CIP Project No. 23-C19; SPWD Contract No. 115947. This amendment increases the maximum amount from \$97,740 to \$101,190 due to NV Energy permit fees for the electrical disconnect.  |  |                |           |   |
|       | Term of Contract:     | 01/03/2024 - 06/30/2027   | Contract # 28387                           |                |           |   |
| 15.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC  | PETTY & ASSOCIATES, INC.                   | HIGHWAY        | \$37,500  | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the Carson City Department of Motor Vehicles HVAC Renovation CIP Project: CIP Project No. 21-M23; SPWD Contract No. 114304. This amendment increases the maximum amount from \$70,000 to \$107,500 due to the additional construction administration services needed to extend the construction schedule. |  |                |           |   |
|       | Term of Contract:     | 09/17/2021 - 06/30/2025   | Contract # 24852                           |                |           |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                                 | FUNDING SOURCE                                     | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|--|-------------|---|
| 16.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS  | CARPENTER SELLERS DEL GATTO ARCHITECTS, PC | OTHER: AGENCY FUNDED CIP                           | \$3,380,155 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the College of Southern Nevada, Northwest Campus - Center for Excellence in Public Safety CIP Project: CIP Project No. 24-A008; SPWD Contract No. 116346. This amendment increases the maximum amount from \$3,224,834.00 to \$6,604,989.40 due to the design of a 60,700 square-foot building, central plant, and emergency vehicle operations course, from the design phase through the issuance of bid documents, as determined after the programming phase of the project. |  |  |             |   |
|       |                       | Term of Contract:  | 03/12/2024 - 06/30/2025                    | Contract # 28829                                   |             |   |
| 17.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS  | NEW WEST COMPANY, LLC                      | OTHER: AGENCY FUNDED CIP                           | \$250,000   | Professional Service                          |
|       | Contract Description: | This is a new contract to provide development and project management services for the Agriculture Warehouse Tenant Improvements (Las Vegas) CIP Project to include schematic design with specialty tenant improvements for 13,000 square-feet of drive-in freezer space with associated support infrastructure: CIP Project No. 25-A011; SPWD Contract No. 117213.   |  |  |             |   |
|       |                       | Term of Contract:  | Upon Approval - 06/30/2025                 | Contract # 29878                                   |             |   |
| 18.   | 101                   | DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - TOURISM   | RED SQUARE AGENCY, LLC                     | OTHER: LODGING TAX                                 | \$212,500   |   |
|       | Contract Description: | This is the third amendment to the original contract which provides ongoing brand strategy and creative development services. This amendment increases the maximum amount from \$850,000 to \$1,062,500 due to the addition of the Adventure Guide and Governor's Conference on Tourism.   |  |  |             |   |
|       |                       | Term of Contract:  | 09/13/2022 - 12/31/2024                    | Contract # 26671                                   |             |   |
| 19.   | 111                   | DEPARTMENT OF INDIGENT DEFENSE SERVICES - PUBLIC DEFENDER'S OFFICE   | CAVANAUGH-BILL LAW OFFICES, LLC            | GENERAL 75% OTHER: COUNTY MAXIMUM CONTRIBUTION 25% | \$137,600   | Professional Service                          |
|       | Contract Description: | This is a new contract to provide public defense services for juveniles in White Pine County.  |  |  |             |   |
|       |                       | Term of Contract:  | Upon Approval - 06/30/2025                 | Contract # 29794                                   |             |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR  | FUNDING SOURCE                           | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|--|-------------|---|
| 20.   | 180                   | OFFICE OF THE CHIEF INFORMATION OFFICER - IT SECURITY   | RFI ENTERPRISES, INC. DBA RFI COMMUNICATIONS & SECURITY | GENERAL                                  | \$16,780    | Sole Source                                   |
|       | Contract Description: | This is the first amendment to the original contract which provides the installation of nineteen CCURE access controlled doors, one video intercom with desk station, and six closed-circuit television cameras at Nye Lane. This amendment increases the maximum amount from \$99,000 to \$115,780 due to the addition of a new agency in the building.  |   |  |             |   |
|       |                       | Term of Contract:   | 06/24/2024 - 12/31/2024                                 | Contract # 29350                         |             |   |
| 21.   | 240                   | DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT   | HEALTHCARE SERVICES GROUP, INC.                         | OTHER: PRIVATE/COUNTY 35%<br>FEDERAL 65% | \$2,804,162 |   |
|       | Contract Description: | This is a new contract to provide ongoing daily housekeeping and laundry services.  |   |  |             |   |
|       |                       | Term of Contract:   | 12/01/2024 - 11/30/2028                                 | Contract # 29834                         |             |   |
| 22.   | 300                   | DEPARTMENT OF EDUCATION - OFFICE OF THE SUPERINTENDENT  | DISCOVERY EDUCATION, INC.                               | FEDERAL                                  | \$2,024,344 |   |
|       | Contract Description: | This is the third amendment to the original contract which provides for the implementation and support of an online learning platform and professional development. This amendment increases the maximum amount from \$4,400,000 to \$6,424,344 due to the continued need for these services and a change to the source of funding.   |   |  |             |   |
|       |                       | Term of Contract:   | 07/01/2020 - 07/31/2025                                 | Contract # 23315                         |             |   |
| 23.   | 300                   | DEPARTMENT OF EDUCATION - OFFICE OF THE SUPERINTENDENT  | INSTRUCTURE, INC.                                       | GENERAL 99%<br>FEDERAL 1%                | \$2,500,006 |   |
|       | Contract Description: | This is the fourth 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 increases the maximum amount from \$8,603,384 to \$11,103,390 due to adding various subscriptions and portals. |   |  |             |   |
|       |                       | Term of Contract:   | 07/01/2020 - 06/30/2025                                 | Contract # 23323                         |             |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR   | FUNDING SOURCE                      | AMOUNT    | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|-------------------------------------|-----------|---|
| 24.   | 300                   | DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT   | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO | FEDERAL                             | \$250,000 | Exempt  |
|       | Contract Description: | This is the first amendment to the original interlocal agreement which provides services to expand the Spiral Up Program, Child Development Associate Program, and the Nevada Ready Pre-K Professional Development program to increase the early childhood educators statewide. This amendment increases the maximum amount from \$1,930,000 to \$2,180,000 due to the addition of professional learning sessions and translation of trainings and materials into Spanish and other languages. |  |                                     |           |   |
|       | Term of Contract:     | 07/11/2023 - 12/30/2025  |  | Contract # 27743                    |           |   |
| 25.   | 300                   | DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT   | REGENTS OF UNIVERSITY OF COLORADO, DENVER  | FEDERAL                             | \$175,000 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide ongoing collaborative efforts to build administrator and leadership capacity through the National Preschool Through Third Grade Leadership Certificate Program.  |  |                                     |           |   |
|       | Term of Contract:     | Upon Approval - 12/30/2025   |  | Contract # 29821                    |           |   |
| 26.   | 403                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION   | SELLERS DORSEY & ASSOCIATES, LLC   | OTHER: OPIOID FUNDS 50% FEDERAL 50% | \$399,893 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17894 which provides consulting, marketing, and education services. This service agreement provides an assessment of Nevada Medicaid Home and Community-Based Service programs.   |  |                                     |           |   |
|       | Term of Contract:     | Upon Approval - 06/30/2025   |  | Contract # 29790                    |           |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                     | FUNDING SOURCE                   | AMOUNT       | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--------------------------------|----------------------------------|--------------|---|
| 27.   | 403                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION  | STRATEGIC PROGRESS, LLC        | FEDERAL                          | \$143,469    |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17901 which provides consulting, marketing, and education services. This service agreement provides statewide data analysis, report development, and a communications strategy to build a data-driven, decision-making infrastructure in order to identify gaps and needs in the most at-risk areas for oral health. |                                |                                  |              |   |
|       |                       | Term of Contract:   | Upon Approval - 08/31/2025     | Contract # 29846                 |              |   |
| 28.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - CRISIS RESPONSE  | CARELON BEHAVIORAL HEALTH, INC | FEE: TELECOM 60.4% FEDERAL 39.6% | \$49,729,552 |   |
|       | Contract Description: | This is a new contract to provide a centralized Nevada 988 suicide and crisis lifeline call center.   |                                |                                  |              |   |
|       |                       | Term of Contract:   | Upon Approval - 10/31/2028     | Contract # 29740                 |              |   |
| 29.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH ADMINISTRATION   | REDSAIL TECHNOLOGIES, LLC      | GENERAL                          | \$116,463    | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide ongoing pharmacy management software and hardware maintenance services.   |                                |                                  |              |   |
|       |                       | Term of Contract:   | Upon Approval - 06/30/2026     | Contract # 29385                 |              |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR   | FUNDING SOURCE             | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|----------------------------|-------------|---|
| 30.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT  | SOCIAL ENTREPRENEURS, INC.   | FEDERAL                    | \$209,610   |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides consulting services to support the planning and implementation of program objectives in fulfillment of Substance Use Response Working Group legislative requirements pursuant to Assembly Bill 374 of the 2023 Legislative Session. |  |                            |             |   |
|       | Term of Contract:     | 10/01/2024 - 09/30/2025  | Contract # 29612   |                            |             |   |
| 31.   | 407                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION   | DELOITTE CONSULTING LLP  | GENERAL 50%<br>FEDERAL 50% | \$3,993,200 |   |
|       | Contract Description: | This is the eighth amendment to the original contract which provides benefits to children who qualify for the National School Lunch Program through Electronic Benefit Transfer. This amendment extends the termination date from May 31, 2025 to January 31, 2026 and increases the maximum amount from \$10,801,527 to \$14,794,727 due to the continued need for these services.                          |  |                            |             |   |
|       | Term of Contract:     | 06/08/2021 - 01/31/2026  | Contract # 24393   |                            |             |   |
| 32.   | 409                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES  | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO | FEDERAL                    | \$104,800   | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide ongoing services utilizing the Psychiatry Fellowship program.  |  |                            |             |   |
|       | Term of Contract:     | 10/01/2024 - 09/30/2026  | Contract # 29680   |                            |             |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR  | FUNDING SOURCE  | AMOUNT    | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|---|-----------|---|
| 33.   | 440                   | DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE   | VOX NETWORK SOLUTIONS, INC.   | GENERAL   | \$474,926 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV24-20549 which provides voice and data telecommunications systems. This service agreement provides maintenance and support of the Avaya Communication System for prisons, work camps, and administrative sites. |   |   |           |   |
|       |                       | Term of Contract:   | 07/01/2024 - 06/30/2027   | Contract # 29812  |           |   |
| 34.   | 656                   | DEPARTMENT OF PUBLIC SAFETY - FIRE MARSHAL  | TS HAZMAT CONSULTING SERVICES LLC DBA SIGNET NORTH AMERICA                          | OTHER: STATE OF NEVADA EMERGENCY RESPONSE COMMISSION 50%; NEVADA DEPARTMENT OF ENVIRONMENTAL PROTECTION 50% | \$627,028 |   |
|       | Contract Description: | This is a new contract to provide ongoing Hazardous Material Technician level training.   |   |   |           |   |
|       |                       | Term of Contract:   | 01/01/2025 - 12/31/2028   | Contract # 29857  |           |   |
| 35.   | 700                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER CONSERVATION & INFRASTRUCTURE  | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO DESERT RESEARCH INSTITUTE | FEDERAL   | \$250,000 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide long-term water use projections for the State Water Plan.   |   |   |           |   |
|       |                       | Term of Contract:   | Upon Approval - 09/30/2026  | Contract # 29827  |           |   |
| 36.   | 702                   | DEPARTMENT OF WILDLIFE - CONSERVATION EDUCATION   | TRUCKEE MEADOWS PARKS FOUNDATION  | FEE: LICENSE PLATE  | \$476,356 | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide ongoing wildlife education programming and volunteer services by supervising and mentoring AmeriCorps volunteers.   |   |   |           |   |
|       |                       | Term of Contract:   | Upon Approval - 10/31/2028  | Contract # 29759  |           |   |
| 37.   | 702                   | DEPARTMENT OF WILDLIFE - HABITAT  | LINCOLN COUNTY CONSERVATION   | FEE: HABITAT CONSERVATION   | \$102,600 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide wildlife habitat and ecological restoration services.   |   |   |           |   |
|       |                       | Term of Contract:   | 01/01/2025 - 12/31/2028   | Contract # 29777  |           |   |



# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                      | FUNDING SOURCE   | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---------------------------------|--|-------------|---|
| 38.   | 702                   | DEPARTMENT OF WILDLIFE - WILDLIFE TRUST FUND - NON-EXEC  | LAND I FENCE CONSTRUCTION, INC. | FEE:<br>HABITAT CONSERVATION;<br>UPLAND GAME STAMP; ELK DAMAGE 30%<br>OTHER:<br>HERITAGE TRUST FUND; ENERGY DEVELOPMENT AND TRANSMISSION;<br>WATER DEVELOPMENT;<br>INDUSTRIAL DEVIATION 30%<br>FEDERAL 40% | \$3,540,502 |   |
|       | Contract Description: | This is the second amendment to the original contract which provides fencing removal and construction services. This amendment extends the termination date from September 13, 2025 to September 13, 2027 and increases the maximum amount from \$3,624,119 to \$7,164,621 due to the continued need for these services. |                                 |  |             |   |
|       |                       | Term of Contract:  | 09/14/2021 - 09/13/2027         | Contract # 24766   |             |   |
| 39.   | 704                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - FEDERAL PROGRAMS - NON-EXEC   | QUANTUM MARK, LLC               | OTHER:<br>LAND SALES 43%<br>FEDERAL 57%  | \$175,000   | Exempt  |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17899 which provides consulting, marketing, and education services. This service agreement provides the collaborative development of a Statewide Comprehensive Outdoor Recreation Plan as required by the National Park Service.                    |                                 |  |             |   |
|       |                       | Term of Contract:  | Upon Approval - 12/31/2026      | Contract # 29802   |             |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                                | FUNDING SOURCE  | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|---|-------------|---|
| 40.   | 707                   | DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE LANDS - PROTECT LAKE TAHOE - NON-EXEC   | NORTH LAKE TAHOE FIRE PROTECTION DISTRICT | BONDS 70%<br>OTHER:<br>LAKE TAHOE RESTORATION ACT 30% | \$393,000   | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide ongoing fuels reduction, thinning, prescribed fire, and wildlife habitat improvement in the Lake Tahoe Basin.                            |   |   |             |   |
|       |                       | Term of Contract:  | Upon Approval - 06/30/2028                | Contract # 29760                                      |             |   |
| 41.   | 709                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT AND CORRECTIVE ACTION   | SLR INTERNATIONAL CORPORATION             | FEDERAL   | \$199,708   |   |
|       | Contract Description: | This is a new contract to provide a hub and spoke recycling system feasibility study for rural Nevada.   |   |   |             |   |
|       |                       | Term of Contract:  | Upon Approval - 08/12/2028                | Contract # 29661                                      |             |   |
| 42.   | 709                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - SAFE DRINKING WATER PROGRAM  | BROADBENT & ASSOCIATES, INC.              | FEDERAL   | \$1,591,384 |   |
|       | Contract Description: | This is a new contract to provide training to drinking water operators and testing of water sources for potentially dangerous levels of Perfluoroalkyl and Polyfluoroalkyl substances. |   |   |             |   |
|       |                       | Term of Contract:  | 09/11/2024 - 08/31/2027                   | Contract # 29627                                      |             |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR  | FUNDING SOURCE   | AMOUNT    | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|------------------|-----------|---|
| 43.   | 810                   | DEPARTMENT OF MOTOR VEHICLES - SYSTEM TECHNOLOGY APPLICATION REDESIGN  | CARAHSOFT TECHNOLOGY CORPORATION                        | HIGHWAY          | \$683,176 |   |
|       | Contract Description: | This is the fourth amendment to the original contract which provides commercial off-the-shelf based software solutions to replace the current outdated systems as part of the system modernization project. This amendment increases the maximum amount from \$92,186,338.48 to \$92,869,514.36 due to the addition of software licenses and two development environments.   |   |                  |           |   |
|       |                       | Term of Contract:  | 09/22/2021 - 09/08/2026                                 | Contract # 24759 |           |   |
| 44.   | 901                   | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM   | FIRST CLASS VENDING INC. DBA FIRST CLASS COFFEE SERVICE | OTHER: REVENUE   | \$400,000 |   |
|       | Contract Description: | This is a new revenue contract to provide ongoing vending and micro market services for blind and visually impaired operators within state buildings in northern Nevada.   |   |                  |           |   |
|       |                       | Term of Contract:  | Upon Approval - 12/31/2028                              | Contract # 29877 |           |   |
| 45.   | 901                   | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION DIVISION - VOCATIONAL REHABILITATION  | WASHOE COUNTY SCHOOL DISTRICT                           | FEDERAL          | \$720,000 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide pre-employment transition services, work-based learning projects, job coaching, training, and professional development for students with disabilities by funding four Pre-Employment Transition Service Liaisons for the Washoe County School District. This contract is contingent upon IFC approval of work program #C68779. |   |                  |           |   |
|       |                       | Term of Contract:  | Upon Approval - 12/31/2027                              | Contract # 29807 |           |   |

# CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                       | FUNDING SOURCE                    | AMOUNT      | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|----------------------------------|-----------------------------------|-------------|---|
| 46.   | 902                   | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT   | CARAHSOFT TECHNOLOGY CORPORATION | FEDERAL                           | \$169,750   |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV24-17504 which provides cloud services. This service agreement provides 25 user licenses to the Dun and Bradstreet Data Cloud through a user interface to accelerate business engagement and assist with layoff aversion and employer outreach. |                                  |                                   |             |   |
|       |                       | Term of Contract:   | 12/12/2024 - 12/30/2025          | Contract # 29610                  |             |   |
| 47.   | 902                   | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY   | 8X8, INC.                        | FEDERAL                           | \$2,914,629 |   |
|       | Contract Description: | This is a new contract to provide ongoing phone system and interactive voice response modernization services.   |                                  |                                   |             |   |
|       |                       | Term of Contract:   | Upon Approval - 09/30/2028       | Contract # 29825                  |             |   |
| 48.   | B022                  | LICENSING BOARDS AND COMMISSIONS - PHARMACY   | BAMBOO HEALTH, INC.              | FEE: LICENSURE 12%<br>FEDERAL 88% | \$3,060,710 | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide licensing, support, and training for a prescription drug monitoring program.  |                                  |                                   |             |   |
|       |                       | Term of Contract:   | 11/19/2024 - 11/18/2028          | Contract # 29862                  |             |   |
| 49.   | B022                  | LICENSING BOARDS AND COMMISSIONS - PHARMACY   | KANDT LAW PLLC                   | FEE: LICENSURE                    | \$360,000   | Professional Service                          |
|       | Contract Description: | This is a new contract to provide legal and hearing officer services.   |                                  |                                   |             |   |
|       |                       | Term of Contract:   | 11/30/2024 - 11/29/2026          | Contract # 29866                  |             |   |

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: 29858

Agency Name: GOVERNOR'S FINANCE OFFICE  
Agency Code: 015  
Appropriation Unit: 1340-10  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: Justice Planners, LLC  
Contractor Name: Justice Planners, LLC  
Address: 1328 Waterway Drive, Apt 3  
City/State/Zip: North Myrtle Beach, SC 29582  
Contact/Phone: Alan Richardson 803-394-9486  
Vendor No.: T29049263  
NV Business ID: NV20243200602

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that 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 #: 01GO-S2887 JS

2. Contract start date:  
a. Effective upon Board of Examiner's approval? Yes or b. other effective date: NA  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 11/11/2028  
Contract term: 4 years and 11 days

4. Type of contract: Contract  
Contract description: Prison Population

5. Purpose of contract:  
This is a new contract to provide a study of the prisoner population.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$535,535.00  
Other basis for payment: Quarterly, As Invoiced by the Contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?  
Pursuant to NRS 176.0129 the State of Nevada is required to contract for services to review sentences imposed in the state and the practices of the State Board of Parole Commissioners to provide specified population projections in specified time frames that correspond to the State's budget processes.

8. Explain why State employees in your agency or other State agencies are not able to do this work:  
NRS 176.0129 stipulates that this work be preformed by an independent contractor.

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):  
Justice Planners, LLC  
CGL Management Group  
Falcon, Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #01GO-S2887, 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: 08/08/2024 Anticipated re-bid date: 05/30/2028

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   | bmcDani  | 10/07/2024 16:52:18 PM |
| Division Approval         | jkidd    | 10/08/2024 08:21:18 AM |
| Department Approval       | jkidd    | 10/08/2024 08:21:21 AM |
| Contract Manager Approval | ssands   | 10/08/2024 08:24:10 AM |
| Budget Analyst Approval   | djohns37 | 10/08/2024 16:39:04 PM |
| BOE Agenda Approval       | djohns37 | 10/08/2024 16:56:04 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 CONTRACT**1. Contract Number: **29831**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: **CAESARS ENTERTAINMENT, INC.**Contractor Name: **CAESARS ENTERTAINMENT, INC.**Address: **1 CAESARS PALACE DR**City/State/Zip: **LAS VEGAS, NV 89109**Contact/Phone: **Feliz Leyba 602-796-4223**

Vendor No.:

NV Business ID: **NV20201904030**To what State Fiscal Year(s) will the contract be charged? **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 #: **040**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/30/2024**Contract term: **59 days**4. Type of contract: **Contract**Contract description: **NEOTC Conference**

5. Purpose of contract:

**This is a new contract to provide conference hosting services for the 2024 Nevada Election Official Training Conference.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$153,257.58**

Other basis for payment: Deposit of \$27,500 due upon contract execution. Payment for balance of charges owed will be made within thirty (30) days of receipt of final invoice.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

SB54 of the 2023 Legislative Session requires the Secretary of State to develop and provide a training course related to elections procedures to each county and city clerk. Each county and city clerk are required to attend the training and each county and city clerk are authorized to require any deputy or employee of the clerk's office whose duties relate to elections to attend the training course.

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

This contract requires a venue that can accommodate the space and banquet needs for all attendees of the conference. Neither State employees nor State agencies have the capability to provide the required space and 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):

Education Consulting and Research Group  
Caesars Entertainment, Inc.

b. Solicitation Waiver: **Not Applicable**

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

d. Last bid date: 06/24/2024 Anticipated re-bid date: 01/27/2025

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:

The contractor has previously provided services to the Secretary of State and it 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   | adale   | 10/01/2024 15:10:17 PM |
| Division Approval         | adale   | 10/01/2024 15:10:28 PM |
| Department Approval       | dbowma1 | 10/01/2024 15:20:51 PM |
| Contract Manager Approval | adale   | 10/01/2024 16:34:09 PM |
| Budget Analyst Approval   | mranki1 | 10/09/2024 11:52:21 AM |
| BOE Agenda Approval       | mranki1 | 10/09/2024 11:52:24 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: **27918**Amendment Number: **4**Agency Name: **SECRETARY OF STATE'S OFFICE**Legal Entity Name: **GARTNER, INC.**Agency Code: **040**Contractor Name: **GARTNER, INC.**Appropriation Unit: **1050-42**Address: **56 Top Gallant Road**Is budget authority available?: **Yes**City/State/Zip: **Stamford, CT 06902-7700**

If "No" please explain: Not Applicable

Contact/Phone: **Yvette Toledo 602-561-8599**Vendor No.: **T80976121A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2024-2025**

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.

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| <b>X</b> General Funds | <b>100.00 %</b> | 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 **08/08/2023**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved Termination Date: **03/31/2025**Contract term: **1 year and 236 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **Project Oversight**

5. Purpose of contract:

**This is the fourth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides procurement acquisition support services. This service agreement provides project oversight and quality assurance services for the enhancements and modifications to the business registration and filing system. This amendment increases the maximum amount from \$993,500 to \$1,563,500 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: | \$811,000.00   | \$811,000.00  | \$811,000.00    | Yes - Action |
| a. Amendment 1:                             | \$0.00         | \$0.00        | \$0.00          | No           |
| b. Amendment 2:                             | \$182,500.00   | \$182,500.00  | \$182,500.00    | Yes - Action |
| c. Amendment 3:                             | \$0.00         | \$0.00        | \$0.00          | No           |
| 2. Amount of current amendment (#4):        | \$570,000.00   | \$570,000.00  | \$570,000.00    | Yes - Action |
| 3. New maximum contract amount:             | \$1,563,500.00 |               |                 |              |

**II. JUSTIFICATION**

7. What conditions require that this work be done?

Nearly 560,000 businesses in Nevada manage their state business licensing & renewals through the SilverFlume Business Portal. Last year alone, SilverFlume generated approximately \$200 million for the State General Fund. This is a critical tool for Nevada's business community and a vehicle for our economy, but there is a need to streamline & improve the user experience. The improvements will help the thousands of business owners that rely on SilverFlume, and drive more business to the State of Nevada. The Office requires a contractor to provide oversight to include project and program planning, readiness assessment, project health checks and technical assessments, vendor evaluation and recommendations and independent verification and validation.

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 tools nor the expertise required to do this work.

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?

PASS Agreement under NASPO contract.

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:

This vendor has provided services to other state agencies 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:  
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   | adale    | 10/10/2024 09:08:24 AM |
| Division Approval         | adale    | 10/10/2024 09:10:13 AM |
| Department Approval       | adale    | 10/10/2024 09:10:21 AM |
| Contract Manager Approval | jmckeeha | 10/10/2024 09:11:50 AM |
| EITS Approval             | ljean    | 10/10/2024 14:00:07 PM |
| Budget Analyst Approval   | mranks1  | 10/11/2024 14:05:06 PM |
| BOE Agenda Approval       | mranks1  | 10/11/2024 14:05:14 PM |



**STATE OF NEVADA  
OFFICE OF THE CHIEF INFORMATION OFFICER  
WITHIN THE OFFICE OF THE GOVERNOR**

100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Gabriel Di Chiara, Chief Deputy Secretary of State, SOS  
Shauna Bakkedahl, Deputy Sec. of State for Commercial Recordings, SOS  
Tim Horgan, Chief IT Manager, SOS  
Ashley Griffiths, Administrative Services Officer, SOS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO-OG  
Robert Dehnhardt, State Chief Information Security Officer, OCIO-OG  
Sean Montierth, IT Chief, Computing Services Unit, OCIO-OG  
David Axtell, Chief Enterprise Architect, OCIO-OG

**FROM:** Lisa Jean, TIN Administrator, OCIO-OG

**SUBJECT:** TIN Completion Memo – SOS – TIN 734 – *Project Orion* – BA 1050

**DATE:** July 3, 2023

We have completed our review for the Secretary of State's Office (SOS) – *Project Orion* – TIN 734.

The submitted TIN, for an estimated value of \$15,000,000.00 in the FY24/FY25 biennium, (100% General Fund), is to support a portfolio of projects and initiatives to improve the state business licensing and renewals processes managed through the SilverFlume Business Portal.

The SilverFlume Business Portal is a pivotal asset for Nevada's economic growth, with nearly 560,000 businesses utilizing its platform for their licensing and renewals. In 2022 alone, the platform contributed approximately \$200 million to the State General Fund. However, there remains substantial potential for further enhancement and streamlining of the user experience to ensure it is more accessible for the countless business owners who rely on SilverFlume. This initiative is intended to attract more businesses to the State of Nevada, thereby further stimulating economic growth.

Efficiency and user-friendliness are the guiding principles for this investment. The notion that a business owner should need a lawyer or an IT expert to navigate the licensing process is outdated, thus the

objective of this system overhaul is to create a more logical, efficient process flow, coupled with an enhanced customer service experience that uses technology such as chatbots and self-help tools to reduce the workload on state employees.

The solution will include 24/7 exception monitoring, enabling a swift response to any potential threats or system breaches. Additionally, the agency's disaster recovery plan will be meticulously tested and documented to ensure minimal disruption in the face of unforeseen incidents. Thus, while the SilverFlume Business Portal evolves to offer a more efficient, user-friendly experience, it will continue to prioritize the cybersecurity of the state and its users and the protection of their data. The Office of the CIO supports the agency's commitment to improved security. As the agency seeks to improve and streamline the user experience for Nevada's business owners and to maintain data security and integrity, the agency should implement advanced security protocols, including multi-factor authentication and encryption where possible, to protect sensitive user data.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: 27474

Amendment Number: 5

Legal Entity Name: GARTNER, INC.

Agency Name: SECRETARY OF STATE'S OFFICE

Agency Code: 040

Appropriation Unit: 1051-16

Contractor Name: GARTNER, INC.

Address: 56 TOP GALLANT ROAD

Is budget authority available?: Yes

City/State/Zip: STAMFORD, CT 06902-7700

If "No" please explain: Not Applicable

Contact/Phone: Yvette Toledo 602-561-8599

Vendor No.: T80976121

NV Business ID: NV19941112701

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.

X General Funds 65.00 %

Fees 0.00 %

X Federal Funds 35.00 %

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 05/09/2023

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 03/31/2025

Contract term: 1 year and 327 days

4. Type of contract: Other (include description): MSA Work Plan

Contract description: IV&V Services

5. Purpose of contract:

This is the fifth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides acquisition support services. This service agreement provides independent validation and verification services for the new centralized statewide database and election management system. This amendment increases the maximum amount from \$1,950,500 to \$3,169,000 due to the addition of risk assessment and monitoring activities and deliverables.

6. CONTRACT AMENDMENT

|   | Trans \$       | Info Accum \$  | Action Accum \$ | Agenda       |
|---|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$703,000.00   | \$703,000.00   | \$703,000.00    | Yes - Action |
| a. Amendment 1:                             | \$0.00         | \$0.00         | \$0.00          | No           |
| b. Amendment 2:                             | \$407,500.00   | \$407,500.00   | \$407,500.00    | Yes - Action |
| c. Amendment 3:                             | \$840,000.00   | \$840,000.00   | \$840,000.00    | Yes - Action |
| d. Amendment 4:                             | \$0.00         | \$0.00         | \$0.00          | No           |
| 2. Amount of current amendment (#5):        | \$1,218,500.00 | \$1,218,500.00 | \$1,218,500.00  | Yes - Action |
| 3. New maximum contract amount:             | \$3,169,000.00 |                |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

Assembly bill 422 from the 81st Legislative session requires the Nevada Secretary of State to create a centralized database that collects and stores voter preregistration and registration information allowing each county clerk to have accessibility to this database. The SOS has contracted with a vendor to provide this system. This work is required to ensure the successful outcome of the project.

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 tools nor the expertise required to do this work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

PASS Agreement under NASPO contract.

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:

This vendor has provided services to other state agencies 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:

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

dbowma1

10/08/2024 10:14:01 AM

|                           |         |                        |
|---------------------------|---------|------------------------|
| Division Approval         | dbowma1 | 10/08/2024 10:14:10 AM |
| Department Approval       | dbowma1 | 10/08/2024 10:14:18 AM |
| Contract Manager Approval | adale   | 10/11/2024 14:33:40 PM |
| EITS Approval             | ljean   | 10/11/2024 14:40:09 PM |
| Budget Analyst Approval   | mranki1 | 10/15/2024 11:09:17 AM |
| BOE Agenda Approval       | mranki1 | 10/15/2024 11:09:25 AM |



## Karin Paul

---

**From:** Lisa Jean  
**Sent:** Friday, April 29, 2022 9:28 AM  
**To:** Tim Horgan; Mark Wlaschin; Debbie Bowman; Karin Paul  
**Cc:** Timothy Galluzi; Robert W. Dehnhardt; David Axtell; TIR's  
**Subject:** TIN Completion Memo – SOS – TIN 347 – Voter Registration and Election Management Solution (VREMS) – BA 1050 and 1051  
**Attachments:** TIN Completion Memo - SOS - 347 - Voter Registration and Election management Solution (VREMS) - 1050, 1051.pdf

All,

We have completed our review for the Secretary of State's Office's (SOS) – *Voter Registration and Election Management Solution (VREMS)* – TIN 347.

The submitted TIN, for an estimated value of \$13,817,007.64 in the FY24/FY25 biennium (20% Federal Grant and 80% Anticipated funding from the next legislative session), is to implement a COTS solution for a centralized, top-down Voter Registration and Elections Management System.

The solution is expected to provide for future integration of the technology with other agencies; minimize the number of provisional ballots cast, duplicate voter registrations, and the amount of effort for constituents who move to be registered in their new locations; reduce operational maintenance costs and the hours spent on data management and analysis; provide for ad hoc data mining and transparency in voter registration; ensure the security of voter registration data; and provide real-time integration and updates of voter registration data.

VREMS will satisfy 2021 Nevada Legislative Session requirements for automatic voter registration (AB432) and the creation of a centralized database that collects and stores voter registration information (AB422).

Hosting of the solution is likely to involve cloud, on-premises, and standalone elements. Any cloud-based elements will be on a government private cloud with servers located only within the U.S. The agency considers the investment and final implementation to have an ongoing 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 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.

**Sincerely,**

**Lisa Jean, MS-CSIA | TIN Administrator/Enterprise Architect**

State of Nevada | Department of Administration | Enterprise IT Services

T: 775-687-9076 | C: 845-238-1081 | E: [ljean@admin.nv.gov](mailto:ljean@admin.nv.gov)

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: 29744

Agency Name: SECRETARY OF STATE'S OFFICE

Agency Code: 040

Appropriation Unit: 1051-31

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: SHI INTERNATIONAL CORP.

Contractor Name: SHI INTERNATIONAL CORP.

Address: PO Box 952121

City/State/Zip: Dallas, TX 75395

Contact/Phone: James Tagliaferro 8005276389

Vendor No.: PUR0001595A

NV Business ID: NV20131129294

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 %

Federal Funds 0.00 %

Highway Funds 0.00 %

Fees 0.00 %

Bonds 0.00 %

Other funding 0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/05/2024

Anticipated BOE meeting date 11/2024

Retroactive? Yes

If "Yes", please explain

The Secretary of State's Office is committed to ensuring that Nevada has the most secure, accurate, and accessible elections in the country. To achieve those objectives the Secretary's office has contracted with Mandiant to execute an assessment as part of the Voter Registration Elections Management Solutions (VREMS) project. Given that VREMS went live Mid-August, the election is in November, and the next available Board of Examiner's (BOE) is November, the Secretary of State cannot wait.

3. Termination Date: 10/01/2025

Contract term: 1 year and 26 days

4. Type of contract: Contract

Contract description: VREMS Security

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-12771 which provides software licensing, maintenance, and related services. This service agreement provides a one-time compromise assessment to identify evidence of past or ongoing malicious activity and identify weaknesses in security configurations that increase risk or inhibit investigations.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$226,653.60

Payment for services will be made at the rate of \$226,653.60 per null

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 Secretary of State's Office is committed to ensuring that Nevada has the most secure, accurate, and accessible elections in the country. To achieve those objectives the Secretary's office must contract with an independent company to execute an assessment as part of the Voter Registration Elections Management Systems Project.

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

State employees lack the time, knowledge, and expertise to complete the work.

9. Were quotes or proposals solicited? No

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

No

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Statewide contract

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:

This vendor has provided services to other state agencies 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:  
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   | dbowma1  | 09/06/2024 11:41:54 AM |
| Division Approval         | dbowma1  | 09/06/2024 11:42:00 AM |
| Department Approval       | dbowma1  | 09/06/2024 11:42:04 AM |
| Contract Manager Approval | jmckeeha | 09/16/2024 09:15:18 AM |
| EITS Approval             | ljea     | 09/20/2024 11:55:56 AM |
| Budget Analyst Approval   | mranki1  | 09/23/2024 15:43:35 PM |
| BOE Agenda Approval       | mranki1  | 09/23/2024 15:43:37 PM |
| BOE Final Approval        | Pending  |                        |



**STATE OF NEVADA  
GOVERNOR'S OFFICE**  
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Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Debbie Bowman, Deputy Secretary of Operations, SOS  
Ashley Griffiths, Administrative Services Officer, SOS  
Josh Gruver, Chief IT Manager, SOS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – SOS – TIN 1035 – *Mandiant Consulting Services*  
– BA 1050, 1051

**DATE:** August 30, 2024

We have completed our review for the Office of the Secretary of State's (SOS) – *Mandiant Consulting Services* – TIN 1035.

The submitted TIN, for an estimated value of \$226,653.60 in the FY24/FY25 biennium (100% General Fund), is to implement Mandiant Consulting Services, a data security vulnerability solution.

Mandiant Consulting Services offers a comprehensive suite of cybersecurity solutions that will ensure the safety of critical SOS systems from security vulnerabilities while effectively managing and mitigating cyber threats. Additionally, Mandiant is renowned for their expertise in incident response, threat intelligence, and security assessments that will enhance SOS' cyber resilience. These services will ensure that SOS is well-equipped to defend against sophisticated cyber-attacks while maintaining a robust

security posture in an evolving threat landscape.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

**FRANCISCO V. AGUILAR**

*Secretary of State*

**RUBEN J. RODRIGUEZ**

*Deputy Secretary for Southern Nevada*

**SHAUNA BAKKEDAHL**

*Deputy Secretary for Commercial Recordings*

**DEBBIE I. BOWMAN**

*Deputy Secretary for Operations*

**STATE OF NEVADA**



**OFFICE OF THE  
SECRETARY OF STATE**

**GABRIEL DI CHIARA**

*Chief Deputy Secretary of State*

**ERIN HOUSTON**

*Deputy Secretary for Securities*

**MARK A. WLASCHIN**

*Deputy Secretary for Elections*

# MEMORANDUM

To: Michael Rankin, Governor's Finance Office

From: Debbie Bowman, Deputy Secretary of State for Operation

CC: Gabriel DiChiara, Chief Deputy Secretary of State

Date: September 5, 2024

Subject: Retroactive Memo – CETS # 29744 - SHI - Mandiant

Enclosed for your consideration is a retroactive request to begin work on the contract between the Nevada Secretary of State and Mandiant via SHI on September 5th, 2024.

The Secretary of State's Office is committed to ensuring that Nevada has the most secure, accurate, and accessible elections in the country. To achieve those objectives the Secretary's office has contracted with Mandiant to execute an assessment as part of the Voter Registration Elections Management Solutions (VREMS) project.

Given that VREMS went live Mid-August, the election is in November, and the next available Board of Examiner's (BOE) is October, the Secretary of State cannot wait for the general BOE process as October would be too late for Mandiant to complete their assessment prior to the General Election in November.

Please consider this memorandum as justification for approval of this retroactive contract.

Should you have any questions, please contact me at 775-684-5720.

Thank you for your consideration.

**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: **29734**Agency Name: **TREASURER - TREASURER'S OFFICE**Agency Code: **050**Appropriation Unit: **1080-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Wells Fargo Bank, National Association

Contractor Name: **Wells Fargo Bank, National Association**Address: **420 Montgomery Street**City/State/Zip: **San Francisco, CA 94101**

Contact/Phone: Patrick Foley 800-869-3557

Vendor No.: T81020313

NV Business ID: N/A

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 % | <b>X</b> Other funding | <b>100.00 % Merchant; Deduction from Undistributed Interest</b> |

Agency Reference #: 05TO-S2505 TB

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2025**

Anticipated BOE meeting date 10/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2028**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Banking Services**

5. Purpose of contract:

**This is a new contract to provide ongoing general banking, lockbox, and merchant services to state agencies.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$5,000,000.00**

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?

Pursuant to NRS 226.110, the State Treasurer is responsible for the receipt and disbursement of public money. Public money must be kept in FDIC insured bank accounts and therefore a contract for banking services is required.

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

This work has to be conducted by a financial institution. The Office is not a financial institution; therefore, the State employees cannot do the work.

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-S2505, 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: 11/09/2023 Anticipated re-bid date: 11/09/2027

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:

Other

**Nonqualified Foreign Entities**

16. a. Is 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.

**as a bank, this business is a nonfiling/nonqualified entity that is not required to have a state business license or to file an exemption. It is known in the Secretary of State's SilverFlume system as Entity #E13356622021-2.**

18. 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   | jlanderf | 08/28/2024 16:08:01 PM |
| Division Approval         | jlanderf | 08/28/2024 16:08:11 PM |
| Department Approval       | jlanderf | 08/28/2024 16:08:19 PM |
| Contract Manager Approval | jveit    | 08/29/2024 13:24:15 PM |
| Budget Analyst Approval   | stilley  | 10/04/2024 13:59:57 PM |
| BOE Agenda Approval       | stilley  | 10/04/2024 14:00:00 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: 29719

Agency Name: TREASURER - COLLEGE SAVINGS TRUST

Agency Code: 051

Appropriation Unit: 1092-04

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: MEKETA INVESTMENT GROUP, INC.

Contractor Name: MEKETA INVESTMENT GROUP, INC.

Address: 80 University Ave

City/State/Zip: WESTWOOD, MA 02090-1150

Contact/Phone: 781/471-5300

Vendor No.: T29042101

NV Business ID: NV20191282371

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

General Funds0.00 %

Fees0.00 %

Federal Funds0.00 %

Bonds0.00 %

Highway Funds0.00 %

X Other funding100.00 %

Transfer from College Savings Endowment

Agency Reference #: 05TO-S2796

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2028

Contract term: 4 years and 61 days

4. Type of contract: Contract

Contract description: Col Sav Consult

5. Purpose of contract:

This is a new contract to provide investment consulting services for the Prepaid Tuition and College Savings programs.

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?

NRS 353B requires the State Treasurer, as well as the Board of Trustees of the College Savings Plans of Nevada to administer the College Savings Plans of Nevada and the Prepaid tuition Trust Fund. These statutes specify the types of investments that may be purchased and the related constraints on how the Plan and Trust must be administered.

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

Investment Consulting work requires specialized knowledge, resources, and tools in the management and monitoring of investments related to the College Savings and Prepaid Trust Funds, which collectively hold approximately \$40B in assets on behalf of those saving for higher education.

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):

Aon Investments USA inc  
Meketa Investment Group, Inc  
Wilshire Associates Incorporated

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S2796, 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: 06/21/2024 Anticipated re-bid date: 06/01/2028

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   | Ihoove1 | 08/28/2024 09:44:10 AM |
| Division Approval         | Ihoove1 | 08/28/2024 09:44:14 AM |
| Department Approval       | Ihoove1 | 08/28/2024 09:44:18 AM |
| Contract Manager Approval | Ihoove1 | 08/28/2024 09:44:22 AM |
| Budget Analyst Approval   | stilley | 10/21/2024 17:27:13 PM |
| BOE Agenda Approval       | stilley | 10/21/2024 17:27:16 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: 29835

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

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? 2025-2029

What is the source of funds that 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

13.00 %

Federal Funds

0.00 %

Highway Funds

0.00 %

Fees

0.00 %

Bonds

0.00 %

X

Other funding

87.00 % Buildings and Grounds Rental Income

Agency Reference #: 08DOA-S2921 JS

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/30/2028

Contract term: 4 years and 30 days

4. Type of contract: Contract

Contract description: Janitorial Services

5. Purpose of contract:

This is a new contract to provide janitorial services for the Professional Circle building located in Reno.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$964,858.56

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?

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:

Buildings and Grounds do not have the manpower needed to maintain the integrity of additional properties.

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):

J & L  
Qual-Econ USA  
McNeil's Cleaning Services, Inc

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #08DOA-S2921 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: 09/06/2024 Anticipated re-bid date: 05/01/2028

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-Admin/B&G-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   | slon5   | 10/01/2024 11:11:00 AM |
| Division Approval         | jkidd   | 10/04/2024 09:22:27 AM |
| Department Approval       | jkidd   | 10/04/2024 09:22:31 AM |
| Contract Manager Approval | ssands  | 10/09/2024 07:12:33 AM |
| Budget Analyst Approval   | klay0   | 10/09/2024 10:20:35 AM |
| BOE Agenda Approval       | klay0   | 10/09/2024 10:20:39 AM |
| BOE Final Approval        | Pending |                        |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29860

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: Kittrell Jensen Contractors, LLC

Contractor Name: Kittrell Jensen Contractors, LLC

Address: 1919 S. Jones Boulevard # B

City/State/Zip: Las Vegas, NV 89146

Contact/Phone: Justin Kittrell 702-638-8547

Vendor No.: T29049717

NV Business ID: NV20051354970

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

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 241 days

4. Type of contract: Contract

Contract description: Veteran's Memorial

5. Purpose of contract:

This is a new contract to provide removal and storage of statues, benches, and engraved stones at the Veteran's Memorial Park located at the Grant Sawyer building in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$200,000.00

Other basis for payment: \$160,000 has been quoted and anticipate another \$40,000 for additional unforeseen costs.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Veterans Memorial located at the Grant Sawyer building needs to be relocated.

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

Construction consultants are selected based on their ability to provide professional engineering and architectural services to the State of Nevada .

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

**Approval #: 241004**

**Approval Date: 10/08/2024**

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   | bmcDani | 10/04/2024 16:16:04 PM |
| Division Approval         | jkidd   | 10/07/2024 11:27:34 AM |
| Department Approval       | jkidd   | 10/07/2024 11:27:37 AM |
| Contract Manager Approval | gdavi6  | 10/11/2024 15:31:23 PM |
| Budget Analyst Approval   | klay0   | 10/16/2024 09:26:14 AM |
| BOE Agenda Approval       | klay0   | 10/16/2024 09:26:17 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

|                             |          |
|-----------------------------|----------|
| <b>Purchasing Use Only:</b> |          |
| Approval#:                  | 241004 @ |

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|    |  |                       |                                |
|----|--|-----------------------|--------------------------------|
| 1a | <b>Agency Contact Information - Note:</b> Approved copy will be sent to <u>ONLY</u> the contact(s) listed below: |                       |                                |
|    | <b>STATE AGENCY NAME REQUIRED:</b> <i>Department of Administration</i>   |                       |                                |
|    | <b>Contact Name and Title</b>  | <b>Phone Number</b>   | <b>Email Address</b>           |
|    | <i>Joy Grimmer, Director of Administration</i>   | <i>(775) 531-3141</i> | <i>joygrimmer@admin.nv.gov</i> |

|    |   |  |
|----|---|--|
| 1b | <b>Vendor Information:</b>                            |  |
|    | Vendor Name:  | <i>Kittrell Jensen Contractors</i>                   |
|    | Contact Name:   | <i>Justin Kittrell</i>                               |
|    | <b>Complete Address:</b><br>City, State, and Zip Code | <i>1919 S Jones Blvd #B. Las Vegas, Nevada 89146</i> |
|    | Telephone Number:                                     | <i>(702) 638-8547</i>                                |
|    | Email Address:  | <i>justin@kittrelljensen.com</i>                     |

|    |   |                                     |
|----|---|-------------------------------------|
| 1c | <b>Type of Waiver Requested – Check the appropriate type:</b> |                                     |
|    | Sole or Single Source:  | <input checked="" type="checkbox"/> |
|    | Professional Service Exemption:                               | <input type="checkbox"/>            |

|    |  |      |                                     |     |
|----|--|------|-------------------------------------|-----|
| 1d | <b>Contract Information:</b>           |      |                                     |     |
|    | Is this a new Contract? Check One:     | Yes: | <input checked="" type="checkbox"/> | No: |
|    | <b>If 'No' Enter Amendment Number:</b> | #    |                                     |     |
|    | <b>Enter CETS Number:</b>              | #    |                                     |     |

|    |                                   |             |                                     |   |
|----|-----------------------------------|-------------|-------------------------------------|---|
| 1e | <b>Term:</b>                      |             |                                     |   |
|    | One (1) Time Purchase? Check One: | Yes:        | <input checked="" type="checkbox"/> | No:   |
|    | Contract:                         | Start Date: | <i>Upon Approval</i>                | End Date: <i>06/30/2025</i><br><i>Per Sue Sands</i> |

|    |                     |   |
|----|---------------------|---|
| 1f | <b>Funding:</b>     |   |
|    | State Appropriated: | <input checked="" type="checkbox"/> <i>(010 1301)</i> |
|    | Federal Funds:      |   |
|    | Grant Funds:        |   |



|  |                  |  |
|--|------------------|--|
|  | Other (Explain): |  |
|--|------------------|--|

Purchasing Use Only:

Approval #:

241004 ②

|    |   |
|----|---|
| 1g | Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: |
|    | \$200,000.00  |

|   |  |
|---|--|
| 2 | <p><b>Provide a description of work/services to be performed or services with goods to be purchased:</b></p> <p><i>The service will include dismantling, transporting, and storing the Veterans Memorial Monument elements (statues, engraved marble, benches, engraved pavers) located at the Grant Sawyer Building (555 E Washington Ave, Las Vegas Nv.), to a storage facility in Las Vegas Nevada.</i></p> |
|---|--|

|   |   |
|---|---|
| 3 | <p><b>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</b></p> <p><i>The Contractor, Kittrell Jensen Contractors, were the original contractors and have unique knowledge of the history, materials, and construction of the Memorial.</i></p> |
|---|---|

|   |   |
|---|---|
| 4 | <p><b>Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:</b></p> <p><i>The Memorial needs to be relocated before the sale of the Grant Sawyer Building and time is of the essence. A competitive bid would take more time and possible leave the Memorial subject to vandalism once security is removed from the property.</i></p> |
|---|---|

|   |   |                   |    |
|---|---|-------------------|----|
| 5 | Were alternative services or commodities evaluated?   | <b>Check One:</b> |    |
|   |   | Yes               | No |
|   |   |                   | ✓  |
|   | <p>a. <u>If yes</u>, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</p>                                 |                   |    |
|   | <p>b. <u>If not</u>, why were alternatives not evaluated?</p> <p><i>There is no alternative; the Memorial is State property and must be removed prior to the State selling the building and land.</i></p> |                   |    |

Purchasing Use Only:

Approval #:

241004 0

|   |   |                 |              |                          |   |               |    |
|---|---|-----------------|--------------|--------------------------|---|---------------|----|
| 6 | Has the agency purchased these services/services with goods in the past? Check One:   |                 |              |                          |   | Yes           | No |
|   | <b>NOTE: To avoid delays or your request being rejected, 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></b>   |                 |              |                          |   |               | ✓  |
|   | <b>a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u></b> |                 |              |                          |   |               |    |
|   | <b>Term</b>   |                 | <b>Value</b> | <b>Short Description</b> | <b>Provide Type of Procurement RFP#, RFQ#, Waiver #</b> | <b>CETS #</b> |    |
|   | <b>Start Date</b>   | <b>End Date</b> |              |                          |   |               |    |
|   |   |                 | \$           |                          |   |               |    |
|   |   |                 | \$           |                          |   |               |    |
|   |   | \$              |              |                          |   |               |    |
|   |   | \$              |              |                          |   |               |    |
|   |   | \$              |              |                          |   |               |    |

|   |  |
|---|--|
| 7 | What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?  |
|   | <b>If this waiver request is denied there could be a lengthy delay initiating the work, and while security at the site will be abandoned soon, it would leave the Monument unprotected and susceptible to damage from vandalism. The site is also in the process of being sold and the Monument needs to be dismantled and relocated before ownership changes.</b> |

|   |   |
|---|---|
| 8 | What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?  |
|   | <b>The Contractor who performed the construction of the Memorial has the most knowledge for removing and storing the Memorial. The cost appears to be fair and reasonable after the review by SPWD construction project managers.</b> |

|   |  |  |     |    |
|---|--|--|-----|----|
| 9 | Will this purchase obligate the State to this vendor for future purchases? Check One:  |  | Yes | No |
|   | <b><u>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u></b> |  |     | ✓  |
|   | <b>a. If yes, please provide details regarding future obligations or needs.</b>  |  |     |    |
|   |  |  |     |    |

Purchasing Use Only:

Approval #:

2410040

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

Signature of Agency Representative Initiating Request

Wilfred Lewis

Oct 1, 2024

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

Joy Grimmer

Oct 3, 2024

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:

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 Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

**NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**

Approved by:



Administrator, Purchasing Division or Designee

10/8/24

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: 29826

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: NLS GROUNDS MANAGEMENT LLC.

Contractor Name: NLS GROUNDS MANAGEMENT LLC.

Address: 8630 CAMERON STREET

City/State/Zip: LAS VEGAS, NV 89139

Contact/Phone: JAMES NEVILLE 702-259-6408

Vendor No.: T32016856

NV Business ID: NV20101873551

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

General Funds0.00 %

Federal Funds0.00 %

Highway Funds0.00 %

Fees0.00 %

Bonds0.00 %

Other funding100.00 %

Buildings and Grounds Rental Income

Agency Reference #: 08DOA-S2915 JS

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 12/01/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/30/2028

Contract term: 4 years

4. Type of contract: Contract

Contract description: Landscaping Maint

5. Purpose of contract:

This is a new contract to provide landscaping maintenance services for the Department of Motor Vehicles' Donovan, Flamingo, Sahara, and Campos locations in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$439,640.00

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?

Lawn maintenance needs to be done to maintain the buildings.

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

This job requires specialized training and equipment.

9. Were quotes or proposals solicited? Yes

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

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

Rhino's Turf  
Del Sol Landscape Construction Inc.  
Summerscape, LLC

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP # 08DOA-S2915, 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: 09/04/2024 Anticipated re-bid date: 05/01/2028

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   | slon5   | 09/30/2024 12:57:49 PM |
| Division Approval         | jkidd   | 10/07/2024 11:30:22 AM |
| Department Approval       | jkidd   | 10/07/2024 11:30:25 AM |
| Contract Manager Approval | ssands  | 10/08/2024 07:45:27 AM |
| Budget Analyst Approval   | klay0   | 10/08/2024 17:17:22 PM |
| BOE Agenda Approval       | klay0   | 10/08/2024 17:17:26 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: **29048**Amendment  
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS  
DIVISION**Legal Entity  
Name: **DOWL, LLC**Agency Code: **082**Contractor Name: **DOWL, LLC**Appropriation Unit: **1550-13**Address: **5510 LONGLEY LN.**Is budget authority  
available?: **Yes**City/State/Zip **RENO, NV 89511**

If "No" please explain: Not Applicable

Contact/Phone: **775-851-4788**Vendor No.: **T29046505**NV Business ID: **NV20151234066**To what State Fiscal Year(s) will the contract be charged? **2024-2025**

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 % | <b>X</b> Bonds | <b>100.00 %</b> |
| Highway Funds | 0.00 % | Other funding  | 0.00 %          |

Agency Reference #: **116484**

2. Contract start date:

a. Effective upon Board of  
Examiner's approval? **No** or b. other effective date **05/14/2024**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved  
Termination Date: **06/30/2025**Contract term: **1 year and 47 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 Northern Nevada Correctional Center - Electrical Distribution Upgrade CIP Project: CIP Project No. 21-M16; SPWD Contract No. 116484. This amendment increases the maximum amount from \$328,705.76 to \$566,076.70 due to additional construction administration services resulting from extended construction delays.**

**6. CONTRACT AMENDMENT**

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$328,705.76 | \$328,705.76  | \$328,705.76    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$237,370.94 | \$237,370.94  | \$237,370.94    | Yes - Action |
| 3. New maximum contract amount:             | \$566,076.70 |               |                 |              |

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**2021 Leg. Approved CIP Projects**

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | nmann   | 10/01/2024 14:24:53 PM |
| Division Approval         | nmann   | 10/01/2024 14:24:59 PM |
| Department Approval       | nmann   | 10/01/2024 14:25:03 PM |
| Contract Manager Approval | lwildes | 10/02/2024 08:08:11 AM |
| Budget Analyst Approval   | klay0   | 10/10/2024 15:12:35 PM |
| BOE Agenda Approval       | klay0   | 10/10/2024 15:12:39 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: 28614

Amendment Number: 1

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: BURKE CONSTRUCTION GROUP, INC.

Agency Code: 082

Contractor Name: BURKE CONSTRUCTION GROUP, INC.

Appropriation Unit: 1558-20

Address: 385 PILOT RD., STE. D

Is budget authority available?: Yes

City/State/Zip: LAS VEGAS, NV 89119-3526

If "No" please explain: Not Applicable

Contact/Phone: 702-367-1040

Vendor No.: T32007101

NV Business ID: NV19841005880

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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.

|   |               |          |               |        |
|---|---------------|----------|---------------|--------|
| 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 #: 116144

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/09/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 172 days

4. Type of contract: Contract

Contract description: OWNER-CMAR

5. Purpose of contract:

This is the first amendment to the original contract which provides Owner Construction Manager At-Risk services for the Health and Human Services - Southern Nevada Forensic Facility Advanced Planning CIP Project: CIP Project No. 23-P06; SPWD Contract No. 116144. This amendment increases the maximum amount from \$329,074 to \$435,717 due to preconstruction services including schematic design through Guaranteed Maximum Price.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$329,074.00 | \$329,074.00  | \$329,074.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$106,643.00 | \$106,643.00  | \$106,643.00    | Yes - Action |
| 3. New maximum contract amount:             | \$435,717.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP projects

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



Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results

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

No If "Yes", please provide details of the litigation 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   | 09/30/2024 10:18:35 AM |
| Division Approval         | nmann   | 09/30/2024 10:18:39 AM |
| Department Approval       | nmann   | 09/30/2024 10:18:43 AM |
| Contract Manager Approval | lwildes | 09/30/2024 10:35:17 AM |
| Budget Analyst Approval   | klay0   | 10/12/2024 10:12:33 AM |
| BOE Agenda Approval       | klay0   | 10/12/2024 10:12:37 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: 28054

Amendment Number: 2

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: CARPENTER SELLERS DEL GATTO ARCHITECTS, PC

Agency Code: 082

Contractor Name: CARPENTER SELLERS DEL GATTO ARCHITECTS, PC

Appropriation Unit: 1594-35

Address: 8882 SPANISH RIDGE AVE.

Is budget authority available?: Yes

City/State/Zip: LAS VEGAS, NV 89148-1303

If "No" please explain: Not Applicable

Contact/Phone: 702-251-8896

Vendor No.: T80997582

NV Business ID: NV19871041301

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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.

|                     |               |          |               |        |
|---------------------|---------------|----------|---------------|--------|
| 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 #: |               | 115630   |               |        |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/12/2023

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 292 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architectural/engineering services for the Las Vegas Purchased Building Improvements CIP Project: CIP Project No. 23-C36; SPWD Contract No. 115630. This amendment increases the maximum amount from \$400,000 to \$600,000 due to additional design services, general consulting, and tenant improvements for additional buildings.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$200,000.00 | \$200,000.00  | \$200,000.00    | Yes - Action |
| a. Amendment 1:                             | \$200,000.00 | \$200,000.00  | \$200,000.00    | Yes - Action |
| 2. Amount of current amendment (#2):        | \$200,000.00 | \$200,000.00  | \$200,000.00    | Yes - Action |
| 3. New maximum contract amount:             | \$600,000.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Project

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 08/27/2024 11:22:32 AM |
| Division Approval         | nmann   | 08/27/2024 16:49:12 PM |
| Department Approval       | nmann   | 08/27/2024 16:50:52 PM |
| Contract Manager Approval | lwildes | 08/28/2024 07:36:05 AM |
| Budget Analyst Approval   | klay0   | 10/10/2024 15:39:10 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: 28387

Amendment Number: 1

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: PAUL CAVIN ARCHITECT LLC

Agency Code: 082

Contractor Name: PAUL CAVIN ARCHITECT LLC

Appropriation Unit: 1594-30

Address: 1575 DELUCCHI LN., STE. 120

Is budget authority available?: Yes

City/State/Zip: RENO, NV 89502-6581

If "No" please explain: Not Applicable

Contact/Phone: 775-842-0261

Vendor No.: T29033842

NV Business ID: NV20131182382

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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.

|   |               |          |               |        |
|---|---------------|----------|---------------|--------|
| 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 #: 115947

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/03/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 178 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 Northern Nevada Children's Home - Demolition of Cottages CIP Project: CIP Project No. 23-C19; SPWD Contract No. 115947. This amendment increases the maximum amount from \$97,740 to \$101,190 due to NV Energy permit fees for the electrical disconnect.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$97,740.00  | \$97,740.00   | \$97,740.00     | Yes - Info   |
| 2. Amount of current amendment (#1):        | \$3,450.00   | \$3,450.00    | \$101,190.00    | Yes - Action |
| 3. New maximum contract amount:             | \$101,190.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | nmann   | 09/26/2024 11:39:22 AM |
| Division Approval         | nmann   | 09/26/2024 11:39:25 AM |
| Department Approval       | nmann   | 09/26/2024 11:39:29 AM |
| Contract Manager Approval | lwildes | 09/27/2024 08:42:52 AM |
| Budget Analyst Approval   | klay0   | 10/12/2024 09:47:02 AM |
| BOE Agenda Approval       | klay0   | 10/12/2024 09:47:06 AM |

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**1. Contract Number: **24852**Amendment  
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS  
DIVISION**Legal Entity  
Name: **PETTY & ASSOCIATES, INC.**Agency Code: **082**Contractor Name: **PETTY & ASSOCIATES, INC.**Appropriation Unit: **1594-19**Address: **760 MARGRAVE DRIVE, SUITE 100**Is budget authority  
available?: **Yes**City/State/Zip **RENO, NV 89502**

If "No" please explain: Not Applicable

Contact/Phone: **775-359-5777**Vendor No.: **T80580350**NV Business ID: **NV19841014622**To what State Fiscal Year(s) will the contract be charged? **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 %

**X** Highway Funds **100.00 %** Other funding 0.00 %

Agency Reference #: 114304

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **09/17/2021**  
Examiner's approval?

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved **06/30/2025**  
Termination Date:Contract term: **3 years and 287 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

**This is the first amendment to the original contract which provides professional architectural/engineering services for the Carson City Department of Motor Vehicles HVAC Renovation CIP Project: CIP Project No. 21-M23; SPWD Contract No. 114304. This amendment increases the maximum amount from \$70,000 to \$107,500 due to the additional construction administration services needed to extend the construction schedule.****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 - Info   |
| 2. Amount of current amendment (#1):        | \$37,500.00  | \$37,500.00   | \$107,500.00    | Yes - Action |
| 3. New maximum contract amount:             | \$107,500.00 |               |                 |              |

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**2021 Leg. approved CIP**

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

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

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

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

Not Applicable

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

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

Demonstrated the required expertise for work on this project.

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

10. 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:

Yes. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 09/30/2024 10:54:04 AM |
| Division Approval         | nmann   | 09/30/2024 10:54:15 AM |
| Department Approval       | nmann   | 09/30/2024 10:54:18 AM |
| Contract Manager Approval | lwildes | 09/30/2024 10:58:16 AM |
| Budget Analyst Approval   | klay0   | 10/12/2024 10:31:30 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: **28829**Amendment  
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS  
DIVISION**Legal Entity  
Name: **CARPENTER SELLERS DEL GATTO  
ARCHITECTS, PC**Agency Code: **082**Contractor Name: **CARPENTER SELLERS DEL GATTO  
ARCHITECTS, PC**Appropriation Unit: **All Appropriations**Address: **8882 SPANISH RIDGE AVE.**Is budget authority  
available?: **No**City/State/Zip **LAS VEGAS, NV 89148-1303**

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 3011, expenditure category 21, CNTR Excellence Public Safety.

Contact/Phone: **702-251-8896**Vendor No.: **T80997582**NV Business ID: **NV19871041301**To what State Fiscal Year(s) will the contract be charged? **2024-2025**

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 % | <b>X Other funding</b> | <b>100.00 % Agency Funded CIP</b> |

Agency Reference #: **116346**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **03/12/2024**  
Examiner's approval?

Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved **06/30/2025**

Termination Date:

Contract term: **1 year and 110 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 College of Southern Nevada, Northwest Campus - Center for Excellence in Public Safety CIP Project: CIP Project No. 24-A008; SPWD Contract No. 116346. This amendment increases the maximum amount from \$3,224,834.00 to \$6,604,989.40 due to the design of a 60,700 square-foot building, central plant, and emergency vehicle operations course, from the design phase through the issuance of bid documents, as determined after the programming phase of the project.**

6. CONTRACT AMENDMENT

|   | Trans \$       | Info Accum \$  | Action Accum \$ | Agenda       |
|---|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$3,224,834.00 | \$3,224,834.00 | \$3,224,834.00  | Yes - Action |
| 2. Amount of current amendment (#1):        | \$3,380,155.40 | \$3,380,155.40 | \$3,380,155.40  | Yes - Action |
| 3. New maximum contract amount:             | \$6,604,989.40 |                |                 |              |

## II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application - Board of Regents of the Nevada System of Higher Education on behalf of the College of Southern Nevada

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 10/01/2024 11:33:46 AM |
| Division Approval         | nmann   | 10/01/2024 11:33:52 AM |
| Department Approval       | nmann   | 10/01/2024 11:33:56 AM |
| Contract Manager Approval | lwildes | 10/02/2024 08:18:34 AM |
| Budget Analyst Approval   | klay0   | 10/18/2024 16:47:39 PM |
| BOE Agenda Approval       | klay0   | 10/18/2024 16:47:42 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: 29878

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 1362, expenditure category 56, ARPA Food Insecurity.

Legal Entity Name: NEW WEST COMPANY, LLC

Contractor Name: NEW WEST COMPANY, LLC

Address: 2595 CHANDLER AVE., STE. 18

City/State/Zip: LAS VEGAS, NV 89120

Contact/Phone: 702-528-4812

Vendor No.: T32016506

NV Business ID: NV20161674839

To what State Fiscal Year(s) will the contract be charged? 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 Funded CIP |

Agency Reference #: 117213

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 241 days

4. Type of contract: Contract

Contract description: MSA

5. Purpose of contract:

This is a new contract to provide development and project management services for the Agriculture Warehouse Tenant Improvements (Las Vegas) CIP Project to include schematic design with specialty tenant improvements for 13,000 square-feet of drive-in freezer space with associated support infrastructure: CIP Project No. 25-A011; SPWD Contract No. 117213.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$250,000.00

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 - Department of Agriculture

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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:

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

20. Contract Status:

Contract Approvals:

| Approval Level            | User    | Signature Date         |
|---------------------------|---------|------------------------|
| Budget Account Approval   | nmann   | 10/09/2024 15:40:55 PM |
| Division Approval         | nmann   | 10/09/2024 15:40:58 PM |
| Department Approval       | nmann   | 10/09/2024 15:41:01 PM |
| Contract Manager Approval | lwildes | 10/10/2024 06:49:13 AM |
| Budget Analyst Approval   | klay0   | 10/18/2024 17:02:34 PM |
| BOE Agenda Approval       | klay0   | 10/18/2024 17:02:37 PM |
| BOE Final Approval        | Pending |                        |

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**1. Contract Number: **26671**Amendment  
Number: **3**Agency Name: **DTCA - DIVISION OF TOURISM**Legal Entity  
Name: **RED SQUARE AGENCY, LLC**Agency Code: **101**Contractor Name: **RED SQUARE AGENCY, LLC**Appropriation Unit: **1522-31**Address: **PO BOX 2945**Is budget authority  
available?: **Yes**City/State/Zip **MOBILE, AL 36652**

If "No" please explain: Not Applicable

Contact/Phone: **Rich Sullivan 251-753-6923**Vendor No.: **T29046506**NV Business ID: **NV20222473235**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 % LODGING TAX**Agency Reference #: **RFP #10TCA-S1900 - AM**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **09/13/2022**  
Examiner's approval?Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved **12/31/2024**

Termination Date:

Contract term: **2 years and 110 days**4. Type of contract: **Contract**Contract description: **Brnd Strategy/Creatv**

5. Purpose of contract:

**This is the third amendment to the original contract which provides ongoing brand strategy and creative development services. This amendment increases the maximum amount from \$850,000 to \$1,062,500 due to the addition of the Adventure Guide and Governor's Conference on Tourism.**

6. CONTRACT AMENDMENT

|   | Trans \$       | Info Accum \$ | Action Accum \$ | Agenda       |
|---|----------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$850,000.00   | \$850,000.00  | \$850,000.00    | Yes - Action |
| a. Amendment 1:                             | \$0.00         | \$0.00        | \$0.00          | No           |
| b. Amendment 2:                             | \$0.00         | \$0.00        | \$0.00          | No           |
| 2. Amount of current amendment (#3):        | \$212,500.00   | \$212,500.00  | \$212,500.00    | Yes - Action |
| 3. New maximum contract amount:             | \$1,062,500.00 |               |                 |              |

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**The Department of Tourism relies on the bandwidth of a creative agency to fully develop an advertising campaign and assets to elevate the Nevada brand. This contract will include full production of a new broadcast spot and a suite of advertising elements, as the previous spot was produced in 2019 and rights will expire in 2023.**

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

Travel Nevada has a small internal staff also working on creative needs. However, the skillset and bandwidth does not exist internally. It is the job of staff to direct the process and ensure that the State has the assets produced professionally and effectively to market the State as a premier visitor destination.

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 #10TCA-1900, and in accordance with NRS 333, the selected vendor was one of several proposers whose proposal was reviewed, scored and deemed acceptable as determined by an independently appointed evaluation committee.

d. Last bid date: 02/15/2022 Anticipated re-bid date: 01/15/2026

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:

Foundry, LLC was previously contracted under Bauserman Group with NDOW - 5/2013 - 5/2017. This vendor has been verified as satisfactory.

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

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

Not Applicable

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

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 | amathies | 10/02/2024 13:08:14 PM |
| Division Approval       | amathies | 10/02/2024 13:08:30 PM |



|                           |          |                        |
|---------------------------|----------|------------------------|
| Department Approval       | amathies | 10/14/2024 12:51:13 PM |
| Contract Manager Approval | amathies | 10/14/2024 12:51:29 PM |
| Budget Analyst Approval   | mbro28   | 10/16/2024 07:41:58 AM |
| BOE Agenda Approval       | stilley  | 10/21/2024 17:34:35 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: 29794

Agency Name: INDIGENT DEFENSE

Agency Code: 111

Appropriation Unit: 1499-04

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: CAVANAUGH-BILL LAW OFFICES, LLC

Contractor Name: CAVANAUGH-BILL LAW OFFICES, LLC

Address: 401 Railroad Street, Suite 307

City/State/Zip: Elko, NV 89801

Contact/Phone: Julie Cavanaugh-Bill 775-753-4357

Vendor No.: T29047876

NV Business ID: NV20101368445

To what State Fiscal Year(s) will the contract be charged? 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 | 75.00 % | Fees            | 0.00 %                              |
|   | Federal Funds | 0.00 %  | Bonds           | 0.00 %                              |
|   | Highway Funds | 0.00 %  | X Other funding | 25.00 % County Maximum Contribution |

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 241 days

4. Type of contract: Contract

Contract description: Legal Services

5. Purpose of contract:

This is a new contract to provide public defense services for juveniles in White Pine County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$137,600.00

Payment for services will be made at the rate of \$172.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

White Pine County has transferred the responsibility for indigent defense services to the Nevada State Public Defender. Under NRS 180.050, the NSPD may enter a contract with a licensed attorney to provide such services for any reason.

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

The NSPD has insufficient staff to cover the required duties and has been unable to fill its vacant positions.

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?

White Pine County has transferred the responsibility for indigent defense services to the Nevada State Public Defender. Under NRS 180.050, the NSPD may enter a contract with a licensed attorney to provide such services for any reason.

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:

Since 10/31/2023 The agency is DIDS and service is satisfactory.

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

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

Not Applicable

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

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   | dcarlso4 | 09/19/2024 16:56:03 PM |
| Division Approval         | jkidd    | 09/20/2024 11:35:36 AM |
| Department Approval       | jkidd    | 09/20/2024 11:35:45 AM |
| Contract Manager Approval | ssands   | 10/17/2024 14:50:40 PM |
| Budget Analyst Approval   | vmilazz1 | 10/18/2024 10:43:47 AM |
| BOE Agenda Approval       | vmilazz1 | 10/18/2024 10:43:53 AM |
| BOE Final Approval        | Pending  |                        |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29350

Amendment Number: 1

Agency Name: ADMIN - ENTERPRISE IT SERVICES

Legal Entity Name: RFI ENTERPRISES, INC. DBA RFI COMMUNICATIONS & SECURITY

Agency Code: 180

Contractor Name: RFI ENTERPRISES, INC. DBA RFI COMMUNICATIONS & SECURITY

Appropriation Unit: 1389-26

Address: 360 TURTLE CREEK COURT

Is budget authority available?: Yes

City/State/Zip: SAN JOE, CA 95125

If "No" please explain: Not Applicable

Contact/Phone: David Gish 775-850-0403

Vendor No.: PUR0002572A

NV Business ID: NV20021334287

To what State Fiscal Year(s) will the contract be charged? 2024-2025

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 06/24/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/31/2024

Contract term: 190 days

4. Type of contract: Contract

Contract description: Nye NCAS Install

5. Purpose of contract:

This is the first amendment to the original contract which provides the installation of nineteen CCURE access controlled doors, one video intercom with desk station, and six closed-circuit television cameras at Nye Lane. This amendment increases the maximum amount from \$99,000 to \$115,780 due to the addition of a new agency in the building.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$99,000.00  | \$99,000.00   | \$99,000.00     | Yes - Info   |
| 2. Amount of current amendment (#1):        | \$16,780.00  | \$16,780.00   | \$115,780.00    | Yes - Action |
| 3. New maximum contract amount:             | \$115,780.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

As part of ongoing CIP projects, electronic access controls are required to secure the buildings for employees, information and equipment in these offices.

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

The state does not have qualified employees to complete the work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

**Approval #: 240506**

**Approval Date: 05/15/2024**

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

Lowest bidder

d. Last bid date: 05/23/2024 Anticipated re-bid date: 12/31/2024

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   | tday2    | 10/15/2024 16:02:07 PM |
| Division Approval         | rdehnhar | 10/15/2024 16:25:02 PM |
| Department Approval       | ddodge   | 10/16/2024 08:16:03 AM |
| Contract Manager Approval | thudder  | 10/17/2024 07:16:37 AM |
| Budget Analyst Approval   | mranki1  | 10/18/2024 14:39:10 PM |
| BOE Agenda Approval       | mranki1  | 10/18/2024 14:39:15 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#: 240506@

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|           |  |                     |                              |
|-----------|--|---------------------|------------------------------|
| <b>1a</b> | <b>Agency Contact Information - Note:</b> Approved copy will be sent to <u>ONLY</u> the contact(s) listed below: |                     |                              |
|           | <b>STATE AGENCY NAME REQUIRED:</b> <i>Office of the Chief Information Officer (OCIO)</i>                         |                     |                              |
|           | <i>Contact Name and Title</i>  | <i>Phone Number</i> | <i>Email Address</i>         |
|           | <i>Chuck Carroll, IT Professional</i>  | <i>775-684-7354</i> | <i>c.carroll@it.nv.gov</i>   |
|           | <i>Robert Dehnhardt, Deputy CIO / CISO</i>   | <i>775-531-3022</i> | <i>rwdehnhardt@it.nv.gov</i> |

|           |                            |  |
|-----------|----------------------------|--|
| <b>1b</b> | <b>Vendor Information:</b> |  |
|           | Vendor Name:               | <i>RFI Communications &amp; Security Systems</i> |
|           | Contact Name:              | <i>Dave Gish</i>                                 |
|           | <b>Complete Address:</b>   | <i>4060 S. McCarran Blvd. Suite A</i>            |
|           | City, State, and Zip Code  | <i>Reno, NV 89502</i>                            |
|           | Telephone Number:          | <i>775-852-3555</i>                              |
|           | Email Address:             | <i>dgish@rfi.com</i>                             |

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

|           |  |      |          |     |  |
|-----------|--|------|----------|-----|--|
| <b>1d</b> | <b>Contract Information:</b>           |      |          |     |  |
|           | Is this a new Contract? Check One:     | Yes: | <i>X</i> | No: |  |
|           | <b>If 'No' Enter Amendment Number:</b> |      |          |     |  |
|           | <b>Enter CETS Number:</b>              |      |          |     |  |

|           |                                   |             |                          |           |                   |
|-----------|-----------------------------------|-------------|--------------------------|-----------|-------------------|
| <b>1e</b> | <b>Term:</b>                      |             |                          |           |                   |
|           | One (1) Time Purchase? Check One: | Yes:        | <i>X</i>                 | No:       |                   |
|           | Contract:                         | Start Date: | <i>Upon BOE Approval</i> | End Date: | <i>12/31/2024</i> |

|           |                     |  |
|-----------|---------------------|--|
| <b>1f</b> | <b>Funding:</b>     |  |
|           | State Appropriated: |  |

|                  |                               |
|------------------|-------------------------------|
| Federal Funds:   |                               |
| Grant Funds:     |                               |
| Other (Explain): | <i>Internal service funds</i> |

Purchasing Use Only:

Approval #:

2405060

|    |   |
|----|---|
| 1g | Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: |
|    | \$750,000   |

|   |   |
|---|---|
| 2 | <p><b>Provide a description of work/services to be performed or services with goods to be purchased:</b></p> <p><i>Materials and labor associated with the installation and maintenance of CCure-9000 card access systems in buildings owned by the State of Nevada, including new buildings being acquired. Maintenance includes any existing CCure-9000 installations connected to the Nevada Camera/Card Access System managed by the Office of the CIO.</i></p> |
|---|---|

|   |  |
|---|--|
| 3 | <p><b>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</b></p> <p><i>Work must be performed by a vendor that is authorized by Software House, publisher of CCure-9000. Vendor must have sufficient staff to support multiple installations in the Reno/Carson and Las Vegas areas while still providing for repair and maintenance calls. Vendor must have a current valid Nevada contractor's license at the time of the contract signing.</i></p> |
|---|--|

|   |   |
|---|---|
| 4 | <p><b>Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:</b></p> <p><i>Multiple vendors currently on the existing good-of-the-state contract have been contacted regarding this work. All have indicated they currently have a very small presence in Nevada and cannot support the work at this time. Due to timing constraints on multiple projects, we need to go outside that contract to engage with a known contractor that meets all the specific requirements.</i></p> |
|---|---|

|   |   |                   |    |
|---|---|-------------------|----|
| 5 | <p><b>Were alternative services or commodities evaluated?</b></p>   | <b>Check One:</b> |    |
|   |   | Yes               | No |
|   |   | X                 |    |
|   | <p>a. <b><u>If yes</u></b>, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</p> <p><i>We contacted both ADT and Convergent, were told they would need to hire staff to meet the requirements. We also reached out to Intraworks multiple times but received no response. We also attempted to establish contract relations with Systems Engineering, Inc. and Harris Mountain West, who would perform the work through subcontractors. In the former case, the company was unable to obtain a state contractor's license, and in the latter the markup on subcontractor pricing was deemed too high.</i></p> |                   |    |
|   | <p>b. <b><u>If not</u></b>, why were alternatives not evaluated?</p>  |                   |    |

Purchasing Use Only:

Approval #:

240506 @

|  |            |          |             |                                     |  |                 |    |
|--|------------|----------|-------------|-------------------------------------|--|-----------------|----|
| Has the agency purchased these services/services with goods in the past? Check One:  |            |          |             |                                     |  | Yes             | No |
| <p><b>NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS</u> MUST ACCOMPANY THIS REQUEST.</b></p>   |            |          |             |                                     |  | X               |    |
| <p>a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information must be provided along with the CETS contract number(s) associated with each:</p>   |            |          |             |                                     |  |                 |    |
| 6  | Term       |          | Value       | Short Description                   | Provide Type of Procurement RFP#, RFQ#, Waiver # | CETS #          |    |
|  | Start Date | End Date |             |                                     |  |                 |    |
|  | 07/31/2023 | 05/24/24 | \$27,000    | Security Systems-Maintenance Update | Waiver 230511                                    | 27866           |    |
|  | 11/1/2017  | 07/31/23 | \$3,000,000 | Security Systems                    | RFP3407  | 99SWC-NV19-1295 |    |
|  |            |          | \$          |                                     |  |                 |    |
| <p>7 What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?</p> <p>Current CIP projects involving the multiple buildings in Reno/Carson and Las Vegas areas, including Arrowhead, McCarran Center, and Jones Campus buildings, will be delayed, with unanticipated costs associated with agency moves incurred, as well as possible security risk with buildings not being appropriately secured.</p> |            |          |             |                                     |  |                 |    |
| <p>8 What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?</p> <p>Costs being proposed by RFI are in line with costs previously negotiated on other contracts.</p>  |            |          |             |                                     |  |                 |    |
| <p>9 Will this purchase obligate the State to this vendor for future purchases? Check One:</p> <p><b>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</b></p>  |            |          |             |                                     |  | Yes             | No |
|  |            |          |             |                                     |  |                 | X  |
| <p>a. If yes, please provide details regarding future obligations or needs.</p>  |            |          |             |                                     |  |                 |    |

Purchasing Use Only:



Approval #:

240506 @

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

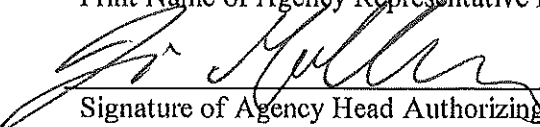

  
Signature of Agency Representative Initiating Request

Robert Dehnhardt, CIO / CISO

Print Name of Agency Representative Initiating Request

5/13/2024

Date


  
Signature of Agency Head Authorizing Request

Timothy Galluzi, Chief Information Officer

Print Name of Agency Head Authorizing Request

5/13/2024

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 Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

**NOTE:** *If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.*

Approved by:


  
Administrator, Purchasing Division or Designee

---

Date

5/16/24

**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: **29834**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2561-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **HEALTHCARE SERVICES GROUP, INC.**Contractor Name: **HEALTHCARE SERVICES GROUP, INC.**Address: **3220 TILLMAN DR STE 300**City/State/Zip: **BENSALEM, PA 19020-2028**

Contact/Phone: Rachel Kinney 859-588-0156

Vendor No.: T29031941

NV Business ID: NV20021482015

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

General Funds 0.00 % Fees 0.00 %

**X** Federal Funds **65.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **35.00 % Private/County**

Agency Reference #: RFP 24VS-S2900/HM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/01/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **11/30/2028**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Housekeeping/Laundry**

5. Purpose of contract:

**This is a new contract to provide ongoing daily housekeeping and laundry services.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,804,161.92****II. JUSTIFICATION**

7. What conditions require that this work be done?

**The agency does not have the staffing or expertise to perform these duties.**

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 staffing capacity, technical expertise or resources to fulfill this work.**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):

**Tender Loving Cleaning  
At Peace Home Care  
EduCare Community Living Corporation - Nevada**b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #24VS-S2900 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: 08/02/2024 Anticipated re-bid date: 08/01/2028

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 vendor 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:

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:

Jacob Clodfelter, Management Analyst II Ph: 775-825-9745

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jtheil1  | 10/02/2024 08:30:39 AM |
| Division Approval         | jtheil1  | 10/02/2024 08:30:43 AM |
| Department Approval       | jtheil1  | 10/02/2024 08:30:47 AM |
| Contract Manager Approval | jclodfel | 10/02/2024 08:57:14 AM |
| Budget Analyst Approval   | spowel3  | 10/09/2024 12:26:25 PM |
| BOE Agenda Approval       | vmilazz1 | 10/14/2024 13:10:08 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 CONTRACT

1. Contract Number: 23315

Amendment Number: 3

Legal Entity Name: DISCOVERY EDUCATION, INC.

Contractor Name: DISCOVERY EDUCATION, INC.

Address: 4350 Congress Street #700

City/State/Zip: Charlotte, NC 28209

Contact/Phone: Travis Barrs 281-687-4040

Vendor No.: T27043609

NV Business ID: NV20171492970

Agency Name: NDE - DEPARTMENT OF EDUCATION

Agency Code: 300

Appropriation Unit: 2673 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

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 %   | 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 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 07/31/2025

Contract term: 5 years and 31 days

4. Type of contract: Contract

Contract description: Build Infrastructure

5. Purpose of contract:

This is the third amendment to the original contract which provides for the implementation and support of an online learning platform and professional development. This amendment increases the maximum amount from \$4,400,000 to \$6,424,344 due to the continued need for these services and a change to the source of funding.

6. CONTRACT AMENDMENT

|   | Trans \$       | Info Accum \$  | Action Accum \$ | Agenda       |
|---|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$2,200,000.00 | \$2,200,000.00 | \$2,200,000.00  | Yes - Action |
| a. Amendment 1:                             | \$2,200,000.00 | \$2,200,000.00 | \$2,200,000.00  | Yes - Action |
| b. Amendment 2:                             | \$0.00         | \$0.00         | \$0.00          | No           |
| 2. Amount of current amendment (#3):        | \$2,024,344.00 | \$2,024,344.00 | \$2,024,344.00  | Yes - Action |
| 3. New maximum contract amount:             | \$6,424,344.00 |                |                 |              |

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 Discovery Education Inc. to provide Nevada's Districts and Schools with their social distancing efforts by building an infrastructure that supports distance education by increasing access to technological capacity; providing high-quality professional development; and providing high-quality instructional materials. 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:

Discovery Education 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? 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 contract. 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 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   | psmorr1 | 10/03/2024 15:12:03 PM |
| Division Approval         | psmorr1 | 10/03/2024 15:12:11 PM |
| Department Approval       | carnol1 | 10/03/2024 15:15:25 PM |
| Contract Manager Approval | khoy1   | 10/04/2024 07:43:31 AM |
| EITS Approval             | ljean   | 10/04/2024 13:56:36 PM |
| Budget Analyst Approval   | vfajota | 10/10/2024 14:50:06 PM |
| BOE Agenda Approval       | mranki1 | 10/15/2024 10:11:49 AM |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Cindi Chang, Director, NDE  
Kaylene Hoyt, Fiscal, NDE  
Sonali Bandyopadhyay, IT Professional, NDE

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – NDE – TIN 158 – *Discovery Education* – Update A – BA 2673

**DATE:** July 1, 2024

We have completed our review for the Nevada Department of Education’s (NDE) – *Discovery Education* – Update A – TIN 158.

The submitted TIN, for an estimated value of \$3,124,000.00 in the FY24/FY25 biennium (100% Federal Grant funding), is to extend the length of the Discovery Education, Inc. contract through FY25 and to expand the scope to include a Project Manager.

Discovery Education supports K-12 students in Nevada and is made available to the students through school districts across the state. Content is accessed independently of SilverNet. This cloud-based, commercial off the shelf (COTS) system is expected to pose a minimal IT risk to the state.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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

|                             |      |
|-----------------------------|------|
| <b>Purchasing Use Only:</b> |      |
| Approval #:                 | 5700 |

**CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM**

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

|   |  |                     |                         |
|---|--|---------------------|-------------------------|
| 1 | <b>Agency Contact Information:</b> Note: Approved copy will be sent to <u>only</u> to the contact(s) listed below: |                     |                         |
|   | <b>STATE AGENCY NAME REQUIRED:</b>   |                     | Department of Education |
|   | <b>Contact Name and Title</b>  | <b>Phone Number</b> | <b>Email Address</b>    |
|   | Kaylene Hoyt, Contracts Manager  | 775-687-9101        | ndecontracts@doe.nv.gov |
|   |  |                     |                         |

|   |   |  |
|---|---|--|
| 2 | <b>Contractor Information:</b>                |  |
|   | Contractor Name:                              | Discovery Education, Inc.                        |
|   | Contact Name:                                 | Travis Barrs                                     |
|   | Complete Address:<br>City, State and Zip Code | 4350 Congress Street #700<br>Charlotte, NC 28209 |
|   | Phone Number:                                 | 281-687-4040                                     |
|   | Email Address:                                | CRechner@discoveryed.com                         |

|   |   |             |    |           |
|---|---|-------------|----|-----------|
| 3 | <b>List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):</b> |             |    |           |
|   | Solicitation Type, if applicable:   |             | #: |           |
|   | Enter CETS Number:  | #           |    |           |
|   | Contract Amount:  | \$          |    |           |
|   | Contract Term:  | Start Date: |    | End Date: |

|                             |       |
|-----------------------------|-------|
| <b>Purchasing Use Only:</b> |       |
| Approval #:                 | 570 ② |

|                                      |                                   |   |            |                      |
|--------------------------------------|-----------------------------------|---|------------|----------------------|
| <b>Current Contract Information:</b> |                                   |   |            |                      |
| 4                                    | Solicitation Type, if applicable: | <i>Emergency Contract approval 05/27/2020</i> |            | #:                   |
|                                      | Enter CETS Number:                | #23315  |            |                      |
|                                      | Initial Contract Amount:          | \$2,200,000.00                                |            |                      |
|                                      | Contract Term:                    | Start Date:                                   | 07/01/2020 | End Date: 09/30/2022 |

|  |               |   |   |
|--|---------------|---|---|
| <b>Amendment Information – List <u>all previously</u> approved amendments:</b> |               |   |   |
| 5  | <i>Amd #:</i> | <i>Brief Synopsis of What Amendment Accomplished:</i> | <i>Dollar Change in Contract Amount</i>                     |
|  | 1             | Contract extended for time and authority added.       | Added \$2,200,000.00<br>Total Do not Exceed: \$4,400,000.00 |
|  |               |   | Change in End Date<br>09/30/2024                            |

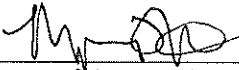
|   |               |  |  |
|---|---------------|--|--|
| <b><u>Proposed</u> Amendment Information:</b> |               |  |  |
| 6   | <i>Amd #:</i> | <i>Brief Synopsis of What the Requested Amendment will Accomplish</i>    | <i>Dollar Change in Contract Amount</i>                      |
|   | 2             | Contract extending for time and adding authority to cover time increase. | Adding \$2,024,344.00<br>Total Do not Exceed: \$6,424,344.00 |
|   |               |  | Change in End Date<br>07/31/2025                             |

|   |   |  |  |
|---|---|--|--|
| 7 | <b>What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?</b>  |  |  |
|   | <p><i>Discovery Education Inc. enhances districts and schools by increasing access to cutting-edge technology, facilitating high-quality professional development, and providing high-quality instructional materials.</i></p> <p><i>Please Note: If the extension is approved, we will assume full responsibility for covering the next ten months of services at their regular rate, reflecting a shift in funding for the contract. Previously, costs associated with this product were shared between the Nevada Department of Education (NDE) and Nevada Gold Mines, a joint venture between Barrick Gold Corporation and Newmont. Nevada Gold Mines had been covering half of the vendor's total charges under the contract. With Nevada Gold Mines no longer contributing, NDE will now incur the entire cost of the contract extension, resulting in a doubling of the expenses carried by NDE.</i></p> |  |  |

|   |  |  |  |
|---|--|--|--|
| 8 | <b>What are the potential consequences to the State if the contract extension request is denied?</b>   |  |  |
|   | <p><i>Districts and schools will lose access to both high-quality professional learning and standards aligned instructional resources and curriculum. Additionally students will lose access to summer experiences with Science, Technology, Engineering, and Mathematics (STEM) activities and interdisciplinary lessons.</i></p> |  |  |

|                             |       |
|-----------------------------|-------|
| <b>Purchasing Use Only:</b> |       |
| Approval #:                 | 570 @ |


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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



Signature of Agency Representative Initiating Request

Megan Peterson, Deputy Superintendent, Student Investment Division  
Print Name of Agency Representative Initiating Request

06/25/2024  
Date



Signature of Agency Head Authorizing Request

Jhone M. Ebert, Superintendent of Public Instruction  
Print Name of Agency Head Authorizing Request


6/30/24  
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: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**



Signed:



Administrator, Purchasing Division or Designee

7/26/24  
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: 23323

Amendment Number: 4

Agency Name: NDE - DEPARTMENT OF EDUCATION

Legal Entity Name: INSTRUCTURE, INC.

Agency Code: 300

Contractor Name: INSTRUCTURE, INC.

Appropriation Unit: 2673 - All Categories

Address: 6330 South 3000 East, Ste 700

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? 2021-2025

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 | 99.00 % | Fees          | 0.00 % |
| X | Federal Funds | 1.00 %  | 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 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2025

Contract term: 5 years

4. Type of contract: Contract

Contract description: Consulting Servcies

5. Purpose of contract:

This is the fourth 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 increases the maximum amount from \$8,603,384 to \$11,103,390 due to adding various subscriptions and portals.

| 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 |
|                       | a. Amendment 1:                          | \$2,000,000.00  | \$2,000,000.00 | \$2,000,000.00  | Yes - Action |
|                       | b. Amendment 2:                          | \$2,521,634.00  | \$2,521,634.00 | \$2,521,634.00  | Yes - Action |
|                       | c. Amendment 3:                          | \$0.00          | \$0.00         | \$0.00          | No           |
| 2.                    | Amount of current amendment (#4):        | \$2,500,006.00  | \$2,500,006.00 | \$2,500,006.00  | Yes - Action |
| 3.                    | New maximum contract amount:             | \$11,103,390.00 |                |                 |              |

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 the COVID-19 pandemic. He followed this with Emergency Directive 005 on March 20, 2020, in which he directed county school districts and charter schools to 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? 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 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:  
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   | bhowar6 | 09/11/2024 11:21:42 AM |
| Division Approval         | carnol1 | 09/11/2024 12:51:57 PM |
| Department Approval       | carnol1 | 09/11/2024 12:52:08 PM |
| Contract Manager Approval | khoy1   | 09/16/2024 10:27:30 AM |
| EITS Approval             | ljean   | 09/20/2024 11:56:52 AM |
| Budget Analyst Approval   | mranki1 | 09/23/2024 10:39:00 AM |
| BOE Agenda Approval       | mranki1 | 09/23/2024 10:41:34 AM |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
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Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Cindi Chang, Director, OTL, NDE  
Kaylene Hoyt, Management Analyst, NDE  
Sonali Bandyopadhyay, IT Professional IV, NDE  
Jayne Malorni, EPP, NDE

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – NDE – TIN 155 – *Canvas Learning Management*  
– Update D – BA 2673

**DATE:** August 23, 2024

We have completed our review for the Nevada Department of Education’s (NDE) – *Canvas Learning Management* – TIN 2673, Update D.

The submitted TIN, for an estimated value of \$4,933,289.66 in the FY24/FY25 biennium (100% Federal Grant funding), is to update cost information and for continuation of the statewide Canvas contract.

Canvas is a statewide Learning Management System (LMS) capable of delivering digital learning tools to all Nevada teachers and students. 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 impact on the State's technology infrastructure.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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

|                             |       |
|-----------------------------|-------|
| <b>Purchasing Use Only:</b> |       |
| Approval #:                 | 55502 |

**CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM**

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

|   |  |                     |                                |
|---|--|---------------------|--------------------------------|
| 1 | <b>Agency Contact Information:</b> Note: Approved copy will be sent to <u>only</u> to the contact(s) listed below: |                     |                                |
|   | <b>STATE AGENCY NAME REQUIRED:</b>   |                     | NDOE                           |
|   | <b>Contact Name and Title</b>  | <b>Phone Number</b> | <b>Email Address</b>           |
|   | Kaylene Hoyt, Management Analyst II,<br>Contracts Manager  | 775-687-9101        | <u>kaylene.hoyt@doe.nv.gov</u> |
|   |  |                     |                                |

|   |   |  |
|---|---|--|
| 2 | <b>Contractor Information:</b>                |  |
|   | Contractor Name:                              | Instructure  |
|   | Contact Name:                                 | Eric Spenser   |
|   | Complete Address:<br>City, State and Zip Code | 6330 S. 3000 E. STE 700,<br>Salt Lake City, UT 84121 |
|   | Phone Number:                                 | 949-909-0002   |
|   | Email Address:                                | espencer@instructure.com                             |

|   |   |                |   |           |               |
|---|---|----------------|---|-----------|---------------|
| 3 | <b>List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):</b> |                |   |           |               |
|   | Solicitation Type, if applicable:   |                | Emergency Purchase Email/Solicitation<br>Wavier | #:        |               |
|   | Enter CETS Number:  | # 23323        |   |           |               |
|   | Contract Amount:  | \$4,081,750.00 |   |           |               |
|   | Contract Term:  | Start Date:    | July 1, 2020                                    | End Date: | June 30, 2022 |

Rec'd 04/24/24 // auto ✓

|                             |      |
|-----------------------------|------|
| <b>Purchasing Use Only:</b> |      |
| Approval #:                 | 555② |

|   |                                      |  |   |              |           |
|---|--------------------------------------|--|---|--------------|-----------|
| 4 | <b>Current Contract Information:</b> |  |   |              |           |
|   | Solicitation Type, if applicable:    |  | <i>Emergency Purchase Email/Solicitation Wavier</i> |              | #:        |
|   | Enter CETS Number:                   |  | #23323  |              |           |
|   | Initial Contract Amount:             |  | \$4,081,750.00                                      |              |           |
|   | Contract Term:                       |  | Start Date:   | July 1, 2020 | End Date: |

|   |  |   |   |                           |
|---|--|---|---|---------------------------|
| 5 | <b>Amendment Information – List <u>all previously</u> approved amendments:</b> |   |   |                           |
|   | <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  | Time Extension and Authority Increase                 | Added \$2,000,000.00<br>Do Not Exceed<br>\$6,081,750.00 | September 30, 2023        |
|   | 2  | Time Extension and Authority Increase                 | Added \$2,521,634.00<br>Do Not Exceed<br>\$8,603,384.00 | June 30, 2024             |
|   |  |   |   |                           |

|   |   |   |   |                           |
|---|---|---|---|---------------------------|
| 6 | <b><u>Proposed</u> Amendment Information:</b> |   |   |                           |
|   | <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> |
|   | 3   | Time Extension  | No cost                                 | June 30, 2025             |

|   |   |  |
|---|---|--|
| 7 | <b>What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?</b>                                  |  |
|   | <i>This requested no cost time extension is needed to ensure a final plan for funding is in place once this contract utilizing ARP-ESSER funding has expired.</i> |  |

|   |   |  |
|---|---|--|
| 8 | <b>What are the potential consequences to the State if the contract extension request is denied?</b>  |  |
|   | <i>If this contract extension request is denied our current contract will expire and the entire 17 school districts and State Public Charter School Authority charter schools who utilize this resource to provide professional learning and access to curriculum and course resources that educators are using in their classrooms, will no longer be accessible. This will cause hardship for our district educators, administrators, and students.</i> |  |

|                             |         |
|-----------------------------|---------|
| <b>Purchasing Use Only:</b> |         |
| Approval #:                 | 555 (6) |

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

*Cindi L. Chang*

Signature of Agency Representative Initiating Request

Cindi Chang

Print Name of Agency Representative Initiating Request

4/16/2024

Date

*Megan Peterson*

Signature of Agency Head Authorizing Request

Megan Peterson, Deputy Superintendent, Student Investment Division

Print Name of Agency Head Authorizing Request

04/22/24

Date

*Jhone M. Ebert*

Signature of Agency Head Authorizing Request

Jhone M. Ebert, Superintendent of Public Instruction

Print Name of Agency Head Authorizing Request

4/23/24

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: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**

#555@  
page 4 of 4@

Signed:



\_\_\_\_\_  
Administrator, Purchasing Division or Designee

5/6/24

\_\_\_\_\_  
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: 27743

Amendment Number: 1

Agency Name: NDE - DEPARTMENT OF EDUCATION

Legal Entity Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO

Agency Code: 300

Contractor Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO

Appropriation Unit: 2709-64

Address: UNR CONTROLLERS OFFICE MAIL STOP 0124

Is budget authority available?: Yes

City/State/Zip: RENO, NV 89557-0124

If "No" please explain: Not Applicable

Contact/Phone: Teresa Byington Ph.D. 702-222-3130

Vendor No.: D35000816

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2024-2026

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 07/11/2023

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/30/2025

Contract term: 2 years and 173 days

4. Type of contract: Interlocal Agreement

Contract description: Workforce Developmet

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides services to expand the Spiral Up Program, Child Development Associate Program, and the Nevada Ready Pre-K Professional Development program to increase the early childhood educators statewide. This amendment increases the maximum amount from \$1,930,000 to \$2,180,000 due to the addition of professional learning sessions and translation of trainings and materials into Spanish and other languages.

| 6. CONTRACT AMENDMENT |  | Trans \$       | Info Accum \$  | Action Accum \$ | Agenda       |
|-----------------------|--|----------------|----------------|-----------------|--------------|
| 1.                    | The max amount of the original contract: | \$1,930,000.00 | \$1,930,000.00 | \$1,930,000.00  | Yes - Action |
| 2.                    | Amount of current amendment (#1):        | \$250,000.00   | \$250,000.00   | \$250,000.00    | Yes - Action |
| 3.                    | New maximum contract amount:             | \$2,180,000.00 |                |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Federal Preschool Development Grant Birth -5 (PDG B-5) Renewal grant Activity 4 requires grantees to support the early childhood workforce in aim to stabilize the sector. Goal 2 of the PDG B-5 supports the justification of this project: The ECCE workforce feels valued in their profession, is supported by the system, and chooses to enter and stay in the field as a career. This work connects directly with the NOE STIP and the Nevada Early Childhood Advisory Council's Strategic Plan and will inform efforts to increase positive outcomes for children ages 0-8. Furthermore, this project will provide grant implementation activities with the essential data to ensure the work is meaningful and impactful.

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

State workers do not have the time or expertise to complete this training for prospective teachers.

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 - Interlocal agreement

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 contract with Department of education. 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:  
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   | bhowar6 | 10/02/2024 09:34:43 AM |
| Division Approval         | psmorr1 | 10/02/2024 12:07:54 PM |
| Department Approval       | carnol1 | 10/02/2024 12:11:53 PM |
| Contract Manager Approval | khoy1   | 10/04/2024 07:45:04 AM |

Budget Analyst Approval  
BOE Agenda Approval

vfajota  
mranki1

10/07/2024 11:53:05 AM  
10/09/2024 08:58:26 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: 29821

Agency Name: NDE - DEPARTMENT OF EDUCATION

Agency Code: 300

Appropriation Unit: 2709-64

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Regents of University of Colorado, Denver

Contractor Name: Regents of University of Colorado, Denver

Address: 1380 Lawrence Street

City/State/Zip: Denver , CO 80204

Contact/Phone: Kristie Kauerz not provided

Vendor No.: PUR0005377

NV Business ID: Governmental entity

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/30/2025

Contract term: 1 year and 59 days

4. Type of contract: Interlocal Agreement

Contract description: Leadership Cert

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing collaborative efforts to build administrator and leadership capacity through the National Preschool Through Third Grade Leadership Certificate Program.

6. NEW CONTRACT

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

Other basis for payment: As invoiced by the vendor and accepted by the state

II. JUSTIFICATION

7. What conditions require that this work be done?

This interlocal agreement will continue the Department of Educations collaborative efforts to build an leadership capacity through the preschool to third grade leadership certificate program hosted by the University of Colorado Denver.

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 have capacity to facilitate 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?



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

26%

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

**No**

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

**No**

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

**No** If "Yes", please explain

Not Applicable

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

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

Yes vendor has engaged in business with the Department of Education. The 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 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   | bhowar6 | 09/30/2024 16:03:48 PM |
| Division Approval         | carnol1 | 09/30/2024 16:29:56 PM |
| Department Approval       | carnol1 | 09/30/2024 16:29:59 PM |
| Contract Manager Approval | khoy1   | 10/08/2024 15:12:03 PM |
| Budget Analyst Approval   | vfajota | 10/09/2024 21:24:32 PM |
| BOE Agenda Approval       | mranki1 | 10/10/2024 13:23:17 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 CONTRACT

1. Contract Number: 29790

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY

Agency Code: 403

Appropriation Unit: 3158-60

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: SELLERS DORSEY & ASSOCIATES, LLC

Contractor Name: SELLERS DORSEY & ASSOCIATES, LLC

Address: 1635 Market St., Ste. 301

City/State/Zip: Philadelphia, PA 19103

Contact/Phone: Julie Cannariato 212-564-3014

Vendor No.: T32015552

NV Business ID: NV20151582004

To what State Fiscal Year(s) will the contract be charged? 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 Funds0.00 %

Fees0.00 %

X Federal Funds50.00 %

Bonds0.00 %

Highway Funds0.00 %

X Other funding50.00 % Opioid Funds

Agency Reference #: RFQ 99SWC-S2340 (RV)

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 241 days

4. Type of contract: Other (include description): Statewide Service Agreement

Contract description: HCBS

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17894 which provides consulting, marketing, and education services. This service agreement provides an assessment of Nevada Medicaid Home and Community-Based Service programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$399,893.40

II. JUSTIFICATION

7. What conditions require that this work be done?

Multiple contracts awarded in conjunction with RFQ, as determined in the best interests of the State for Statewide use, to provide Marketing, Conference Planning, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis, and Report Development on an as needed basis, in accordance with a service agreement.

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 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?

Multiple vendors chosen under Statewide RFQ 99SWC-S2340 Consulting, Marketing, and Education Services

d. Last bid date: 04/17/2023 Anticipated re-bid date: 04/01/2027

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 as of 8/24/24 - 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   | aroma2    | 09/18/2024 09:27:46 AM |
| Division Approval         | aprasa1   | 09/19/2024 10:53:50 AM |
| Department Approval       | sruyballi | 09/25/2024 16:39:22 PM |
| Contract Manager Approval | ltuttl1   | 09/26/2024 07:03:24 AM |
| Budget Analyst Approval   | nrezaie   | 10/14/2024 15:43:22 PM |
| BOE Agenda Approval       | nrezaie   | 10/14/2024 18:13:24 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 CONTRACT**1. Contract Number: **29846**

|   |   |
|---|---|
| Agency Name: <b>DHHS - HEALTH CARE FINANCING &amp; POLICY</b> | Legal Entity Name: Strategic Progress, LLC      |
| Agency Code: <b>403</b>                                       | Contractor Name: <b>Strategic Progress, LLC</b> |
| Appropriation Unit: <b>3158-54</b>                            | Address: <b>1697 Crescent Pointe Court</b>      |
| Is budget authority available?: <b>Yes</b>                    | City/State/Zip: <b>Reno, NV 89523</b>           |
| If "No" please explain: Not Applicable                        | Contact/Phone: Cyndy Gustafson 702-241-8033     |
|   | Vendor No.: T27029824A                          |
|   | NV Business ID: NV20051774907                   |

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: RFQ 99SWC-S2340 (RV)

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **08/31/2025**Contract term: **303 days**4. Type of contract: **Other (include description): Statewide Service Agreement**Contract description: **CDC Dental Program**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV23-17901 which provides consulting, marketing, and education services. This service agreement provides statewide data analysis, report development, and a communications strategy to build a data-driven, decision-making infrastructure in order to identify gaps and needs in the most at-risk areas for oral health.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$143,469.00**

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

**II. JUSTIFICATION**

7. What conditions require that this work be done?

Multiple contracts awarded in conjunction with RFQ, as determined in the best interests of the State for Statewide use, to provide Marketing, Conference Planning, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis, and Report Development on an as needed basis, in accordance with a service agreement.

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 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?

Multiple vendors chosen under Statewide RFQ 99SWC-S2340 Consulting, Marketing, and Education Services

d. Last bid date: 04/17/2023 Anticipated re-bid date: 04/01/2027

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 contracts with DHCFP since 2020 - 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:

Jannette Gomez, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level            | User    | Signature Date         |
|---------------------------|---------|------------------------|
| Budget Account Approval   | aroma2  | 10/02/2024 16:15:28 PM |
| Division Approval         | aprasa1 | 10/03/2024 10:35:28 AM |
| Department Approval       | sruybal | 10/07/2024 10:52:10 AM |
| Contract Manager Approval | ltuttl1 | 10/07/2024 11:16:31 AM |
| Budget Analyst Approval   | nrezaie | 10/10/2024 10:53:20 AM |
| BOE Agenda Approval       | nrezaie | 10/10/2024 10:53:26 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: **29740**

|                                 |  |                    |                                       |
|---------------------------------|--|--------------------|---------------------------------------|
| Agency Name:                    | <b>DHHS - PUBLIC AND BEHAVIORAL HEALTH</b> | Legal Entity Name: | Carelon Behavioral Health, Inc        |
| Agency Code:                    | <b>406</b>                                 | Contractor Name:   | <b>Carelon Behavioral Health, Inc</b> |
| Appropriation Unit:             | <b>3165-23</b>                             | Address:           | <b>200 State Street, Suite 302</b>    |
| Is budget authority available?: | <b>Yes</b>                                 | City/State/Zip     | <b>Boston, MA 02109</b>               |
| If "No" please explain:         | Not Applicable                             | Contact/Phone:     | Aaron Henry 617-981-1608              |
|                                 |  | Vendor No.:        | T32014022                             |
|                                 |  | NV Business ID:    | NV19991249801                         |

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|                        |                |          |               |                        |
|------------------------|----------------|----------|---------------|------------------------|
| General Funds          | 0.00 %         | <b>X</b> | Fees          | <b>60.40 % Telecom</b> |
| <b>X</b> Federal Funds | <b>39.60 %</b> |          | Bonds         | 0.00 %                 |
| Highway Funds          | 0.00 %         |          | Other funding | 0.00 %                 |

Agency Reference #: 40DHHS-S2716

2. Contract start date:

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

Anticipated BOE meeting date 10/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/31/2028**Contract term: **4 years and 31 days**4. Type of contract: **Contract**Contract description: **Crisis Care Hub**

5. Purpose of contract:

**This is a new contract to provide a centralized Nevada 988 suicide and crisis lifeline call center.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,729,552.00**

Other basis for payment: AS invoiced by the Contractor and approved by the State. See fiscal year breakdown.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

988 is a new and emerging nation wide program. 988 and the implementation of an effective Crisis Response System will alleviate the burden placed on Law enforcement when responding to behavioral health crisis's. As well as alleviate the burden on emergency departments to serve person(s) in need of behavioral health help for there crisis not emergency medical treatment.

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

988 is part of a larger Crisis response System, to have an effective system put in place this requires more support and involvement to implement.

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 #40DHHS-S2716, 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: 02/22/2024 Anticipated re-bid date: 02/22/2028

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?

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

10%

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

**No**

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

**No**

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

**No** If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is 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   | dcastro  | 10/08/2024 15:38:22 PM |
| Division Approval         | dcastro  | 10/08/2024 15:38:24 PM |
| Department Approval       | dcastro  | 10/08/2024 15:38:26 PM |
| Contract Manager Approval | dcastro  | 10/08/2024 15:47:04 PM |
| EITS Approval             | tgalluzi | 10/11/2024 15:51:23 PM |
| Budget Analyst Approval   | cdavis   | 10/14/2024 08:28:18 AM |
| BOE Agenda Approval       | nrezaie  | 10/14/2024 14:35:19 PM |
| BOE Final Approval        | Pending  |                        |



**STATE OF NEVADA  
GOVERNOR'S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Shannon Bennett, Bureau Chief, DPBH, DHHS  
Huy Trinh, Chief IT Manager, DPBH, DHHS  
Rachel Isherwood, Health Program Manager II, DPBH, DHHS  
Michele Silzell, Management Analyst IV, DPBH, DHHS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DPBH – TIN 602 – *Nevada's Behavioral Health Crisis Care Hub (NBHCCH)* – Update C – BA 3165

**DATE:** October 9, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health's (DPBH) – *Nevada's Behavioral Health Crisis Care Hub (NBHCCH)* – TIN 602, update C.

The submitted TIN, for an estimated value of \$9,890,632.00 in the FY24/FY25 biennium, \$26,223,770.00 in the FY26/FY27 biennium, and \$13,615,150.00 for FY28 (100% State Fees), is to update cost for FY25 through FY28.

In accordance with the National Suicide Hotline Designation Act of 2020, the state is preparing to release an RFP for the implementation of the 988 system, a pivotal enhancement to the existing lifeline overseen by the U.S. Department of Health and Human Services and Vibrant Emotional Health. This project, titled



the 988 Nevada's Behavioral Crisis Care Hub (NBHCCH), aspires to select a proficient Administrative Services Organization vendor through the established state procurement procedure.

The appointed vendor will be tasked with the essential duty of founding and governing a centralized call center or centers that are accredited by the National Suicide Prevention Lifeline, rebranded as the 988 Suicide & Crisis Lifeline. Operating under statute NRS 433.702, the envisaged NV 988 call center infrastructure should represent standards outlined by both the Substance Abuse and Mental Health Services Administration (SAMHSA) and Vibrant Emotional Health, guaranteeing a trustworthy conduit of communication for individuals grappling with mental health crises at all hours, every day of the year, via various mediums including calls, texts, and chats.

The selected vendor should be prepared to provide the physical and technical infrastructure along with adept personnel management; an affiliation with the 988 national network via application to Vibrant Emotional Health; and the assimilation of a technological foundation encompassing cloud-hosted telephony infrastructure and state-of-the-art case management software. Furthermore, the vendor should be adept at generating both custom and standard reports facilitated by real-time dashboards and introduce GPS-enabled technology to coordinate mobile crisis teams effectively.

The endeavor positions itself as a conduit to bolster crisis response capabilities, connecting stakeholders including governmental bodies and law enforcement, thereby presenting an evolved, efficient, and encompassing Crisis Response System Program aligned with SAMHSA's national guidelines. While acknowledging the strides made through collaboration with the current vendor, the division is proactive in identifying and bridging existing gaps to improve service provisions and assuring adherence to SAMHSA's Key Performance Indicators.

The investment inherently embodies a moderate security risk, chiefly due to the handling of personal identification information within the system. In light of this, a comprehensive revision and potential overhaul of the existing security architecture is expected that will align with federal and other pertinent security stipulations. This cloud-hosted solution will include pre- and post-implementation security assessments by the DPBH OIT ISO. There is no expected impact on state infrastructure.

The final implementation of this initiative will include systems interfacing within a framework that follows federal security mandates and a commitment to advancing mental health crisis response mechanisms. This investment demonstrates the state's commitment to championing the welfare of its citizens through proactive and empathetic engagement.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: 29385

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH  
Agency Code: 406  
Appropriation Unit: 3168-26  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: Redsail Technologies, LLC  
Contractor Name: REDSAIL TECHNOLOGIES, LLC  
Address: 201 W ST JOHN ST  
City/State/Zip: SPARTANBURG, SC 29306  
Contact/Phone: Ashley Ray 803 957-1181  
Vendor No.: T29045239  
NV Business ID: NV20191559363

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 #: 18409

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2026

Contract term: 1 year and 241 days

4. Type of contract: Contract

Contract description: Outpatient Pharm App

5. Purpose of contract:

This is a new contract to provide ongoing pharmacy management software and hardware maintenance services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$116,463.00

Payment for services will be made at the rate of \$58,231.50 per Year

Other basis for payment: Upon receipt of invoice and approval of services.

II. JUSTIFICATION

7. What conditions require that this work be done?

Redsail will continue to host three pharmacy locations in their environment which includes pharmacy management software maintenance, hardware maintenance, export software maintenance, and SureScripts.

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

The pharmacy management system is proprietary and is wholly owned and maintained by the vendor. The Division of Public and Behavioral Health does not have the resources to reproduce a solution in-house.

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 #: 240705**

**Approval Date: 07/05/2024**

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

Proprietary software.

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:

Contract Entry and Tracking System contract numbers 26201 and 19548 for contracted services within the division 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

**Foreign LLC**

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

**No** b. If "No", please explain:

**punctuation**

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

Yes

18. 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   | ijanssen | 08/26/2024 09:26:43 AM |
| Division Approval         | ijanssen | 08/26/2024 09:40:57 AM |
| Department Approval       | ijanssen | 09/04/2024 14:26:04 PM |
| Contract Manager Approval | ijanssen | 09/04/2024 17:13:48 PM |
| EITS Approval             | ljea     | 09/13/2024 08:39:17 AM |
| Budget Analyst Approval   | cdavis   | 10/08/2024 15:24:45 PM |
| BOE Agenda Approval       | nrezaie  | 10/11/2024 08:08:22 AM |
| BOE Final Approval        | Pending  |                        |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Susan Lynch, SNAMHS Administrator, DPBH, DHHS  
John Borrowman, Fiscal Manager, DPBH, DHHS  
Lorraine McMullen, OIT ITP III Project Manager, DPBH, DHHS  
Nadine Ow, OIT ITP III, DPBH, DHHS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DPBH – TIN 288 – *DPBH Redsail, LLC NRx Outpatient Pharmacy System* – Update D – BA 3168

**DATE:** March 28, 2024

We have completed an updated review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health’s (DPBH) – *DPBH Redsail, LLC NRx Outpatient Pharmacy System* – TIN 288, Update D.

The submitted TIN, for an estimated value of \$103,231.50 in the FY24/FY25 biennium and \$58,231.50 in the FY26/FY27 biennium (100% General Fund), is to update cost information for ongoing contracted services through 6/30/2026.

The agency is working directly with Redsail, LLC NRx outpatient pharmacy system because the Netsmart PaaS no longer offers any such services and cannot replicate Redsail, LLC’s NRx solution.

The QS1 SharpRX outpatient pharmacy system retired on 3/31/2022 and a replacement has been implemented. PioneerRX LLC, who purchased QS1, has replaced SharpRX with PioneerRX.

This application is transaction-based and interfaces with SureScripts Health Information Alliance network for ePrescriptions and myAvatar EHR OrderConnect and Electronic Medication Administration Record (EMAR) hosted within the Netsmart PaaS. Information between NRx and OrderConnect communicates through the SureScripts interface.

The security impact of the investment has been carefully considered and the agency considers the investment and final implementation to have an ongoing moderate security risk. The DPBH 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 OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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**  
**Purchasing Division**

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

**Purchasing Use Only:**

**Approval#:** 2205050@

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|  |   |  |                           |
|--|---|--|---------------------------|
| <b>Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:</b> |   |  |                           |
| <b>ENTER STATE AGENCY NAME HERE:</b>   |   | Division of Public and Behavioral Health |                           |
| <b>1a</b>  | <b>Contact Name and Title</b>               | <b>Phone Number</b>                      | <b>Email Address</b>      |
|  | Erin Williams, DPBH OIT ITM III             | (775) 684-4213                           | williams@health.nv.gov    |
|  | Lorraine McMullen, DPBH IT Professional III | (775) 687-7569                           | lmmcmullen@health.nv.gov  |
|  | Ronda Miller, DPBH MA III                   | (775) 684-5932                           | rondamiller@health.nv.gov |

|                            |   |
|----------------------------|---|
| <b>Vendor Information:</b> |   |
| Vendor Name:               | Redsail Technologies, LLC                             |
| Contact Name:              | Brian Taylor  |
| <b>1b</b>                  | <b>Complete Address:</b>                              |
|                            | 201 West Saint John St.                               |
|                            | Spartanburg, SC 29306                                 |
|                            | Telephone Number: 803-957-1181                        |
|                            | Email Address: Brian.R.Taylor@redsailtechnologies.com |

|   |  |
|---|--|
| <b>Type of Waiver Requested – Check the appropriate type:</b> |  |
| <b>1c</b>   | Sole or Single Source: <input checked="" type="checkbox"/> X |
|   | Professional Service Exemption: <input type="checkbox"/>     |

|                              |                                    |      |                                       |                              |
|------------------------------|------------------------------------|------|---------------------------------------|------------------------------|
| <b>Contract Information:</b> |                                    |      |                                       |                              |
| <b>1d</b>                    | Is this a new Contract? Check One: | Yes: | <input checked="" type="checkbox"/> X | No: <input type="checkbox"/> |
|                              | If 'No' Enter Amendment Number:    | #    |                                       |                              |
|                              | Enter CETS Number:                 | #    |                                       |                              |

|              |                                   |             |                          |   |
|--------------|-----------------------------------|-------------|--------------------------|---|
| <b>Term:</b> |                                   |             |                          |   |
| <b>1e</b>    | One (1) Time Purchase? Check One: | Yes:        | <input type="checkbox"/> | No: <input checked="" type="checkbox"/> X |
|              | Contract:                         | Start Date: | 5/15/22                  | End Date: 6/30/25                         |

|                 |                                |
|-----------------|--------------------------------|
| <b>Funding:</b> |                                |
| <b>1f</b>       | State Appropriated: 3168 GFUND |
|                 | Federal Funds:                 |
|                 | Grant Funds:                   |

Rec'd 05/02/22 11:53 AM

|                  |  |
|------------------|--|
| Other (Explain): |  |
|------------------|--|

**Purchasing Use Only:**

Approval #:

220505 @

|    |  |
|----|--|
| 1g | <b>Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:</b> |
|    | \$97,790.00  |

|   |  |
|---|--|
| 2 | <b>Provide a description of work/services to be performed or commodity/good to be purchased:</b>   |
|   | <ol style="list-style-type: none"> <li>1) Replacement of the NNAMHS/SNAMHS Outpatient Pharmacy application, SharpRX, with Redsail Technologies, LLC NRx Pharmacy Software for three DPBH outpatient pharmacy locations:<br/>         Northern Nevada Adult Mental Health Services (Dini Townsend)<br/>         480 Galletti Way, Sparks, NV, 89431-5544<br/>         Southern Nevada Adult Mental Health Services (Rawson-Neal)<br/>         1650 Community College Dr., Las Vegas, NV 89146<br/>         Southern Nevada Adult Mental Health Services (West Charleston)<br/>         6161 W. Charleston Blvd., Bldg. 2, Las Vegas, NV 89146</li> <li>2) Redsail Technologies, LLC will provide:             <ul style="list-style-type: none"> <li>• QS1 Cloud Hosting Network configuration and Integration with DPBH and SureScript</li> <li>• QS/1 to migrate DPBH SNAMHS/NNAMHS current SharpRX system data to NRx for 3 locations</li> <li>• Configure Outpatient Pharmacies existing POS, Workstations, Printers and Scanners</li> <li>• Associated Interface Configuration Testing SureScript</li> <li>• Application Training and User Acceptance Testing (UAT)</li> </ul> </li> <li>3) Two Ingenico 8000 Point of Sale Signature Pads - Using Signature Station (1) Rawson Neal and (1) W. Charleston</li> <li>4) Redsail Technologies, LLC Hosting, Licensing, Maintenance and Support:             <ul style="list-style-type: none"> <li>• Monthly QS1 Hosting and Maintenance</li> <li>• Software Support and Updates</li> <li>• Architext Update Service</li> <li>• Clinical Update Service</li> <li>• Drug Images and Update Service</li> <li>• Price (AWP) Update Service</li> <li>• Point of Sale support, Integrated pre/post edits</li> <li>• DEA Updates and NPI Database Updates.</li> </ul> </li> <li>5) Hosted Monthly Charges:             <ul style="list-style-type: none"> <li>• QS1 Cloud Hosting and Maintenance for 3 locations</li> <li>• Software Support and Service Updates</li> </ul> </li> </ol> |

|   |  |
|---|--|
| 3 | <b>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</b> |
|---|--|

QS1/SharpRX is the current application solution for the NNAMHS Dini Townsend and SNAMHS Rawson Neal and West Charleston Outpatient Pharmacy locations. The SharpRX application, interfaces and data is hosted within the Netsmart PaaS. SharpRX interfaces with SureScript for provider rules, and OrderConnect as part of the Electronic Medication Administration Record (EMAR) for myAvatar outpatient medication orders. DPBH was informed by fax sent to the outpatient pharmacies in May of 2021 that Redsail Technologies, LLC has purchased the QS1/SharpRX company and will retire SharpRX, on 12/31/21. Redsail Technologies, LLC has since extended that sunset date to 4/30/2022.

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

Redsail Technologies, LLC has offered NRx as a replacement for SharpRX. NRx offers QS1 cloud hosting and have replaced SharpRX with their NRx solution. This system will integrate seamlessly and securely with the existing Electronic Health Records (HER) system through existing HL7 interface with SureScript. The Outpatient business use case, user functionality and front-end presentation resemble SharpRX and have been approved by program stakeholders. This solution will continue to integrate with our EHR.

| Were alternative services or commodities evaluated? |  | Check One: |    |
|---|--|------------|----|
|   |  | Yes        | No |
|   |  |            | X  |
| a.  | <i><b>If yes</b>, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.</i>   |            |    |
|   |  |            |    |
| b.  | <i><b>If not</b>, why were alternatives not evaluated?</i>   |            |    |
| 5   | <p>Netsmart is unwilling to participate with DPBH in replacing SharpRX due to DPBH being Netsmart's sole client using this Outpatient Pharmacy application. Netsmart informed DPBH that they do not have plans now, or in the future for offering an Outpatient Pharmacy solution to their clients. The timeframe for RFP solicitation, award, contracting and implementation would exceed the retirement date of 12/31/21 for SharpRX by 6 months or more. Pharmacy workflow processes that involve SharpRX at DPBH Outpatient Pharmacies will become manual until a replacement has gone live in production. A replacement system must interface with the current myAvatar OrderConnect and EMAR systems which would increase costs. Finally, this vendor offers system implementation at no cost, saving DPBH approximately \$43,296.00 in the first year of implementation. DPBH will negotiate a reduction to the cost from the current Netsmart contract (C16383/CETS 19548) to remove all costs related to SharpRX hosting, licensing, maintenance, and support from the date of NRx go live through 6/30/2022. Comparing services between vendors show that moving to NRx will not increase the cost of this component for ongoing services for the Pharmacy Information System.</p> |            |    |



Purchasing Use Only:

Approval #:

2205050

|  |            |          |                |   |   |    |
|--|------------|----------|----------------|---|---|----|
| 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 <b><u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u></b>  |            |          |                |   | X   |    |
| a. If yes, starting with the most recent contract and working backward, for the <b><u>entire</u></b> relationship with this vendor, or any other vendor for this service or commodity, the following information <b><u>must</u></b> be provided: |            |          |                |   |   |    |
| 6  | Term       |          | Value          | Short Description                               | Type of Procurement<br>ENTER RFP#, RFQ#, Waiver # |    |
|  | Start Date | End Date |                |   |   |    |
|  | 4/10/18    | 6/30/22  | \$2,753,513.34 | Medication Management<br>-Outpatient Pharmacies | Waiver #170703<br>(Internal C16383)               |    |
|  |            |          | \$             |   |   |    |
|  |            |          | \$             |   |   |    |
|  |            |          | \$             |   |   |    |

|   |  |   |
|---|--|---|
| 7 |  | <p><b>What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?</b></p> <p>Pharmacy workflow processes that require SharpRX will become manual until a replacement system is fully implemented into production. myAvatar OrderConnect and EMAR would no longer send and receive data. A replacement system must interface with the current myAvatar OrderConnect and EMAR systems through Surescripts. Netsmart has informed us they do not have an Outpatient Pharmacy system that interfaces with Netsmart myAvatar OrderConnect. The timeframe for RFP solicitation, award, contracting and implementation would exceed the extended retirement date of 4/30/2022 for SharpRX by 8 months or more. This system is paid for with General Funds and a request was not made for the cost of replacing our outpatient pharmacy system in FY22. The cost for Netsmart to Host, License, Support and Maintain the SharpRX system within their PaaS will be reduced from the total contract authority for Netsmart contract (C16383/CETS 19548) upon the date that outpatient pharmacies go live with NRx and through the termination date of 6/30/2022. Comparing services between vendors show that moving to NRx will not increase the cost of this component for ongoing services for the Pharmacy Information System.</p> |
|---|--|---|

|   |  |  |
|---|--|--|
| 8 |  | <p><b>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?</b></p> <p>Multiple meetings have taken place between DPBH and PioneerRX, Netsmart Technologies and DPBH OIT on the replacement of SharpRx. PioneerRx could not agree to signing our state contract. Redsail Technologies, LLC has replaced that vendor using the NRx solution. Netsmart cannot offer a solution. Netsmart will reduce the cost from the current Netsmart contract (C16383/CETS 19548) for all costs associated with Hosting, Licensing, Support and Maintenance of SharpRX which will offset some of the costs associated with ongoing services contracted directly with Redsail Technologies, LLC to implement NRx for FY22 and continue to serve our three outpatient pharmacy locations through 6/30/2025. These are the terms the vendor requires for waiving implementation costs.</p> |
|---|--|--|

Purchasing Use Only:

Approval #:

2205050

|  |   |     |    |
|--|---|-----|----|
| 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. |   |     |    |

Purchasing Use Only:

Approval #:

220505 @

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

Ronda Miller

Print Name of Agency Representative Initiating Request

4-28-22

Date



Signature of Agency Head Authorizing Request

Kelli Quintero

Print Name of Agency Head Authorizing Request

5/2/2022

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:** TIN Approval Update must be entered as an attachment  
Name of agency or entity who provided information or review:  
IN CETS \* TIN 288

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

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: **29612**

|                                 |  |                    |                                   |
|---------------------------------|--|--------------------|-----------------------------------|
| Agency Name:                    | <b>DHHS - PUBLIC AND BEHAVIORAL HEALTH</b> | Legal Entity Name: | <b>SOCIAL ENTREPRENEURS, INC.</b> |
| Agency Code:                    | <b>406</b>                                 | Contractor Name:   | <b>SOCIAL ENTREPRENEURS, INC.</b> |
| Appropriation Unit:             | <b>3170-28</b>                             | Address:           | <b>6548 S MCCARRAN BLVD STE B</b> |
| Is budget authority available?: | <b>Yes</b>                                 | City/State/Zip     | <b>RENO, NV 89509-6150</b>        |
| If "No" please explain:         | Not Applicable                             | Contact/Phone:     | <b>775/324-4567</b>               |
|                                 |  | Vendor No.:        | <b>T27004599</b>                  |
|                                 |  | NV Business ID:    | <b>NV19961250456</b>              |

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: **C18433**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2024**Anticipated BOE meeting date **11/2024**Retroactive? **Yes**

If "Yes", please explain

**The Division of Public and Behavioral Health did not submit the contract within the review period and missed the original September deadline.**3. Termination Date: **09/30/2025**Contract term: **364 days**4. Type of contract: **Contract**Contract description: **Consulting Services**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides consulting services to support the planning and implementation of program objectives in fulfillment of Substance Use Response Working Group legislative requirements pursuant to Assembly Bill 374 of the 2023 Legislative Session.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$209,609.80**

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

**II. JUSTIFICATION**

7. What conditions require that this work be done?

During the 81st Legislative Session (2021), the Legislature passed Assembly Bill 374 which was subsequently approved by the Governor. The legislation established the Statewide Substance Use Response Working Group (SURG) within the Office of the Attorney General. The objective of the vendor is to ensure effective implementation and support for the working group to meet the legislative requirements as outlined in Assembly Bill 374.

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

Lack of expertise and program staffing

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?

In accordance with Nevada Revised Statutes 333, statewide contract 99SWC-NV23-17884 was established with Social Entrepreneurs, Inc. The 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:

Social Entrepreneurs, Inc., statewide contract 99SWC-NV23-17884. Services for the division in the past have been satisfactory.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | msilzell | 08/24/2024 15:48:11 PM |
| Division Approval         | msilzell | 08/24/2024 15:48:14 PM |
| Department Approval       | ijanssen | 08/28/2024 14:23:19 PM |
| Contract Manager Approval | ijanssen | 09/09/2024 14:09:20 PM |
| Budget Analyst Approval   | cdavis   | 10/04/2024 10:37:42 AM |
| BOE Agenda Approval       | nrezaie  | 10/07/2024 06:20:47 AM |
| BOE Final Approval        | Pending  |                        |

Joe Lombardo  
Governor

Richard Whitley,  
MS  
Director



**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**

**NEVADA DIVISION of PUBLIC  
and BEHAVIORAL HEALTH**



Cody Phinney,  
MPH  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical  
Officer

## MEMORANDUM

**DATE:** August 7, 2024

**TO:** John Borrowman, ASO IV

**THROUGH:** Shannon Bennett, Bureau Chief

Stephanie Cook, Deputy Bureau Chief

Jennifer Tongol, Health Program Manager I

**FROM:** Chyna Parker, Health Program Specialist II

**RE:** REQUEST FOR RETROACTIVE APPROVAL: Social Entrepreneurs, Inc. SA 18433

This memorandum requests that the following Service Agreement to be approved for a retroactive start.

The following information is required:

- Name of Provider: Social Entrepreneurs, Inc.
- Services to be provided: To provide administrative support by planning, coordinating, and facilitating the Substance Use
- Response Working Group (SURG) meetings.
- Funding source and expenditure category: BA# 3170 – CAT 28; SABG
- Requested start date of work: October 01, 2024
- Expected execution date of agreement: October 08, 2024
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - Reason(s) why the agreement was not submitted timely:
    - There was a delay in budget approval due to the fiscal team needing to create there FFY 25 budgets and all necessary changes needed, this then led to a delay in submission to the contract's unit.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:
    - The SEI SURG committee will have to cancel and or reschedule their subcommittee meetings since they will not have the funding to pay staff and for licensures needed to conduct the meetings.
  - Explain how the program/bureau will prevent future retroactive requests:
    - The program and fiscal staff will work diligently to ensure that all contracts and service agreements are submitted a minimum of 90 days prior to execution to ensure enough time for contract reviewal.

If you have any questions, please contact Chyna Parker at (775) 461-6533 or [c.parker@health.nv.gov](mailto:c.parker@health.nv.gov)

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**1. Contract Number: **24393**Amendment Number: **8**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: **980 9th Street, STE 1800**Is budget authority available?: **Yes**City/State/Zip: **Sacramento, CA 95814**

If "No" please explain: Not Applicable

Contact/Phone: **916/288-3100**Vendor No.: **T27024237A**NV Business ID: **NV20081436471**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.

|          |               |                |               |        |
|----------|---------------|----------------|---------------|--------|
| <b>X</b> | General Funds | <b>50.00 %</b> | Fees          | 0.00 % |
| <b>X</b> | Federal Funds | <b>50.00 %</b> | 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 **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved Termination Date: **05/31/2025**Contract term: **4 years and 238 days**4. Type of contract: **Contract**Contract description: **P-EBT Benefits**

5. Purpose of contract:

**This is the eighth amendment to the original contract which provides benefits to children who qualify for the National School Lunch Program through Electronic Benefit Transfer. This amendment extends the termination date from May 31, 2025 to January 31, 2026 and increases the maximum amount from \$10,801,527 to \$14,794,727 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: | \$3,300,568.00 | \$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 |
| c. Amendment 3:                             | \$2,988,000.00 | \$2,988,000.00 | \$2,988,000.00  | Yes - Action |
| d. Amendment 4:                             | \$0.00         | \$0.00         | \$0.00          | No           |
| e. Amendment 5:                             | \$872,560.00   | \$872,560.00   | \$872,560.00    | Yes - Action |
| f. Amendment 6:                             | \$0.00         | \$0.00         | \$0.00          | No           |
| g. Amendment 7:                             | \$1,806,800.00 | \$1,806,800.00 | \$1,806,800.00  | Yes - Action |
| 2. Amount of current amendment (#8):        | \$3,993,200.00 | \$3,993,200.00 | \$3,993,200.00  | Yes - Action |

3. New maximum contract amount: \$14,794,727.00  
and/or the termination date of the original contract has changed to: 01/31/2026

## II. JUSTIFICATION

7. What conditions require that this work be done?

The Consolidated Appropriations Act introduced the permanent Summer EBT (S-EBT) program on December 29, 2023. The current vendor leveraged the existing P-EBT infrastructure in the previous amendment to implement the 2024 S-EBT program. While the programs are similar, the 2025 S-EBT requirements are different and system updates are required.

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):

MIS 2000  
DELOITTE CONSULTING LLP  
COMPUTER SYSTEMS WEST, INC

- 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: 03/26/2025

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:

Currently under contract with DWSS and providing satisfactory services.

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

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

Not Applicable

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

LLP

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

Yes

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

Yes



18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?  
Yes
19. Agency Field Contract Monitor:
20. Contract Status:  
Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | cbuscay  | 10/07/2024 08:09:26 AM |
| Division Approval         | cbuscay  | 10/07/2024 08:09:39 AM |
| Department Approval       | rthomps1 | 10/07/2024 10:25:11 AM |
| Contract Manager Approval | mpomerle | 10/08/2024 09:55:05 AM |
| EITS Approval             | ljean    | 10/08/2024 13:12:06 PM |
| Budget Analyst Approval   | afrantz  | 10/11/2024 11:08:17 AM |
| BOE Agenda Approval       | afrantz  | 10/11/2024 12:39:35 PM |



**STATE OF NEVADA  
GOVERNOR'S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Robert Thompson, Administrator, DWSS, DHHS  
Crystal Buscay, Chief Financial Officer, DWSS, DHHS  
Bart London, Chief IT Manager, DWSS, DHHS  
Sheri Gallucci, SNAP Chief, DWSS, DHHS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DWSS – TIN 223 – *P-EBT* – Update H – BA 3228

**DATE:** September 12, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health's (DPBH) – *P-EBT* – TIN 223, Update H.

The submitted TIN, for an estimated value of \$5,800,000.00 in the FY24/FY25 biennium (50% Federal Grant and 50% General Fund), is to update the cost and scope for the administration of the Summer EBT (SEBT) program.

The new scope includes implementing the federally mandated updates required to administer the SEBT program for the 2024-2025 school year. It also, extends the current contract end date from May 31, 2025,

to January 31, 2026. Updates include the following:

- Implement functionality to generate sampling universe for Quality Control (QC) team to be processed in existing Q5I system.
- Incorporate Investigation & Recovery (I&R) for benefit reduction.
- Develop a portal for school districts and Nevada Department of Education (NDE) to upload student data.
- Implement enhancements to benefit issuance and benefit transfer to the Electronic Benefit Transfer (EBT) vendor.
- Modernize direct certification batch.
- Implement AMPS screen to manage SEBT mass change parameters such as benefit amount and income limits.
- Develop up to ten reports to support E&P SNAP specialists' state and federal reporting needs.

Additionally this update includes providing sixteen months of M&O services for bug fixes and implementing system enhancements to align with program changes, new federal guidelines and clarifications at a fixed capacity of 1,086 hours per month.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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

|                             |      |
|-----------------------------|------|
| <b>Purchasing Use Only:</b> |      |
| Approval #:                 | 5730 |

**CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM**

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

|   |  |                     |   |
|---|--|---------------------|---|
| 1 | <b>Agency Contact Information:</b> Note: Approved copy will be sent to <u>only</u> to the contact(s) listed below: |                     |   |
|   | <b>STATE AGENCY NAME REQUIRED:</b>   |                     | <i>Division of Welfare and Supportive Services (DWSS)</i>                       |
|   | <b>Contact Name and Title</b>  | <b>Phone Number</b> | <b>Email Address</b>  |
|   | <i>Monique Pomerleau MA III</i>  | <i>775-684-0678</i> | <i><a href="mailto:dwsscontracts@dwss.nv.gov">dwsscontracts@dwss.nv.gov</a></i> |
|   | <i>Sheri Gallucci Chief I</i>  | <i>775-684-0608</i> | <i><a href="mailto:sgallucci@dwss.nv.gov">sgallucci@dwss.nv.gov</a></i>         |
|   | <i>Brady Ballentine-Muchicko</i>   | <i>775-684-8782</i> | <i><a href="mailto:bmuchicko@dwss.nv.gov">bmuchicko@dwss.nv.gov</a></i>         |

|   |   |   |
|---|---|---|
| 2 | <b>Contractor Information:</b>                |   |
|   | Contractor Name:                              | <i>Deloitte Consulting LLP</i>  |
|   | Contact Name:                                 | <i>Rakesh Dutttagupta</i>   |
|   | Complete Address:<br>City, State and Zip Code | <i>980 9<sup>th</sup> Street, Suite 1800, Sacramento, California 95814</i>    |
|   | Phone Number:                                 | <i>916-288-3100</i>   |
|   | Email Address:                                | <i><a href="mailto:rdutttagupta@dwss.nv.gov">rdutttagupta@dwss.nv.gov</a></i> |

|   |   |   |                   |  |
|---|---|---|-------------------|--|
| 3 | <b>List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):</b> |   |                   |  |
|   | Solicitation Type, if applicable:   | <i>Solicitation Waiver</i>                                      | #:                | <i>Professional Services<br/>NAC 333.150</i> |
|   | Enter CETS Number:  | <i># 12022</i> <span style="float: right;"><i>110307</i></span> |                   |  |
|   | Contract Amount:  | <i>\$1,270,000.00</i>   |                   |  |
|   | Contract Term:  | Start Date:   | <i>05/10/2011</i> | End Date:                                    |

*Rec'd 09/12/24 1:41 PM*

#573(c)

|                                   |                     |                   |           |                   |              |
|-----------------------------------|---------------------|-------------------|-----------|-------------------|--------------|
| Solicitation Type, if applicable: | <b>RFP</b>          |                   |           | #:                | <b>#2017</b> |
| Enter CETS Number:                | <b># 13439</b>      |                   |           |                   |              |
| Contract Amount:                  | <b>\$67,072,799</b> |                   |           |                   |              |
| Contract Term:                    | Start Date:         | <b>07/01/2012</b> | End Date: | <b>06/30/2021</b> |              |

|                                   |                              |                   |           |                   |               |
|-----------------------------------|------------------------------|-------------------|-----------|-------------------|---------------|
| Solicitation Type, if applicable: | <b>- Solicitation Waiver</b> |                   |           | #:                | <b>190801</b> |
| Enter CETS Number:                | <b># 22345</b>               |                   |           |                   |               |
| Contract Amount:                  | <b>\$814,000</b>             |                   |           |                   |               |
| Contract Term:                    | Start Date:                  | <b>11/12/2019</b> | End Date: | <b>06/30/2020</b> |               |

|                                   |                              |                   |           |                   |               |
|-----------------------------------|------------------------------|-------------------|-----------|-------------------|---------------|
| Solicitation Type, if applicable: | <b>- Solicitation Waiver</b> |                   |           | #:                | <b>200106</b> |
| Enter CETS Number:                | <b># 22920</b>               |                   |           |                   |               |
| Contract Amount:                  | <b>\$ 776,000</b>            |                   |           |                   |               |
| Contract Term:                    | Start Date:                  | <b>04/14/2020</b> | End Date: | <b>11/30/2020</b> |               |

|                                   |                              |                   |           |                   |               |
|-----------------------------------|------------------------------|-------------------|-----------|-------------------|---------------|
| Solicitation Type, if applicable: | <b>- Solicitation Waiver</b> |                   |           | #:                | <b>201101</b> |
| Enter CETS Number:                | <b># 23798</b>               |                   |           |                   |               |
| Contract Amount:                  | <b>\$351,000</b>             |                   |           |                   |               |
| Contract Term:                    | Start Date:                  | <b>04/13/2021</b> | End Date: | <b>06/30/2021</b> |               |

|                                   |                              |                   |           |                   |               |
|-----------------------------------|------------------------------|-------------------|-----------|-------------------|---------------|
| Solicitation Type, if applicable: | <b>- Solicitation Waiver</b> |                   |           | #:                | <b>220207</b> |
| Enter CETS Number:                | <b># 25701</b>               |                   |           |                   |               |
| Contract Amount:                  | <b>\$3,960,000</b>           |                   |           |                   |               |
| Contract Term:                    | Start Date:                  | <b>04/12/2022</b> | End Date: | <b>10/31/2023</b> |               |

|                                   |                     |                   |           |                   |                     |
|-----------------------------------|---------------------|-------------------|-----------|-------------------|---------------------|
| Solicitation Type, if applicable: | <b>RFP</b>          |                   |           | #:                | <b>40DHHS-S1833</b> |
| Enter CETS Number:                | <b># 26545</b>      |                   |           |                   |                     |
| Contract Amount:                  | <b>\$75,407,394</b> |                   |           |                   |                     |
| Contract Term:                    | Start Date:         | <b>08/09/2022</b> | End Date: | <b>06/30/2026</b> |                     |

**Purchasing Use Only:**

Approval #:

5730

|   |  |              |            |           |                     |
|---|--|--------------|------------|-----------|---------------------|
| 4 | <b>Current Contract Information:</b>         |              |            |           |                     |
|   | Solicitation Type, if applicable: <b>RFP</b> |              |            | #:        | <b>40DHHS-S1537</b> |
|   | Enter CETS Number:                           | # 24393      |            |           |                     |
|   | Initial Contract Amount:                     | \$ 3,300,568 |            |           |                     |
|   | Contract Term:                               | Start Date:  | 06/06/2021 | End Date: | 05/31/2025          |

|  |  |   |                           |
|--|--|---|---------------------------|
| <b>Amendment Information – List <u>all previously</u> approved amendments:</b> |  |   |                           |
| <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  | Extend school year 2020-2021 P-EBT Call Center and Post-Production services through March 31, 2022,  | From \$3,300,568 to \$4,856,967         | N/A                       |
| 2  | Extend school year 2020-2021 P-EBT Post-Production services through June 31, 2022.   | From \$4,856,967 to \$5,134,167         | N/A                       |
| 3  | System enhancements required to implement the 2021-2022 school year P-EBT program.   | From \$5,134,167 to \$8,122,167         | 12/31/2023                |
| 4  | Adjusting the project timeline and deliverable schedule from June 15, 2022, to June 22, 2022.  | \$0.00                                  | N/A                       |
| 5  | System enhancements required to implement the 2022-2023 P-EBT program.   | From \$8,122,167 to \$8,994,727         | N/A                       |
| 6  | No cost extension, to ensure uninterrupted collaboration with Deloitte regarding the potential implementation of the Summer EBT program for the 2023-2024 school year. | \$0.00                                  | 05/31/2025                |
| 7  | System enhancements required to develop and implement the Summer EBT program for the 2023-2024 school year.  | From \$8,994,727 to \$10,801,527        | N/A                       |

|   |  |   |                           |
|---|--|---|---------------------------|
| <b><u>Proposed</u> Amendment Information:</b> |  |   |                           |
| <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   | 8<br>This amendment implements required functionalities for the 2024-2025 Summer Electronic Benefit Transfer (S-EBT) program, which remains under a federal interim final rule. Key updates include generating Quality | From \$10,801,527 to \$14,794,727       | 01/31/2026                |

|  |  |   |  |  |
|--|--|---|--|--|
|  |  | Control (QC) sampling data, incorporating Investigation & Recovery (I&R) for benefit reduction, and creating a portal for schools to upload data. The amendment also modernizes direct certification, enhances benefit issuance and transfer processes, and provides 16 months of support for system updates to comply with federal guidelines. |  |  |
|--|--|---|--|--|

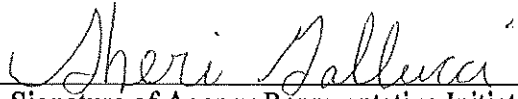
|   |   |
|---|---|
|   | <p><b>What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?</b></p> <p><i>The original contract, established to develop the Pandemic EBT (P-EBT) infrastructure, was initially based on a temporary program during COVID-19 but extended for three years. With the December 29, 2023, Consolidated Appropriations Act introducing the permanent Summer EBT (S-EBT) program, the current vendor leveraged the existing P-EBT infrastructure in the previous amendment to implement the 2024 S-EBT program. While the programs are similar, the 2025 S-EBT requirements are different, and as the program is still under federal interim final rule, additional changes are anticipated for 2026.</i></p> <p><i>Per the US Department of Agriculture, Food and Nutrition Service (FNS), guidelines, for the 2025 program, S-EBT benefits must be issued no later than seven days before school gets out for the summer, which for the county with the largest population is May 15, 2025. Missing this deadline is non-negotiable. Issuing a new RFP would require rebuilding the infrastructure and knowledge base that the current vendor has already developed, risking further delays and inefficiencies. The current vendor has extensive experience and is familiar with the system, having already successfully leveraged the Pandemic EBT (P-EBT) infrastructure to implement the Summer 2024 S-EBT program. Their continued involvement ensures the program operates efficiently and meets the evolving requirements under FNS guidelines.</i></p> |
| 7 |   |
|   | <p><b>What are the potential consequences to the State if the contract extension request is denied?</b></p> <p><i>If the contract extension is denied, the consequences would be significant. The Summer Electronic Benefit Transfer (S-EBT) program is designed to provide critical food assistance to children during the summer months when school is not in session. The program ensures that families receive \$120 per eligible child in food benefits, which can be used at retailers just like SNAP. For 2024, a total of \$42 million in S-EBT benefits will be issued, directly supporting low-income families in Nevada who rely on these funds to feed their children.</i></p> <p><i>Furthermore, denying the contract extension would disrupt the progress already made, compromise the timely delivery of benefits, and fail to serve the families and children who depend on these essential food benefits, compromising the overall goal of the S-EBT program to combat food insecurity. This extension is crucial to providing uninterrupted support to the families most in need.</i></p>   |
| 8 |   |

**Purchasing Use Only:**

Approval #:

57360

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



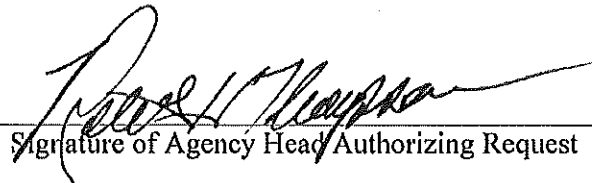
Signature of Agency Representative Initiating Request

Sheri Gallucci

Print Name of Agency Representative Initiating Request

9/10/2024

Date



Signature of Agency Head Authorizing Request

Robert Thompson, Administrator

Print Name of Agency Head Authorizing Request

09/11/2024

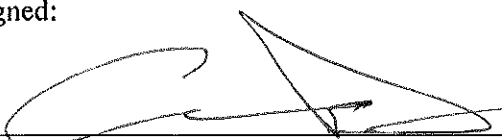
Date

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: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**

✓

Signed:



Administrator, Purchasing Division or Designee

9/18/24

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: 29680

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES

Agency Code: 409

Appropriation Unit: 3281-14

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO

Contractor Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO

Address: Attn: Legal Department  
1644 N. Virginia Street, MS 13  
Reno, NV 89557

City/State/Zip: Reno, NV 89557

Contact/Phone: Susan Poore 775-784-6003

Vendor No.: D35000816

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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 %   | 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 10/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? Yes

If "Yes", please explain

A retroactive effective date of October 1, 2024, is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Board of Regents, Nevada System of Higher Education, on behalf of the University of Nevada, Reno School of Medicine, in order to provide psychiatric fellows services to the division.

The interlocal contract required more processing time due to the need to obtain updated rates and review of the contract by the University.

3. Termination Date: 09/30/2026

Contract term: 1 year and 364 days

4. Type of contract: Interlocal Agreement

Contract description: Psychiatric Fellows

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing services utilizing the Psychiatry Fellowship program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$104,800.00

Other basis for payment: Per Attachment 1 - General Scope of Work - Fellows and Payment Schedule

II. JUSTIFICATION

7. What conditions require that this work be done?

The University of Nevada, Reno School of Medicine provides essential psychiatric assessment and support services in support of psychiatric and outpatient services provided by Northern Nevada Child and Adolescent Services.

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

The division has insufficient staff to provide the services provided by the University of Nevada, Reno School of Medicine. In addition, the services provided serve as practical learning experience for University of Nevada, Reno School of Medicine fellows.

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?

Nevada Revised Statutes 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 University of Nevada Reno School of Medicine is part of the State of Nevada and some of its employees will be providing services.

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. 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:

Rhonda Lawrence, Clinical Program Manager 2 Ph: 775-688-2421

Imran Hyman, Admin Services Officer 2 Ph: 775-688-1636

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | ihyman   | 08/23/2024 10:51:28 AM |
| Division Approval         | dfrohlic | 09/03/2024 16:09:26 PM |
| Department Approval       | mwillia9 | 09/12/2024 10:21:20 AM |
| Contract Manager Approval | sknigge  | 09/18/2024 15:53:42 PM |
| Budget Analyst Approval   | pokeefe  | 09/20/2024 12:57:06 PM |
| BOE Agenda Approval       | nrezaie  | 09/20/2024 14:43:12 PM |
| BOE Final Approval        | Pending  |                        |

Joe Lombardo  
Governor

Richard Whitley, MS  
Director



# DEPARTMENT OF HEALTH AND HUMAN SERVICES


DIVISION OF CHILD AND FAMILY SERVICES  
*Helping people. It's who we are and what we do.*



Marla McDade  
Williams, MPA  
Administrator

## MEMORANDUM

TO: Philene O'Keefe, Executive Branch Budget Officer I  
Governor's Finance Office

FROM: Kelsey McCann-Navarro, Administrative Services Officer IV   
Division of Child and Family Services

DATE: 09/12/2024

SUBJECT: Retroactive Contract Request  
Board of Regents, Nevada System of Higher Education, on behalf of the University of Nevada Reno School of Medicine (Psychiatric Fellows)

A retroactive effective date of October 1, 2024, is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Board of Regents, Nevada System of Higher Education, on behalf of the University of Nevada Reno School of Medicine, in order to provide psychiatric fellows services to the Division.

The interlocal contract required more processing time due to the need to obtain updated rates and review of the contract by the University. The Division will allow sufficient processing time in the future.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4431.

**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: **29812**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3710-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **VOX NETWORK SOLUTIONS, INC.**Contractor Name: **VOX NETWORK SOLUTIONS, INC.**Address: **130 Produce Avenue****Suite C**  
City/State/Zip **San Fransico, CA 94080**Contact/Phone: **Allan Pederson 877-869-8111**Vendor No.: **T29037701**NV Business ID: **NV20151706142**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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.

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| <b>X</b> General Funds | <b>100.00 %</b> | 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 **07/01/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **Yes**

If "Yes", please explain

**This service needs to be retro so there will not be a lapse in services.**3. Termination Date: **06/30/2027**Contract term: **2 years and 364 days**4. Type of contract: **Other (include description): Service agreement**Contract description: **Avaya Phone Service**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV24-20549 which provides voice and data telecommunications systems. This service agreement provides maintenance and support of the Avaya Communication System for prisons, work camps, and administrative sites.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$474,925.68**

Payment for services will be made at the rate of \$158,308.56 per year

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**This is needed to support and maintain the phone system throughout NDOC.**

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

**The scope of this work is outside of the capabilities of NDOC staff.**

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   | mschobe2 | 10/03/2024 09:49:09 AM |
| Division Approval         | kdesoci1 | 10/04/2024 16:39:35 PM |
| Department Approval       | kdesoci1 | 10/04/2024 16:39:39 PM |
| Contract Manager Approval | blewalle | 10/11/2024 14:40:40 PM |
| EITS Approval             | daxtel1  | 10/15/2024 19:33:08 PM |
| Budget Analyst Approval   | vyoungb  | 10/16/2024 08:22:35 AM |
| BOE Agenda Approval       | bmacke1  | 10/21/2024 14:17:13 PM |
| BOE Final Approval        | Pending  |                        |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** James Dzurenda, Director, NDOC  
Kitty DeSocio, Deputy Director (acting), NDOC  
Dan Erlendson, Chief IT Manager (acting), NDOC  
John Mason, Telecommunication Coordinator II, NDOC

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
Darla Dodge, Deputy CIO - Chief Operating Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – NDOC – TIN 1056 – *NDOC Phone Renewal* –  
BA 3710

**DATE:** October 9, 2024

We have completed our review for the Nevada Department of Corrections (NDOC) – *NDOC Phone Renewal* – TIN 1056.

The submitted TIN, for an estimated value of \$153,308.56 in the FY24/FY25 biennium, \$306,617.12 in the FY26/FY27 biennium, and \$153,309.00 in FY28 (100% General Fund), is to renew the NDOC phone system.

Phone system renewal for NDOC is critical to ensuring continuous 24/7 operations, which are vital for

maintaining communication and security within the facility. The system must be capable of addressing technical issues quickly, with features such as call-back functionality to ensure staff have uninterrupted access to communication. Leveraging the familiarity of existing staff with the current setup and locations is essential in minimizing downtime and ensuring a seamless transition with no disruptions to daily operations.

The solution will involve a change to the current server environment. Despite these changes, OCIO-supported Server Hosting is expected to remain consistent, with server equipment physically residing in the cloud. The upgraded telephone system will utilize VoIP technology, with the new handsets supported by LAN switches powered through Power over Ethernet (POE).

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

Joe Lombardo  
Governor

James E. Dzurenda  
Director

Kitty DeSocio  
Acting Deputy Director



Northern Administration  
5500 Snyder Ave.  
Carson City, NV 897010  
(775) 977-5500

Southern Administration  
3955 W. Russell Rd.  
Las Vegas, NV 89118  
(725) 216-6000

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## MEMORANDUM

Date: October 11, 2024  
To: Governors Finance Office  
Subject: Retro Contract Request

This Memo is to inform you that NDOC is asking for the accompanied contract service agreement CETS 29812 with Vox Network Solutions to be approved retroactively to 7/1/2024 for Avaya telephone systems support and maintenance. This service has been continuing uninterrupted since our last contract expired 6/30/2024. The reason for the late submission is due to staff shortages and budget constraints, we hope to remedy this in the future.

Thank you,

Kitty DeSocio  
Acting Deputy Director of Support Services  
Nevada Department of Corrections  
Office 775-977-5616



**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: **29857**Agency Name: **DPS-FIRE MARSHAL**Agency Code: **656**Appropriation Unit: **3816-25**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **TS HAZMAT CONSULTING SERVICES LLC DBA SIGNET NORTH AMERICA**Contractor Name: **TS HAZMAT CONSULTING SERVICES LLC DBA SIGNET NORTH AMERICA**Address: **2133 W GUADALUPE DR**City/State/Zip: **PUEBLO WEST, CO 81007**Contact/Phone: **TODD SKOGLUND 719/251-8458**Vendor No.: **T29045931**NV Business ID: **NV20131612196**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 % | <b>X</b> Other funding | <b>100.00 %</b> |

**STATE OF NEVADA EMERGENCY RESPONSE COMMISSION 50%; NEVADA DEPARTMENT OF ENVIRONMENTAL PROTECTION 50%**

Agency Reference #: **65DPS-S2934/HM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2025**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2028**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Hazmat Training**

5. Purpose of contract:

**This is a new contract to provide ongoing Hazardous Material Technician level training.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$627,028.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Fire Marshal Division is required by statute to provide Hazardous Material Training;

NRS 477.045 Hazardous materials: Training program for response to spills; permit for storage; surcharge for permit.

1. The State Fire Marshal shall establish a statewide training program for response to spills of hazardous materials and related fires. The State Fire Marshal shall require persons who store hazardous materials to obtain a permit to do so. The State Fire Marshal shall collect a surcharge of \$60 for each such permit issued in the State. The surcharge is in addition to any other fee charged for the issuance of such a permit.

2. The revenue derived by the State Fire Marshal pursuant to this section must be deposited with the State Treasurer for credit to the Contingency Account for Hazardous Materials.

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

**The Fire Marshal Division does not have the equipment required to deliver the Hazardous Material Technician course.**

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):

FC Safety  
Noble Logistics  
Network Environmental Systems

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #65DPS-S2764 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: 08/28/2024 Anticipated re-bid date: 08/01/2028

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 vendor 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:

Melissa Sabatini, ASO Ph: 775-684-4593

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | cjackson | 10/08/2024 09:45:22 AM |
| Division Approval         | cjackson | 10/08/2024 09:45:26 AM |
| Department Approval       | mcosenti | 10/08/2024 13:59:16 PM |
| Contract Manager Approval | mcosenti | 10/08/2024 13:59:21 PM |
| Budget Analyst Approval   | khawkin1 | 10/10/2024 11:01:04 AM |
| BOE Agenda Approval       | bmacke1  | 10/14/2024 12:04:17 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: 29827

Agency Name: DCNR - CONSERVATION & NATURAL RESOURCES

Agency Code: 700

Appropriation Unit: 4159-10

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO DESERT RESEARCH INSTITUTE

Contractor Name: BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO DESERT RESEARCH INSTITUTE

Address: DRI CONTROLLERS OFFICE 2215 RAGGIO PKWY

City/State/Zip: RENO, NV 89512-1095

Contact/Phone: Suzanne Hudson  
Suzanne.Hudson@dri.edu 775/673-7482

Vendor No.: D35000802

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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

Agency Reference #: ARPA1001

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 09/30/2026  
Contract term: 1 year and 333 days

4. Type of contract: Interlocal Agreement  
Contract description: Water Use Projection

5. Purpose of contract:

This is a new interlocal agreement to provide long-term water use projections for the State Water Plan.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$250,000.00  
Payment for services will be made at the rate of \$250,000.00 per null  
Other basis for payment: Payable within 30 days, upon completion and receipt of final report.

II. JUSTIFICATION

7. What conditions require that this work be done?

Water use projections are a key component of a strong water plan. Projection data are integral for understanding resource constraints and setting strategic planning goals at the state, regional, and local levels as the state continues to grow and the demand for water evolves. In order to produce scenario-based projections of water demand extending a few decades into the future, information including regional population projections and economic forecasts must be compiled, analyzed, and synthesized. Completing this work will produce a product that can be incorporated into the Nevada State Water Plan, which is being updated for the first time since 1999. If this work is not completed the State Water Plan and any associated publications will be limited in scope and utility, as information about the impacts of growth and future water demand will be omitted from the plan. This omission may particularly impact rural communities where robust local studies integrating information about growth, economic development, and projected water use may not be available.

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

To produce scenario-based projections of water demand that extend decades into the future based on information including climate, regional population projections, and economic forecasts and then compiling, analyzing, and synthesizing this data exceeds the expertise of NDWR staff. This type of analysis requires the input and collaboration of subject matter experts with knowledge of climate projections, population projections, and economic forecasts. Other State agencies are not able to do this work either because they are not subject matter experts who can analyze current water supply and demand and then develop long-term water use projections that will support the planning and management of future water supplies and demands for agricultural, municipal, and industrial uses 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?

The datasets required for the work are shared via existing interlocal with DRI and DWR. Given the specific knowledge and data required DRI is specially equipped to perform this work.

Solicitation Waiver: 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:

Bunny Bishop, Chief, Water Planning and Drought Resiliency Ph: 7756842834

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

bbisho1

10/01/2024 11:54:58 AM

|                           |          |                        |
|---------------------------|----------|------------------------|
| Division Approval         | bbisho1  | 10/01/2024 11:55:00 AM |
| Department Approval       | hbugg    | 10/01/2024 14:33:24 PM |
| Contract Manager Approval | bbisho1  | 10/03/2024 16:20:52 PM |
| Budget Analyst Approval   | rjacob3  | 10/09/2024 16:30:32 PM |
| BOE Agenda Approval       | vmilazz1 | 10/14/2024 14:02:47 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 CONTRACT

1. Contract Number: 29759

Agency Name: DEPARTMENT OF WILDLIFE

Agency Code: 702

Appropriation Unit: 4462-12

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: TRUCKEE MEADOWS PARKS FOUNDATION

Contractor Name: TRUCKEE MEADOWS PARKS FOUNDATION

Address: FOUNDATION  
50 COWAN DR

City/State/Zip: RENO, NV 89509-1009

Contact/Phone: 775/410-1702

Vendor No.: T32008705

NV Business ID: NV20121181070

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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 Plate |
| Federal Funds | 0.00 % |   | Bonds         | 0.00 %                 |
| Highway Funds | 0.00 % |   | Other funding | 0.00 %                 |

Agency Reference #: 25-13

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/31/2028

Contract term: 4 years

4. Type of contract: Contract

Contract description: Americorps WL Ed

5. Purpose of contract:

This is a new contract to provide ongoing wildlife education programming and volunteer services by supervising and mentoring AmeriCorps volunteers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$476,356.00

II. JUSTIFICATION

7. What conditions require that this work be done?

The opportunity to foster a strong partnership with a well-known organization within our communities, as well as build a program to offer young professionals an opportunity to grow, learn, and give back to the wildlife field.

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

State employees can not do this work because the Americorps program is a national volunteer 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: **Sole Source Contract (As Approved by Chief of Purchasing)**

**Approval #: 240805**

**Approval Date: 08/27/2024**

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

The other vendors did not align with our programming and were not able to cost-share.

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:

Yes, FY20-current, NDOW, and 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:

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   | nroble1  | 10/02/2024 11:09:26 AM |
| Division Approval         | nroble1  | 10/02/2024 11:09:29 AM |
| Department Approval       | jneubau2 | 10/08/2024 11:20:00 AM |
| Contract Manager Approval | abarredo | 10/08/2024 11:27:15 AM |
| Budget Analyst Approval   | dspeed1  | 10/14/2024 16:24:02 PM |
| BOE Agenda Approval       | vmilazz1 | 10/17/2024 13:35:50 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

|                             |         |
|-----------------------------|---------|
| <b>Purchasing Use Only:</b> |         |
| Approval#:                  | 240805@ |

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|           |  |                        |                       |
|-----------|--|------------------------|-----------------------|
| <b>1a</b> | <b>Agency Contact Information - Note:</b> Approved copy will be sent to <u>ONLY</u> the contact(s) listed below: |                        |                       |
|           | <b>STATE AGENCY NAME REQUIRED:</b>   | Department of Wildlife |                       |
|           | <i>Contact Name and Title</i>  | <i>Phone Number</i>    | <i>Email Address</i>  |
|           | Ashley White   | (775) 688-1427         | Ashley.white@ndow.org |
|           | Julie Bless  | (775) 688-1406         | jbless@ndow.org       |

|           |   |                                  |  |
|-----------|---|----------------------------------|--|
| <b>1b</b> | <b>Vendor Information:</b>                            |                                  |  |
|           | Vendor Name:  | Truckee Meadows Parks Foundation |  |
|           | Contact Name:   | Heidi Anderson                   |  |
|           | <b>Complete Address:</b><br>City, State, and Zip Code | 50 Cowan Drive, Reno, NV 89509   |  |
|           | Telephone Number:                                     | 775-410-1702                     |  |
|           | Email Address:  | heidi@tmparksfoundation.org      |  |

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

|           |  |      |   |     |  |
|-----------|--|------|---|-----|--|
| <b>1d</b> | <b>Contract Information:</b>           |      |   |     |  |
|           | Is this a new Contract? Check One:     | Yes: | X | No: |  |
|           | <b>If 'No' Enter Amendment Number:</b> | #    |   |     |  |
|           | <b>Enter CETS Number:</b>              | #    |   |     |  |

|           |                                   |             |                 |           |                    |
|-----------|-----------------------------------|-------------|-----------------|-----------|--------------------|
| <b>1e</b> | <b>Term:</b>                      |             |                 |           |                    |
|           | One (1) Time Purchase? Check One: | Yes:        |                 | No:       |                    |
|           | Contract:                         | Start Date: | October 1, 2024 | End Date: | September 30, 2028 |

|           |                     |                            |
|-----------|---------------------|----------------------------|
| <b>1f</b> | <b>Funding:</b>     |                            |
|           | State Appropriated: | N/A                        |
|           | Federal Funds:      | N/A                        |
|           | Other (Explain):    | License Plate Fees Funding |

Purchasing Use Only:

Approval #:

24080500

|    |   |
|----|---|
| 1g | Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: |
|    | \$478,027.00  |

|   |  |
|---|--|
| 2 | Provide a description of work/services to be performed or services with goods to be purchased:   |
|   | <i>We seek to be a host site for Americorps interns. We utilize these 9 interns to do conservation education programming in K-12 classrooms throughout Nevada as well as assist with volunteer recruitment and management. These interns serve a minimum of 1700 hours over the course of 11 months.</i> |

|   |   |
|---|---|
| 3 | What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?   |
|   | <i>The Americorps program has different projects. Within these projects are different metrics that a sponsor organization (Truckee Meadows Parks Foundation) must meet. To meet these metrics the sponsor organization places Americorps interns at host sites (Nevada Department of Wildlife). Our needs as an organization are conducive to the metrics of Truckee Meadows parks foundation's Americorps project.</i> |

|   |  |
|---|--|
| 4 | Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:  |
|   | <i>This can not be competitively bid because of the specific nature of Americorps project metrics. The Americorps project is to provide work experience to young conservationists. The cost of this program is only to share the cost with the Truckee Meadows Parks Foundation. This partnership not only provides the work experience of the interns it also shares the cost of the program.</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>We could not find other Americorps sponsor organizations in our area that met our needs. They were not willing take us on as a host site and their project metrics did not align as well as Truckee Meadows Parks Foundation.</i> |            |    |
|   | b. <u>If not</u> , why were alternatives not evaluated?  |            |    |
|   |  |            |    |

Purchasing Use Only:

Approval #:

2408050

|   |  |            |           |                    |   |        |    |
|---|--|------------|-----------|--------------------|---|--------|----|
|   | Has the agency purchased these services/services with goods in the past? Check One:  |            |           |                    |   | Yes    | No |
|   | NOTE: To avoid delays or your request being rejected, 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>   |            |           |                    |   | S      |    |
| 6 | a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u> |            |           |                    |   |        |    |
|   | Term   |            | Value     | Short Description  | Provide Type of Procurement<br>RFP#, RFQ#, Waiver # | CETS # |    |
|   | Start Date   | End Date   |           |                    |   |        |    |
|   | 11/10/2020   | 10/31/2024 | \$293,535 | Volunteer services | Waiver #200902                                      | 23584  |    |
|   | 10/29/2019   | 6/30/2020  | \$47,500  | Volunteer services | Informal Agency Solicitation                        | 22231  |    |
|   |  |            |           |                    |   |        |    |
|   |  |            |           |                    |   |        |    |

|   |   |
|---|---|
| 7 | What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?   |
|   | The Nevada Department of Wildlife would not be able to conduct Wildlife Educational Programs at the capacity of current statewide levels of demand, statewide K-12 wildlife education programming, and volunteer programming would be greatly reduced. In addition, the Americorps partnership has proved to be a very valuable employee recruitment tool. We currently employ 6 past Americorps interns in full-time permanent positions within the Conservation Education division alone. |

|   |  |
|---|--|
| 8 | What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?   |
|   | Due to the nature of the specificity of the Americorps program's metrics per project we found that the other Americorps sponsor organizations throughout the state don't meet our needs and would not be able to meet the cost sharing of the Americorps program either. |

|   |  |     |    |
|---|--|-----|----|
| 9 | Will this purchase obligate the State to this vendor for future purchases? Check One:                            | Yes | No |
|   | NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions. |     | X  |
|   | a. If yes, please provide details regarding future obligations or needs.   |     |    |

Purchasing Use Only:

Approval #:

240805②

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



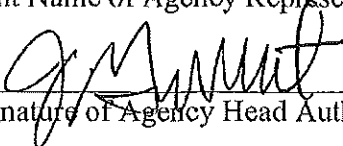
Signature of Agency Representative Initiating Request

Julie Bless

Print Name of Agency Representative Initiating Request

8/23/24

Date



Signature of Agency Head Authorizing Request

Jordan Goshert

Print Name of Agency Head Authorizing Request

8/26/24

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 Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

**NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**

Approved by:



Administrator, Purchasing Division or Designee

8/27/24

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: **29777**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: **LINCOLN COUNTY CONSERVATION**Contractor Name: **LINCOLN COUNTY CONSERVATION**Address: **DISTRICT****PO BOX 445**  
**CALIENTE, NV 89008**City/State/Zip: **CALIENTE, NV 89008**Contact/Phone: **Maggie Orr 775-962-1123**Vendor No.: **T81000350**NV Business ID: **GOVERNMENTAL ENTITY**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to 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**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 25-18

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2025**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2028**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Habitat Improvement**

5. Purpose of contract:

**This is a new interlocal agreement to provide wildlife habitat and ecological restoration services.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$102,600.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**Habitat degradation or other projects that provide a benefit to Nevada's wildlife within the jurisdiction of the Lincoln County Conservation District.**

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

**Nevada Department of Wildlife employees do not have the knowledge or certifications for much of the work such as herbicide application, use of chainsaws for pinyon-juniper treatments, stream bank restoration, and relationships with private landowners where habitat degradation has occurred. The Nevada Department of Wildlife also does not have the capacity to conduct the habitat improvement projects.**9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

**Not Applicable**b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. 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:

Yes, FY21-current, with the Nevada Department of Wildlife. 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:

MOIRA KOLADA, BIOLOGIST 3 Ph: 775/289-1655 EXT 5

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | abarredo | 09/13/2024 12:58:33 PM |
| Division Approval         | abarredo | 09/13/2024 12:58:43 PM |
| Department Approval       | jneubau2 | 09/20/2024 15:26:05 PM |
| Contract Manager Approval | amedin4  | 09/23/2024 07:01:42 AM |
| Budget Analyst Approval   | dspeed1  | 09/30/2024 15:47:25 PM |
| BOE Agenda Approval       | vmilazz1 | 09/30/2024 16:35:36 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: 24766

Amendment Number: 2

Legal Entity Name: L and I Fence Construction, Inc.

Contractor Name: L and I Fence Construction, Inc.

Address: 1000 Crane Lane

City/State/Zip: Montpelier, ID 83254

Contact/Phone: Terresa M. Maughan 775-750-3033

Vendor No.: T32009792A

NV Business ID: 20051246667

Agency Name: DEPARTMENT OF WILDLIFE

Agency Code: 702

Appropriation Unit: 5010-25

Is budget authority available?: Yes

If "No" please explain: Not Applicable

To what State Fiscal Year(s) will the contract be charged? 2022-2028

What is the source of funds that will be used to 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          | 30.00 % | Habitat Conservation; Upland Game Stamp; Elk Damage   |
| X Federal Funds | 40.00 % |   | Bonds         | 0.00 %  |   |
| Highway Funds   | 0.00 %  | X | Other funding | 30.00 % | Heritage Trust Fund; Energy Development and Transmission; Water Development; Industrial Deviation |

Agency Reference #: 72DOW-S1518 tb

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/14/2021

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 09/13/2025

Contract term: 6 years

4. Type of contract: Contract

Contract description: Fence Construction

5. Purpose of contract:

This is the second amendment to the original contract which provides fencing removal and construction services. This amendment extends the termination date from September 13, 2025 to September 13, 2027 and increases the maximum amount from \$3,624,119 to \$7,164,621 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:                             | \$1,000,000.00 | \$1,000,000.00 | \$1,000,000.00  | Yes - Action |
|                       | a. Amendment 1:  | \$2,624,119.00 | \$2,624,119.00 | \$2,624,119.00  | Yes - Action |
| 2.                    | Amount of current amendment (#2):                                    | \$3,540,502.00 | \$3,540,502.00 | \$3,540,502.00  | Yes - Action |
| 3.                    | New maximum contract amount:   | \$7,164,621.00 |                |                 |              |
|                       | and/or the termination date of the original contract has changed to: | 09/13/2027     |                |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Department of Wildlife constructs fences to protect a crucial habitats for Nevada's wildlife from the over utilization of non-native ungulates. These habitat types may include but are not limited to; natural springs, lentic/lotic systems, riparian systems, etc.

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 experience, expertise, nor the materials to complete this work.

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):

NNE Construction  
Boss Tanks  
Northwest Barriers  
Dano Construction  
Nuffer Fencing  
Acha Construction  
Gold Standard Fence  
Lamoille Fencing  
Countyside Lawns  
Modern Lawn and Development  
Walker River Construction  
Red Star Fence  
Taylor Made Fencing

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #72DOW-S1518, 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: 06/28/2021 Anticipated re-bid date: 06/28/2027

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:

Yes, FY20-current, with the Nevada Department of Wildlife. Work is satisfactory.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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



Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | abarredo | 10/04/2024 15:04:19 PM |
| Division Approval         | abarredo | 10/04/2024 15:04:26 PM |
| Department Approval       | jneubau2 | 10/08/2024 06:57:54 AM |
| Contract Manager Approval | amedin4  | 10/08/2024 07:43:00 AM |
| Budget Analyst Approval   | dspeed1  | 10/14/2024 16:44:45 PM |
| BOE Agenda Approval       | vmilazz1 | 10/17/2024 13:23:48 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: **29802**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4103-44**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **QUANTUM MARK, LLC**Contractor Name: **QUANTUM MARK, LLC**Address: **5470 Kietzke Ln, Suite 300**City/State/Zip: **Reno, NV 89511**Contact/Phone: **Elena Rose Pierre-Louis 775-853-4666**Vendor No.: **Pending**NV Business ID: **NV20041156836**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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 %         | Fees                   | 0.00 %                    |
| <b>X</b> Federal Funds | <b>57.00 %</b> | Bonds                  | 0.00 %                    |
| Highway Funds          | 0.00 %         | <b>X</b> Other funding | <b>43.00 % Land Sales</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2026**Contract term: **2 years and 60 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **SCORP planning**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV23-17899 which provides consulting, marketing, and education services. This service agreement provides the collaborative development of a Statewide Comprehensive Outdoor Recreation Plan as required by the National Park Service.**

6. NEW CONTRACT

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

7. What conditions require that this work be done?

**The National Park Service requires that all state recipients of Land and Water Conservation Funds (LWCF) complete a Statewide Comprehensive Outdoor Recreation Plan (SCORP) every five years. Nevada's current SCORP expires 12-31-26.**

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

**The SCORP process is lengthy and time consuming. State Parks does not have the staff to fully execute a new SCORP. The contractor will be assisting in this process.**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: **Exempt (Per statute)**

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)?  
 Yes

18. 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   | ethick1  | 10/03/2024 07:35:16 AM |
| Division Approval         | ethick1  | 10/03/2024 07:35:18 AM |
| Department Approval       | ethick1  | 10/03/2024 07:35:21 AM |
| Contract Manager Approval | ethick1  | 10/03/2024 11:37:15 AM |
| Budget Analyst Approval   | rjacob3  | 10/11/2024 09:33:04 AM |
| BOE Agenda Approval       | vmilazz1 | 10/14/2024 13:42:14 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 CONTRACT

1. Contract Number: 29760

Agency Name: DCNR - STATE LANDS

Agency Code: 707

Appropriation Unit: 4206-34

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: NORTH LAKE TAHOE FIRE PROTECTION DISTRICT

Contractor Name: NORTH LAKE TAHOE FIRE PROTECTION DISTRICT

Address: PROTECTION DISTRICT  
866 ORIOLE WAY

City/State/Zip: INCLINE VILLAGE, NV 89451-9439

Contact/Phone: Isaac Powning 775-831-0351

Vendor No.: PUR0000998

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2028

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

|               |        |                 |                                    |
|---------------|--------|-----------------|------------------------------------|
| General Funds | 0.00 % | Fees            | 0.00 %                             |
| Federal Funds | 0.00 % | X Bonds         | 70.00 %                            |
| Highway Funds | 0.00 % | X Other funding | 30.00 % Lake Tahoe Restoration Act |

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

or b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2028

Contract term: 3 years and 242 days

4. Type of contract: Interlocal Agreement

Contract description: Fuels Reduction

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing fuels reduction, thinning, prescribed fire, and wildlife habitat improvement in the Lake Tahoe Basin.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$393,000.00

Other basis for payment: Per attached rate sheet upon submission of invoice and acceptance by Division of State Lands.

II. JUSTIFICATION

7. What conditions require that this work be done?

The focus of the work will be fuels reduction and forest restoration activities by crews on both State-owned urban lots and within the State Park system in the Lake Tahoe Basin. The Division of State Lands is responsible for the management of these urban parcels and is the lead agency for the implementation of the Environmental Improvement Program (EIP).

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

The contractor is the local fire agency that has trained hand crews with the skills and physical abilities to perform the work required. The crews are also qualified to perform prescribed pile and understory burning. The agency does not have the resources to do 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?

North Lake Tahoe Fire Protection District has hand crews with the experience, physical ability, ad resources to complete the required tasks. The agency has had a relationship with contractor since 1996.

Solicitation Waiver: 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?

**Yes** If "Yes", please explain

The contractor is a fire protection district within the State of Nevada.

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 Lands has had an ongoing relationship with the contractor since 1996. Quality of 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 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:

HIGGINS, ANNA, FORESTER Ph: 775-684-2741

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | avance   | 09/06/2024 12:08:52 PM |
| Division Approval         | avance   | 09/09/2024 16:19:23 PM |
| Department Approval       | kwilliam | 09/11/2024 15:04:30 PM |
| Contract Manager Approval | avance   | 09/24/2024 10:44:23 AM |
| Budget Analyst Approval   | rjacob3  | 09/24/2024 10:47:25 AM |
| BOE Agenda Approval       | vmilazz1 | 09/30/2024 16:54:42 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 CONTRACT

1. Contract Number: 29661

Agency Name: DCNR - ENVIRONMENTAL PROTECTION

Agency Code: 709

Appropriation Unit: 3187-16

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: SLR International Corporation

Contractor Name: SLR International Corporation

Address: 22118 20th Ave SE, G202

City/State/Zip: Bothell, WA 98021

Contact/Phone: Matthew Behling 425-402-8800

Vendor No.:

NV Business ID: NV20141529396

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/12/2028

Contract term: 3 years and 285 days

4. Type of contract: Contract

Contract description: Hub & Spoke

5. Purpose of contract:

This is a new contract to provide a hub and spoke recycling system feasibility study for rural Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$199,708.00

Other basis for payment: As invoiced

II. JUSTIFICATION

7. What conditions require that this work be done?

Fulfilling programmatic research and development plans.

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 equipment or staff time available.

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 #70CNR-S2826, 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: 05/14/2024 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   | dherrin1 | 09/12/2024 14:17:32 PM |
| Division Approval         | asettel1 | 09/12/2024 15:27:24 PM |
| Department Approval       | asettel1 | 09/12/2024 15:27:30 PM |
| Contract Manager Approval | mgowe2   | 09/12/2024 15:28:03 PM |
| Budget Analyst Approval   | rmayhall | 10/08/2024 09:20:59 AM |
| BOE Agenda Approval       | vmilazz1 | 10/14/2024 13:15:33 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 CONTRACT

1. Contract Number: 29627

Agency Name: DCNR - ENVIRONMENTAL PROTECTION

Agency Code: 709

Appropriation Unit: 3197-08

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Broadbent & Associates, Inc.

Contractor Name: Broadbent & Associates, Inc.

Address: 5450 Louie Lane, #101

City/State/Zip: Reno, NV 89511

Contact/Phone: Douglas G. Guerrant 775-322-7969

Vendor No.: T80989610

NV Business ID: NV19891031637

To what State Fiscal Year(s) will the contract be charged? 2025-2028

What is the source of funds that will be used to pay the contractor? 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 #: DEP25-023

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/11/2024

Anticipated BOE meeting date 11/2024

Retroactive? Yes

If "Yes", please explain

Work was scheduled to commence on September 11, 2024. Due to the cancellation of the September BOE meeting, we are requesting retroactive approval.

3. Termination Date: 08/31/2027

Contract term: 2 years and 354 days

4. Type of contract: Contract

Contract description: PFAS Sampling

5. Purpose of contract:

This is a new contract to provide training to drinking water operators and testing of water sources for potentially dangerous levels of Perfluoroalkyl and Polyfluoroalkyl substances.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$1,591,384.00

Payment for services will be made at the rate of \$0.00 per FY25-FY28

Other basis for payment: Monthly as invoiced by the contractor

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada has acquired a grant from EPA to sample for PFAS across Nevada and provide training to drinking water operators for the collection of PFAS samples. Sample results will be used to characterize PFAS concentrations across the state and assist water systems in preparing for the new PFAS regulation.

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

State does not have adequate human resources or equipment to conduct the statewide monitoring and training effort..

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?

Highest scoring 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?

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

Not Applicable

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

**No**

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

**No**

c. Is the contractor employed by any of Nevada's political subdivisions or 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 Bureau of Corrective Actions, the Bureau of Safe Drinking Water, and the Bureau of Industrial Site Cleanup have previously utilized this vendor and reported the vendor's performance 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   | mfrien1  | 09/10/2024 10:39:45 AM |
| Division Approval         | aseifert | 09/10/2024 10:43:55 AM |
| Department Approval       | aseifert | 09/10/2024 10:43:59 AM |
| Contract Manager Approval | mvaldiv1 | 09/10/2024 11:11:25 AM |
| Budget Analyst Approval   | rjacob3  | 09/20/2024 11:44:41 AM |
| BOE Agenda Approval       | vmilazz1 | 09/30/2024 17:09:14 PM |
| BOE Final Approval        | Pending  |                        |



**RETROACTIVE  
INTER-DEPARTMENTAL MEMORANDUM**

**TO:** Richard Jacobs, Budget Officer, Governor's Finance Office, Budget Division

**FROM:** Sheryl Fontaine, Chief of Environmental Programs, Bureau of Administrative Services 

**SUBJECT:** Contract DEP25-023 (CETS# 29627) – Contract for Services of Independent Contractor, Broadbent and Associates, Inc.

**DATE:** September 10, 2024

NDEP is requesting approval of the retroactive start date of the above-referenced contract, to be effective September 11, 2024. This contract was pulled from the (canceled) September 10, 2024, BOE meeting and work was already scheduled to begin on September 11, 2024.

This contract is supported by federal funds, which have already been awarded, and the contract supports work that is part of the approved grant workplan and schedule. The main goal of this contract is to expand the sampling of PFAS, a.k.a. Forever Chemicals, at public water systems, and starting the contract as planned allowed the contractor to complete the preparatory work before sampling begins (e.g., developing communication tools and quality assurance plan for EPA approval) and ensure 4<sup>th</sup> quarter 2024 sampling is performed.

The sampling from this contract is also being used, in part, to inform the PFAS Risk Assessment Modeling Tool that is under development and to assist public water systems in collecting information about the quality of their water related to PFAS

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: 24759

Amendment Number: 4

Agency Name: DEPARTMENT OF MOTOR VEHICLES

Legal Entity Name: CARAHSOFT TECHNOLOGY CORPORATION

Agency Code: 810

Contractor Name: CARAHSOFT TECHNOLOGY CORPORATION

Appropriation Unit: 4716-16

Address: 11493 SUNSET HILLS RD STE 100

Is budget authority available?: Yes

City/State/Zip: RESTON, VA 20190

If "No" please explain: Not Applicable

Contact/Phone: 571-662-3456

Vendor No.: PUR0004357

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? 2022-2027

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 %   | 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 09/22/2021

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 09/08/2026

Contract term: 4 years and 352 days

4. Type of contract: Contract

Contract description: Software Solutions

5. Purpose of contract:

This is the fourth amendment to the original contract which provides commercial off-the-shelf based software solutions to replace the current outdated systems as part of the system modernization project. This amendment increases the maximum amount from \$92,186,338.48 to \$92,869,514.36 due to the addition of software licenses and two development environments.

6. CONTRACT AMENDMENT

|   | Trans \$        | Info Accum \$   | Action Accum \$ | Agenda       |
|---|-----------------|-----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$51,038,212.98 | \$51,038,212.98 | \$51,038,212.98 | Yes - Action |
| a. Amendment 1:                             | \$26,299,713.50 | \$26,299,713.50 | \$26,299,713.50 | Yes - Action |
| b. Amendment 2:                             | \$10,682,107.74 | \$10,682,107.74 | \$10,682,107.74 | Yes - Action |
| c. Amendment 3:                             | \$4,166,304.26  | \$4,166,304.26  | \$4,166,304.26  | Yes - Action |
| 2. Amount of current amendment (#4):        | \$683,175.88    | \$683,175.88    | \$683,175.88    | Yes - Action |
| 3. New maximum contract amount:             | \$92,869,514.36 |                 |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

DMV is seeking to move core business systems to the cloud and allow for the public to access DMV services through the cloud. DMV is emphasizing a complete overhaul of services offerings that focus on a new way of business.

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

There are no State employees available to perform 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?

The State of Nevada has a Statewide contract with Carahsoft which allows agencies to utilize the services under contract number 99SWC-NV18-421.

- 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 | jpeat    | 09/05/2024 12:09:07 PM |
| Division Approval       | bmusselm | 09/05/2024 14:24:28 PM |
| Department Approval     | bmusselm | 09/05/2024 14:24:38 PM |

|                           |          |                        |
|---------------------------|----------|------------------------|
| Contract Manager Approval | susanh29 | 09/05/2024 15:06:57 PM |
| EITS Approval             | ljean    | 09/13/2024 08:48:08 AM |
| Budget Analyst Approval   | vyoungb  | 10/07/2024 06:57:30 AM |
| BOE Agenda Approval       | bmacke1  | 10/07/2024 16:27:10 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](http://www.it.nv.gov) | Fax: (775) 687-9097

**MEMORANDUM**

**TO:** Julie Butler, Director, DMV  
Suzie Block, Administrator, MVIT, DMV  
Angela Smith, Administrator, ASD, DMV  
Molly Lennon, Administrator, Research and Project Management, DMV

**CC:** Tim Galluzi, State Chief Information Officer/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 – DMV – TIN 446 – *DMV Transformation Effort (System Technology Application Redesign Project) - 4716* – Update A – BA 4716

**DATE:** August 3, 2022

We have completed our review for the Department of Motor Vehicles' (DMV) – *DMV Transformation Effort (System Technology Application Redesign Project) - 4716* – TIN 446, Update A.

The submitted TIN, for an estimated value of \$59,467,790.00 in the FY22/FY23 biennium, \$66,909,580.23 in the FY24/FY25 biennium, and \$77,337,926.48 in FY26 (100% Highway Fund), is to replace the current aging client server application with a modernized Information Technology (IT) platform that is easy to configure and maintain, and to provide the necessary automated tools to test, monitor, troubleshoot, and accurately manage the system in real-time.

The existing client server application uses an IBM mainframe with Common Business Oriented Language (COBOL) that must be replaced to promote efficient collaboration with Nevada State Agencies, service providers, and vendors. This investment will provide more alternate service delivery methods to DMV's customers, including web-based transactions, mobile, and portal applications.

The agency considers the investment and final implementation to have an ongoing high security risk. The modernized solution will provide enhanced security, disaster recovery, fail-over capability, and provide

functionality to easily implement changes. The solution is subject to federal security and/or other security standards and 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 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: **29877**

|                                 |                                       |                    |  |
|---------------------------------|---------------------------------------|--------------------|--|
| Agency Name:                    | <b>DETR - REHABILITATION DIVISION</b> | Legal Entity Name: | <b>FIRST CLASS VENDING INC. DBA FIRST CLASS COFFEE SERVICE</b> |
| Agency Code:                    | <b>901</b>                            | Contractor Name:   | <b>FIRST CLASS VENDING INC. DBA FIRST CLASS COFFEE SERVICE</b> |
| Appropriation Unit:             | <b>3253-00</b>                        | Address:           | <b>3990 W NAPLES DR</b>  |
| Is budget authority available?: | <b>Yes</b>                            | City/State/Zip     | <b>LAS VEGAS, NV 89103-5529</b>                                |
| If "No" please explain:         | Not Applicable                        | Contact/Phone:     | Michelle Marsh 702-597-9999                                    |
|                                 |                                       | Vendor No.:        | T29042488  |
|                                 |                                       | NV Business ID:    | NV20181040694  |

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 % | <b>X Other funding</b> | <b>100.00 % Revenue</b> |

Agency Reference #: RFP# 90DETR-S2877, 3911-28-BEN (JW)

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2028**Contract term: **4 years and 61 days**4. Type of contract: **Revenue Contract**Contract description: **N NV Vending**

5. Purpose of contract:

**This is a new revenue contract to provide ongoing vending and micro market services for blind and visually impaired operators within state buildings in northern Nevada.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00**

Other basis for payment: 25% commission rate on all vending items as well as a 15% commission rate on all micro-market items. Any other agreed applicable vending locations will be at a 15% commission rate. Commissions are based off of gross sales, less any applicable tax. Total revenue contract not to exceed \$400,000.00.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

Per NRS 426.630 through NRS 426.720 and the NAC 426.010 through NAC 426.400 in accordance with the Federal Randolph Sheppard Act Chapter 6A of Title 20, Business Enterprise of Nevada provides an operator and/or vendor to operate various vending locations in public locations across 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 will be working with the vendor to implement NRS 426.630-426.720 and the Randolph Sheppard Act (Chapter 6A of Title 20).

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):

First Class Vending Inc.  
Hustle Snacks  
Stick with Us Amusements

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 90DETR-S2877, 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: 08/27/2024 Anticipated re-bid date: 06/01/2028

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 Corrections

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

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

Not Applicable

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

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:

Chris Mazza , Administrative Services Officer III Ph: 702-486-8800

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | sruch    | 10/09/2024 17:27:14 PM |
| Division Approval         | cjacob   | 10/10/2024 06:53:39 AM |
| Department Approval       | cjacob   | 10/10/2024 06:53:42 AM |
| Contract Manager Approval | wcune1   | 10/10/2024 08:50:11 AM |
| Budget Analyst Approval   | Iramire7 | 10/15/2024 08:07:59 AM |
| BOE Agenda Approval       | mranki1  | 10/15/2024 10:22:03 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: **29807**

|   |                                       |                    |                                      |
|---|---------------------------------------|--------------------|--------------------------------------|
| Agency Name:  | <b>DETR - REHABILITATION DIVISION</b> | Legal Entity Name: | <b>WASHOE COUNTY SCHOOL DISTRICT</b> |
| Agency Code:  | <b>901</b>                            | Contractor Name:   | <b>WASHOE COUNTY SCHOOL DISTRICT</b> |
| Appropriation Unit:   | <b>3265-10</b>                        | Address:           | <b>PO BOX 30425</b>                  |
| Is budget authority available?:   | <b>No</b>                             | City/State/Zip     | <b>RENO, NV 89520-3425</b>           |
| If "No" please explain: This is contingent upon approval of the IFC work program #C68779. |                                       | Contact/Phone:     | <b>Trisha Lozano 775/333-3712</b>    |
|   |                                       | Vendor No.:        | <b>T40234300</b>                     |
|   |                                       | NV Business ID:    | <b>Governmental Entity</b>           |

To what State Fiscal Year(s) will the contract be charged? **2025-2028**

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

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| General Funds          | 0.00 %          | Fees          | 0.00 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: **3782-28-REHAB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2027**Contract term: **3 years and 60 days**4. Type of contract: **Interlocal Agreement**Contract description: **WCSD PAES Liaisons**

5. Purpose of contract:

**This is a new interlocal agreement to provide pre-employment transition services, work-based learning projects, job coaching, training, and professional development for students with disabilities by funding four Pre-Employment Transition Service Liaisons for the Washoe County School District. This contract is contingent upon IFC approval of work program #C68779.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$720,000.00**

Other basis for payment: Up to \$240,000.00 per School Year. \$60,000 per school year per Rehabilitation Liaison Specialist (max of four (4) Specialists). Invoiced quarterly by the contractor and approved by the State. Total Contract Not to Exceed: \$720,000.00

**II. JUSTIFICATION**

7. What conditions require that this work be done?

Workforce Innovation and Opportunity Act, Public Law 113-128 (2014) or WIOA requires 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 do not have the tools or training to provide 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: **Exempt (Per statute)**

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

NRS 277.180 - Interlocal 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:

This vendor has provided satisfactory services to the Rehabilitation and Education since 1999.

14. Is the contractor currently involved in litigation with the State 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:

Mechelle Merrill, Deputy Administrator of Programs Ph: 775-687-6862

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | sruch    | 10/08/2024 09:21:45 AM |
| Division Approval         | cjacob   | 10/08/2024 11:13:35 AM |
| Department Approval       | cjacob   | 10/08/2024 11:13:38 AM |
| Contract Manager Approval | wcune1   | 10/15/2024 13:07:41 PM |
| Budget Analyst Approval   | Iramire7 | 10/15/2024 13:35:46 PM |
| BOE Agenda Approval       | mranki1  | 10/16/2024 10:53:06 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: 29610

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: CARAHSOFT TECHNOLOGY CORPORATION

Contractor Name: CARAHSOFT TECHNOLOGY CORPORATION

Address: 11493 Sunset Hills Rd Suite 100

City/State/Zip: RESTON, VA 20190

Contact/Phone: Jessica Froelich 571-662-3352

Vendor No.: T27011089

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 #: 3885-26-WISS

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 12/12/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/30/2025

Contract term: 1 year and 18 days

4. Type of contract: Other (include description): MSA Work Plan

Contract description: D&B

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV24-17504 which provides cloud services. This service agreement provides 25 user licenses to the Dun and Bradstreet Data Cloud through a user interface to accelerate business engagement and assist with layoff aversion and employer outreach.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$169,750.00

Payment for services will be made at the rate of \$169,750.00 per year

Other basis for payment: As invoiced by the vendor and approved by the State. Total Contract not to exceed: \$169,750.00

II. JUSTIFICATION

7. What conditions require that this work be done?

DETR requires a platform to conduct queries which will assist Program Coordinators and EmployNV Hub staff to assist with layoff aversion and employer outreach.

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 expertise 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 Applicable

b. Solicitation Waiver: **Not Applicable**

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

This software was selected in conformance with statewide contract 99SWC-NV24-17504.

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 has active agreements with Purchasing and multiple 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 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   | kwoodwar | 09/18/2024 07:36:37 AM |
| Division Approval         | cjacob   | 09/18/2024 08:15:26 AM |
| Department Approval       | cjacob   | 09/18/2024 08:15:29 AM |
| Contract Manager Approval | wcune1   | 09/18/2024 09:39:40 AM |
| EITS Approval             | ljea     | 09/20/2024 11:56:31 AM |
| Budget Analyst Approval   | mranki1  | 09/20/2024 14:52:18 PM |
| BOE Agenda Approval       | mranki1  | 09/20/2024 14:52:21 PM |
| BOE Final Approval        | Pending  |                        |



**STATE OF NEVADA  
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**M E M O R A N D U M**

**TO:** Christopher Sewell, Director, DETR  
Zachary Hoefling, Chief Financial Officer, DETR  
Laxmi Bokka, IT Chief Manager, DETR  
Kara Abe, ESD Program Chief, DETR  
Reba Sardari, ESD Program Specialist II, DETR  
Colleen McBirney ESD Program Specialist II, DETR

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DETR – TIN 600 – *Carahsoft / Dun and Bradstreet* – Update A – BA 4770

**DATE:** August 14, 2024

We have completed our review for the Department of Employment, Training, and Rehabilitation’s (DETR) – *Carahsoft / Dun and Bradstreet* – Update A – TIN 600.

The submitted TIN, for an estimated value of \$174,450.00 in the FY24/FY25 biennium (100% Workforce Innovation and Opportunity Act (WIOA) grant funds), is to update cost information.

Currently, DETR relies on businesses to self-report Worker Adjustment and Retraining Notifications

(WARN) on plant closings and layoffs, which has proven to be an inefficient and unreliable system.

The Dun & Bradstreet EconoVue platform is a reliable solution offered through the Carahsoft Statewide Contract. It is an off-the-shelf product requiring minimal modification to work with DETR's existing systems. It has reporting capabilities that DETR will use to identify struggling businesses and offer services that are available through the Rapid Response and Trade programs. The platform could also assist DETR's Contributions Unit in the collection of fees and taxes that are in arrears, in addition to benefiting the Business Solutions Offices by providing data for outreach and service education. Other benefits include the TAA program using DUNS number reports to identify business relationships between corporate entities, such as hierarchies and linkages to assist with filing petitions with the Department of Labor, and identifying employers impacted by foreign trade.

The agency considers the investment and final implementation to have an ongoing low security risk, as it is a secure, subscription-based, SaaS solution hosted in the cloud.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: **29825**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: 8x8, Inc.

Contractor Name: **8x8, Inc.**Address: **675 Creekside Way**City/State/Zip: **Campbell, CA 95008**

Contact/Phone: Sean Barnett 209-692-0594

Vendor No.: T32009877

NV Business ID: NV20131450450

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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-S2536 tb 3906-28-DETR

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2028**Contract term: **3 years and 334 days**4. Type of contract: **Contract**Contract description: **Phone and IVR Update**

5. Purpose of contract:

**This is a new contract to provide ongoing phone system and interactive voice response modernization services.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,914,628.96**

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?

A telecommunications platform which is inclusive of a call center is necessary to complete business transactions with internal and external customers of the agency.

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

There is not an agency within the State that provides a CCaaS platform for telecommunications.

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):

CDW Government, Inc.  
8x8, Inc.b. Solicitation Waiver: **Not Applicable**



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

Pursuant to RFP #90DETR-S2536, 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: 11/06/2023 Anticipated re-bid date: 11/08/2027

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:

DETR - April 2020 through 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   | athomps8  | 10/02/2024 09:34:13 AM |
| Division Approval         | cjacob    | 10/02/2024 09:36:30 AM |
| Department Approval       | zhoefflin | 10/02/2024 09:37:19 AM |
| Contract Manager Approval | wcune1    | 10/02/2024 09:40:45 AM |
| EITS Approval             | ljean     | 10/03/2024 07:41:38 AM |
| Budget Analyst Approval   | Iramire7  | 10/09/2024 12:04:12 PM |
| BOE Agenda Approval       | mranki1   | 10/21/2024 16:05:12 PM |
| BOE Final Approval        | Pending   |                        |



**STATE OF NEVADA**  
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**M E M O R A N D U M**

**TO:** Christopher Sewell, Director, DETR  
Kristine Nelson, Chief Financial Officer, DETR  
Scott Jeffries, IT Manager III, DETR  
Chantel Rundell, IT Professional III, DETR

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
Sean Montierth, IT Chief, Computing Services Unit, OCIO  
Cameron Carey, IT Chief, Network Transport Services Unit, OCIO  
David Axtell, State Chief Enterprise Architect, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DETR – TIN 749 – *DETR Phone System and IVR Replacement FY24 – BA 3274*

**DATE:** August 11, 2023

We have completed our review for the Department of Employment, Training, and Rehabilitation's (DETR) – *DETR Phone System and IVR Replacement FY24 – TIN 749*.

The submitted TIN, for an estimated value of \$3,700,000.00 in the FY24/FY25 biennium, \$3,400,000.00 in the FY26/FY27 biennium, and an additional \$1,700,000.00 in FY28 (100% cost allocation table), is for a department wide phone system and Interactive Voice Response (IVR) application replacement.

DETR has adhered to the state's formal acquisition procedures and issued a Request for Proposal (RFP). The selected vendor is to provide services to implement and maintain a system designed to comprehensively meet DETR's business requirements, inclusive of training and ongoing support. During the COVID-19 Pandemic, DETR faced challenges with an obsolete phone and IVR system that had

exceeded its functional lifespan. In an urgent response, a contract was signed with a cloud-based virtual office and contact center vendor through NASPO. However, the expedited nature of this acquisition led to insufficiently specified requirements, resulting in the current system's failure to fully align with the department's needs.

This deficiency manifested in the present vendor's inability to provide the N-Way calling functionality essential for hosting Unemployment Insurance appeal hearings which has contributed to a significant degradation in call quality for the required number of callers. Vendor issues are disrupting DETR's efficiency and customer service.

This RFP will seek proposals from competent vendors capable of delivering solutions in alignment with the department's specific requirements. Through this structured and transparent method, DETR aims to methodically explore various options and select a vendor adept at fulfilling the department's needs.

Furthermore, the agency acknowledges the investment and final implementation as carrying an ongoing moderate security risk, as personal information will be transported, stored, and processed using the solution and it is subject to federal and/or other security standards. The implementation will encompass system interfacing, modifications to the current server environment, new phone handsets or VTC technology utilizing a cloud-based system, and upgraded or replaced WAN and LAN equipment, including wiring. Additionally, firewalls may be added, removed, or altered as a component of 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 OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: 29862

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B022 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Bamboo Health, Inc.

Contractor Name: Bamboo Health, Inc.

Address: 9901 Linn Station Road

City/State/Zip: Louisville, KY 40223

Contact/Phone: Sara White 502-815-3861

Vendor No.:

NV Business ID: NV20212301092

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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          | 12.00 % |
| X Federal Funds | 88.00 % |   | Bonds         | 0.00 %  |
| Highway Funds   | 0.00 %  |   | Other funding | 0.00 %  |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 11/19/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/18/2028

Contract term: 4 years

4. Type of contract: Contract

Contract description: PDMP License

5. Purpose of contract:

This is a new contract to provide licensing, support, and training for a prescription drug monitoring program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$3,060,710.00

Other basis for payment: Annual invoice; Yr1 \$761,000, Yr2 \$763,730, Yr3 \$766,542, Yr4 \$769,438.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 453.162 requires the Board and the Division shall cooperatively develop a computerized program to track each prescription for a controlled substance listed in schedule II, III, IV or V that is filled by a pharmacy that is registered with the Board or that is dispensed by a practitioner who is registered with the Board.  
NarxCare provides patient data from the program implemented pursuant to NRS 453.162 to help prevent the manage substance use disorder in patients receiving scheduled drugs.  
Intergration provides patient data from the program implemented pursuant to NRS 453.162 within the patient's electronic health record (EHR), electronic medical record (EMR, and pharmacy management systems.

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

The Prescription Drug Monitoring Program (PDMP) is a complex software system that must interface with several external platforms including but not limited to; healthcare provider electronic records, treatment facility availability, and a federal data exchange. Due to the complexity of data exchange and rapidly evolving state and federal requirements an enterprise system is not practical.

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 #: 241003**

**Approval Date: 10/04/2024**

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

This is the only vendor with a commercially available off the shelf product that will fulfill all state and federal requirements, as well as the only platform that will integrate will all platforms desired by the state related to the PDMP

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 provides the statewide VINE platform and statewide PDMP platform and provides exceptional services and products.

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

No

If "Yes", please provide details of the litigation 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   | kbains40 | 10/07/2024 08:22:15 AM |
| Division Approval         | kbains40 | 10/07/2024 08:22:17 AM |
| Department Approval       | kbains40 | 10/07/2024 08:22:19 AM |
| Contract Manager Approval | kbains40 | 10/07/2024 08:22:21 AM |
| EITS Approval             | ljean    | 10/07/2024 12:07:58 PM |
| Budget Analyst Approval   | stilley  | 10/21/2024 17:05:09 PM |
| BOE Agenda Approval       | stilley  | 10/21/2024 17:05:11 PM |





**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Dave Wuest, Executive Secretary, Pharmacy  
Kiran Bains, Finance Manager, Pharmacy

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – Pharmacy – TIN 1048 – *Prescription Durg Monitoring Program – Bamboo Health, Inc. – BA B022*

**DATE:** September 30, 2024

We have completed our review for the Nevada Board of Pharmacy (Pharmacy) — *Prescription Durg Monitoring Program – Bamboo Health, Inc. – TIN 1048*.

The submitted TIN, for an estimated value of \$761,000.00 in the FY24/FY25 biennium, \$1,530,277.00 in the FY26/FY27 biennium, and \$769,422.00 in FY28 (88% Federal Grant and 12% Agency Funds), is to develop a computerized program to track prescriptions for controlled substances.

Under NRS 453.162, the Nevada Boards and Division are required to collaboratively develop a computerized program to track prescriptions for controlled substances listed in schedules II, III, IV, and V. This program applies to pharmacies and practitioners registered with the Board.

Bamboo Health facilitates integration through its PMP Gateway service, allowing authorized Nevada healthcare organizations to directly request patient reports from the NV PMP. This partnership integrates

NV PMP data into electronic health records (EHR)s and pharmacy management systems via Appriss Health's PMP Gateway platform, equipping clinicians with real-time information to support informed prescribing decisions.

NarxCare offers a comprehensive platform that aggregates and analyzes prescription data from providers and pharmacies, delivering visual, interactive information alongside advanced analytic insights and risk scores. This enables healthcare teams to provide enhanced patient care and safety. NarxCare also connects patients to treatment resources when needed. All this information can be accessed within clinical workflows via EHRs, pharmacy management systems, and the Nevada PMP website.

PMP AWARe includes unique features, such as the Mandatory Use Compliance Module, which is a configurable Tableau report. This module allows authorized users to assess prescriber compliance with state regulations regarding querying patients' prescription histories before issuing certain prescriptions. The module helps state administrators ensure compliance with Prescription Drug Monitoring Program (PDMP) requirements. Additionally, Nevada's PDMP AWARe platform incorporates a training module for the Board of Pharmacy, seamlessly integrated into the registration process.

There is no anticipated impact on statewide infrastructure from the implementation of these systems.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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

Purchasing Division

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

Purchasing Use Only:

Approval#: 241003@

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: |              |                         |
|    | STATE AGENCY NAME REQUIRED: Nevada State Board of Pharmacy  |              |                         |
|    | Contact Name and Title  | Phone Number | Email Address           |
|    | Kiran Bains, Finance Manager  | 77-850-1440  | k.bains@pharmacy.nv.gov |

|    |  |   |
|----|--|---|
| 1b | Vendor Information:                            |   |
|    | Vendor Name:                                   | Bamboo Health, Inc.                             |
|    | Contact Name:                                  | Sara White                                      |
|    | Complete Address:<br>City, State, and Zip Code | 9901 Linn Station Road,<br>Louisville, KY 40223 |
|    | Telephone Number:                              | 502-815-3861                                    |
|    | Email Address:                                 | Swhite@bamboohealth.com                         |

|    |  |             |
|----|--|-------------|
| 1c | Type of Waiver Requested – Check the appropriate type: |             |
|    | Sole or Single Source:                                 | Sole Source |
|    | 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:        | X                    |
|    | Contract:                         | Start Date: | 11/19/2024 | End Date: 11/18/2028 |

|    |                     |                      |
|----|---------------------|----------------------|
| 1f | Funding:            |                      |
|    | State Appropriated: |                      |
|    | Federal Funds:      |                      |
|    | Grant Funds:        | Narxcare and Gateway |

|  |                  |                           |
|--|------------------|---------------------------|
|  |                  |                           |
|  | Other (Explain): | Licensee Fees - PMP AWARe |

Purchasing Use Only:

Approval #:

241003 @

|    |  |
|----|--|
|    | <b>Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:</b>   |
| 1g | <p>\$380,710.00 for PMP AWARe</p> <p>\$708,000.00 for Narxcare</p> <p>\$1,972,000.00 for Gateway</p> <p>\$3,060,710.00 total</p> |

|   |  |
|---|--|
|   | <b>Provide a description of work/services to be performed or services with goods to be purchased:</b>  |
| 2 | <p><i>Bamboo Health will provide continued licensing to their commercially available off-the-shelf software for a prescription drug monitoring program, PMP AWARe.</i></p> <p><i>Bamboo Health will provide continued licensing to their commercially available off-the-shelf software for NarxCare.</i></p> <p><i>Bamboo will provide continued licensing for their commercially available off-the-shelf software for Gateway.</i></p> <p><i>The board intends to amend contract 28189, once this contractor is approved. This contractor provides a proprietary Mandatory Use Compliance Module which allows PDMP administrators to monitor a prescriber's compliance with state requirements to query a patient's prescription history prior to writing certain prescriptions.</i></p> <p><i>Our records indicate the first contract with this vendor began December 3<sup>rd</sup> 2016. This contract provides a user portal to upload controlled substance dispensing data along with the ability for practitioners to view this data, prior to prescribing. On April 13th 2021, Board of Examiners approved a contract to provide these same services under contract number 23763. On November 20th 2018, the NarxCare contract began. The NarxCare contract provides patient data from the program implemented pursuant to NRS 453.162 to help prevent and manage substance use disorder in patients receiving controlled substance. On September 14th 2021, the Board of Examiners approved contract number 24534. On November 20th 2018, the Gateway contract began. The Gateway contract provides data from the program implemented pursuant to NRS 453.162 within the patient's electronic health record (EHR), electronic medical record (EMR), and pharmacy management systems. On September 14th 2021, the Board of Examiners approved contract number 24551. On September 18th 2023, the Governor's Finance Office Budget Division approved contract 28189. This contract allowed authorized users the ability to view a prescriber's compliance with state requirements to query patients' prescription history prior to writing certain prescriptions.</i></p> |

|   |  |
|---|--|
|   | <b>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</b>   |
| 3 | <p><u>PMP AWARe:</u></p> <p><i>PMP AWARe provides many unique and proprietary features and functions not found with any other PDMP software solution. Below are some of the features available to Nevada PDMP that can only be found within PMP AWARe:</i></p> <p><i>1. Out-of-the-box connectivity to PMP InterConnect (PMPI) – PMP AWARe maintains existing PMPI connectivity as a COTS feature.</i></p> |

2. *Real-time PMPi system updates to new state access – PMP AWARe provides automated state data sharing control changes whenever a new state is added to PMPi. No other PDMP solution has this functionality.*
3. *PMP AWARe is the only Prescription Monitoring Program solution that has the ability to incorporate authorized user activity such as queries from Electronic Health Record and Pharmacy Management System integration into the PDMP portal.*
4. *PMP AWARe's data collection is the only solution that supports large, multi-state dispensing organizations by providing the organizations with a single account to comply with data submission requirements to all the states that utilize the PMP AWARe software. The resulting benefit for the Nevada Board of Pharmacy is that many of the dispensers operating in Nevada have existing accounts with PMP AWARe and therefore can dispense in Nevada through a "one stop shop" approach.*
5. *Ability to begin processing pharmacy claim records once received during data collection – Unlike other solutions, PMP AWARe begins processing incoming pharmacy claims data in near real-time vs. the typical batching process.*
6. *PMP AWARe is the only solution that supports the validation of queries from Electronic Health Records and Pharmacy Management Systems to ensure that all Nevada users have an active account with the PMP.*
7. *Pre-packaged business intelligence tools – PMP AWARe maintains two pre-packaged BI tools as a COTS feature.*
8. *Administrative and requestor dashboards – PMP AWARe provides administrative and requestor dashboards for easy access to system statistical data.*
9. *Pharmacy compliance module – Allows PDMP administrators to track pharmacy submissions and pharmacies that are out of data submission compliance.*

#### NarxCare:

*Bamboo Health, in partnership with the Nevada State Board of Pharmacy has implemented the comprehensive Enterprise NarxCare substance use disorder platform to ensure that prescribers and dispensers are best equipped to support the health and well-being of their patients. NarxCare aids care teams in clinical decision-making, provides support to help prevent or manage SUD, and empowers the State of Nevada with the comprehensive platform it needs to take the next step in the battle against opioid addiction.*

*NarxCare is a comprehensive platform that aggregates and analyzes prescription information from providers and pharmacies and presents visual, interactive information, as well as advanced analytic insights, complex risk scores and more to help physicians, pharmacists and care teams provide better patient care and safety. Furthermore, NarxCare provides tools and resources that support patients' needs and connects them to treatment, if necessary. This information, insight and functionality could all be accessed in clinical workflow via EHRs and pharmacy management systems, as well as through the Nevada PMP website.*

*The deployment of Bamboo Health's NarxCare Platform was supported by the Health Information Technology for Economic and Clinical Health (HITECH) Act administered by the Centers for Medicare and Medicaid Services (CMS).*

*This information, insight and functionality is all accessed through the Prescription Drug Monitoring Program (PDMP) portal as well as through existing electronic health records (EHR) or pharmacy management systems, so there is no logging in or out of secondary websites or trying to manage usernames or passwords. NarxCare can only be delivered into workflow via the PMP Gateway integration solution, which is also provided by Bamboo and is a critical component of the State of Nevada's opioid strategy.*

*Bamboo Health is also the only qualified vendor to provide the modifications to the hosting environment and the upgrades to the software that are required to fully support Nevada PMP users and comply with the current legislative requirements for the system. These claims are supported by the fact that the software that supports Nevada PMP is the Intellectual Property of Bamboo Health. Since Bamboo Health owns the Intellectual Property for Nevada PMP, it also owns the source code of the software.*

*As the owner of the software source code, Bamboo Health, is the only company that is authorized to access the code for any changes or modification to the PMP software. Under the Software Maintenance and Support Contract, the State of Nevada is entitled to request Bamboo Health, to correct software errors, implement certain minor software changes, and direct users to the Bamboo Helpdesk for support issues. These deliverables can only be served by Bamboo Health.*

*In addition, ownership of the Intellectual Property of the Nevada PMP software puts Bamboo Health, in the unique position of being able to provide the changes in source code and infrastructure that will be required to upgrade the hosting environment of the Nevada PMP. These changes would not be possible for an entity other than the owner of the Nevada PMP software Intellectual Property.*

**PMP Gateway:**

*As the software vendor for the Prescription Monitoring Program (PMP) software currently in place Bamboo Health, is the only qualified vendor to provide statewide PMP Gateway integration to integrate the NarxCare Platform, which is the designated NV PMP platform, into the Electronic Health Records (EHRs) of authorized NV healthcare providers.*

*PMP Gateway is the industry standard for supporting efficient and secure real-time access to PMP data and analytics directly within clinical workflow. This managed service platform provides authorized health care providers with comprehensive connectivity, clinical decision support, patient support and engagement, and care coordination. Over 130 EHRs (including all of the largest), every national pharmacy chain, and most pharmacy system vendors have established connectivity to integrate PMP into their clinical workflow via Bamboo Health. With PMP Gateway, PMP data, analytics, tools and resources are now integrated into physician and pharmacist workflow through EHRs and pharmacy management systems in 40 states, with over 90 million transactions completed each month. PMP Gateway is the only integration solution to deliver NarxCare within the clinical workflow. Bamboo Health is currently contracted with NV to provide NarxCare as an enhancement to the NV PMP platform.*

**Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:**

4

*PMP AWAxE provides many unique and proprietary features and functions not found with any other PDMP software solution that Bamboo offers.*

*Each year over 3.6 million controlled substance prescriptions are dispensed to Nevada residents. Every practitioner prescribing a controlled substance to a resident of Nevada must use the State's PDMP system. PMP AWAxE is the only system that offers NarxCare, and Gateway is an integral part of a customized solution. No other vendors offers an off the shelf solution. These platforms allow*

practitioners to view prescriptions dispensed in Nevada and over 40 other states. The benefit of Gateway interoperability is that it allows users to view real-time controlled substance dispensing data within their own electronic record system, eliminating the need to log into a separate system to view the data. This leads to quicker treatment for patients and an increase in PDMP usage. Gateway also allows the State to share our dispensing data with other states under our Statutory rules, which leads to better pharmaceutical care in other states. There are no other vendors offering any solution that will integrate with the existing PMP that encompasses all the integration and reporting requirements of NRS, federal funding sources, and the Board.

|   |   |            |    |
|---|---|------------|----|
|   | 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.   |            |    |
|   |   |            |    |
|   | b. <u>If not</u> , why were alternatives not evaluated?   |            |    |
|   | <p>PMP AWARe provides many unique and proprietary features and functions not found with any other PDMP software solution that Bamboo offers.</p> <p>Each year over 3.6 million controlled substance prescriptions are dispensed to Nevada residents. Every practitioner prescribing a controlled substance to a resident of Nevada must use the State's PDMP system. PMP AWARe is the only system that offers NarxCare, and Gateway is an integral part of a customized solution. No other vendors offers an off-the-shelf solution. These platforms allow practitioners to view prescriptions dispensed in Nevada and over 40 other states. The benefit of Gateway interoperability is that it allows users to view real-time controlled substance dispensing data within their own electronic record system, eliminating the need to log into a separate system to view the data. This leads to quicker treatment for patients and an increase in PDMP usage. Gateway also allows the State to share our dispensing data with other states under our Statutory rules, which leads to better pharmaceutical care in other states. There are no other vendors offering any solution that will integrate with the existing PMP that encompasses all the integration and reporting requirements of NRS, federal funding sources, and the Board.</p> |            |    |

Purchasing Use Only:

Approval #:

241003 @

|                        |   |   |                                 |                   |   |        |    |
|------------------------|---|---|---------------------------------|-------------------|---|--------|----|
| 6                      | Has the agency purchased these services/services with goods in the past? Check One:   |   |                                 |                   |   | Yes    | No |
|                        | NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <b><u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u></b>   |   |                                 |                   |   | X      |    |
|                        | a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information must be provided along with the CETS contract number(s) associated with each: |   |                                 |                   |   |        |    |
|                        | Term  |   | Value                           | Short Description | Provide Type of Procurement<br>RFP#, RFQ#, Waiver # | CETS # |    |
|                        | Start Date  | End Date  |                                 |                   |   |        |    |
|                        | 11/20/2018  | 11/19/2019                                      | \$177,000 <sup>lic</sup>        | PDMP NarxCare     | Waiver #210703                                      | 24534  |    |
|                        | 11/20/2019  | 11/19/2020                                      | \$177,000 <sup>lic</sup>        |                   |   |        |    |
|                        | 11/20/2020  | 11/19/2024                                      | \$708,000                       |                   |   |        |    |
|                        | 11/20/2018  | 11/19/2019                                      | \$493,000 <sup>lic</sup>        | PDMP Gateway      | Waiver #210704                                      | 24551  |    |
|                        | 11/20/2019  | 11/19/2020                                      | \$493,000 <sup>lic</sup>        |                   |   |        |    |
| 11/20/2020             | 11/19/2024  | \$1,972,000                                     |                                 |                   |   |        |    |
| 12/03/2016             | 12/02/2017  | \$91,000  | PDMP License                    | Waiver #201209    | 23763   |        |    |
| 12/03/2017             | 12/02/2018  | \$91,000  |                                 |                   |   |        |    |
| 12/03/2018             | 12/02/2019  | \$91,000  |                                 |                   |   |        |    |
| 12/03/2019             | 12/02/2020  | \$91,000  |                                 |                   |   |        |    |
| 12/03/2020             | 12/02/2024  | \$412,000 <sup>paid to the 20460 - 92,000</sup> |                                 |                   |   |        |    |
| 10/16/2023<br>07/18/22 | 12/31/2026  | \$67,500 <sup>90,000 - 22,500</sup>             | Mandatory Use Compliance Module | Waiver #230308    | 28189   |        |    |
|                        |   | \$  |                                 |                   |   |        |    |

|   |  |
|---|--|
| 7 | What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?  |
|   | The agency has expended significant resources and time which would not be recoverable to implement the system currently in place. No other vendor offers a software program that meets the statutory, federal, and functional requirements for Nevada. |

|   |  |
|---|--|
| 8 | What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?   |
|   | The Board previously contracted with another vendor which was chosen through the RFP process to create a customized PDMP program for Nevada. The custom-built system was both more expensive and less capable than the COTS product provided by Bamboo. Other non-successful RFP respondents were less capable and/or more expensive. Additionally, the COTS product provided by Bamboo is compatible with other programs and interfaces required by NRS, federal funding agencies, and the Board. More recently through our interactions with the Department of Justice and every other state, we have determined that each state either utilizes this vendor for their PDMP or has built and maintained their only PDMP platform. Building and maintaining our own platform would be cost prohibitive. There is no other COTS product available with the features needed at this cost. |

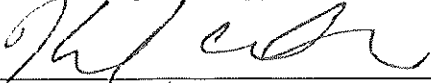
#2410030

|   |   |     |    |
|---|---|-----|----|
| 9 | Will this purchase obligate the State to this vendor for future purchases? Check One:   | Yes | No |
|   | <u>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>   | X   |    |
|   | <p>a. If yes, please provide details regarding future obligations or needs.</p> <p><i>Bamboo Health is our current PMP AWARD Vendor and will continue with this service/contract in future years. Alternatively, if resources and capital become available to build and maintain our own PDMP we will look at that possibility.</i></p> |     |    |

|                             |  |
|-----------------------------|--|
| <i>Purchasing Use Only:</i> |  |
| Approval #:                 |  |

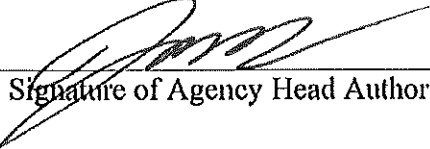
#241003@

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

  
 Signature of Agency Representative Initiating Request

Kiran Bains  
 Print Name of Agency Representative Initiating Request

10/04/2024  
 Date

  
 Signature of Agency Head Authorizing Request

J. David Wuest  
 Print Name of Agency Head Authorizing Request

10/4/24  
 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 Cindy Stoeffler at 775-684-0173 or email at [cestoeffler@admin.nv.gov](mailto:cestoeffler@admin.nv.gov).

**NOTE:** *If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.*



Approved by:

  
 Administrator, Purchasing Division or Designee

10/4/24  
 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: 29866

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B022 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: KANDT LAW PLLC

Contractor Name: KANDT LAW PLLC

Address: 1329 U.S. Highway 395 N Ste. 10-121

City/State/Zip: Gardnerville, NV 89410

Contact/Phone: William Brett Kandt 775-232-1896

Vendor No.:

NV Business ID: NV20222586267

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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          | 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 11/30/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/29/2026

Contract term: 1 year and 364 days

4. Type of contract: Contract

Contract description: Legal Services

5. Purpose of contract:

This is a new contract to provide legal and hearing officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$360,000.00

Payment for services will be made at the rate of \$104.00 per Hour

Other basis for payment: Monthly Invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

Contractor will support the Nevada State Board of Pharmacy by prosecuting administrative cases, representing the Board in litigation, drafting regulations, advising on legislative matters, and serving as a hearing officer pursuant to NRS 639.081.

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

Mr. Kandt has 30 of legal experience representing the State of Nevada, as well as unique institutional knowledge and expertise in pharmacy law and in the State Board of Pharmacy's operations which is not possessed by current State employees and can represent the Board in instances when State attorneys have a conflict of interest.

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:

Contractor was engaged under contract with Nevada State Board of Pharmacy from November 30, 2022 to November 29, 2024 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   | kbains40 | 10/07/2024 10:30:44 AM |
| Division Approval         | kbains40 | 10/07/2024 10:30:49 AM |
| Department Approval       | kbains40 | 10/07/2024 10:30:53 AM |
| Contract Manager Approval | kbains40 | 10/09/2024 09:14:46 AM |
| Budget Analyst Approval   | stilley  | 10/15/2024 12:14:19 PM |
| BOE Agenda Approval       | stilley  | 10/15/2024 12:14:22 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  | BLUE WHALE ABA, LLC                   | 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 - 10/30/2028  | Contract # 29864                      |                         |              |   |
| 2.    |                       | VARIOUS STATE AGENCIES  | CROP JET AVIATION LLC                 | OTHER: VARIOUS AGENCIES | \$1,000,000  |   |
|       | Contract Description: | This is the second amendment to the original contract which provides pest application, aerial seeding, rotorcraft aerial seeding, and herbicide and pesticide applications. This amendment increases the maximum amount from \$1,000,000 to \$2,000,000 due to the increased need for these services.   |                                       |                         |              |   |
|       | Term of Contract:     | 11/09/2021 - 06/07/2025   | Contract # 24831                      |                         |              |   |
| 3.    |                       | VARIOUS STATE AGENCIES  | HOPE, LOVE, AND DREAM, INC.           | OTHER: VARIOUS AGENCIES | \$7,400,000  |   |
|       | Contract Description: | This is a new contract to provide ongoing case management, counseling, early intervention, educational tutoring and education support, marriage and family therapy, mental health, psychology, social worker, and substance abuse counseling services.  |                                       |                         |              |   |
|       | Term of Contract:     | Upon Approval - 10/30/2028  | Contract # 29766                      |                         |              |   |
| 4.    |                       | VARIOUS STATE AGENCIES  | INSIGHT COUNSELING & WELLNESS LLC     | OTHER: VARIOUS AGENCIES | \$3,400,000  |   |
|       | Contract Description: | This is a new contract to provide ongoing case management, counseling, marriage and family therapy, and mental health and substance abuse counseling services.  |                                       |                         |              |   |
|       | Term of Contract:     | Upon Approval - 10/30/2028  | Contract # 29865                      |                         |              |   |
| 5.    |                       | VARIOUS STATE AGENCIES  | LAS VEGAS CARING PCA, LLC             | OTHER: VARIOUS AGENCIES | \$1,000,000  |   |
|       | Contract Description: | This is a new contract to provide ongoing personal care and senior care services.   |                                       |                         |              |   |
|       | Term of Contract:     | Upon Approval - 10/30/2028  | Contract # 29869                      |                         |              |   |
| 6.    |                       | VARIOUS STATE AGENCIES  | POINT QUEST THERAPEUTIC SERVICES, LLC | OTHER: VARIOUS AGENCIES | \$10,000,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing applied behavioral analysis, autism treatment assistance program, behavioral support, counseling, early intervention, educational tutoring and education support, mental health, occupational therapy, physical therapy, psychology, social worker and speech pathology, therapy and counseling services. |                                       |                         |              |   |
|       | Term of Contract:     | Upon Approval - 10/30/2028  | Contract # 29867                      |                         |              |   |

# MASTER SERVICE AGREEMENT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                               | FUNDING SOURCE          | AMOUNT       | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|-------------------------|--------------|---|
| 7.    |                       | VARIOUS STATE AGENCIES  | SHIELDS THERAPY SOLUTIONS, LLC           | OTHER: VARIOUS AGENCIES | \$10,000,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing applied behavioral analysis; autism treatment assistance; behavioral support; counseling; early intervention; job development; mental health; pediatric; pre-employment; rehabilitation; safe-housing provider; social worker; and speech pathology, therapy and counseling services. |  |                         |              |   |
|       |                       | Term of Contract:   | Upon Approval - 10/30/2028               | Contract # 29870        |              |   |
| 8.    |                       | VARIOUS STATE AGENCIES  | TILTONS THERAPY INC                      | OTHER: VARIOUS AGENCIES | \$2,000,000  |   |
|       | Contract Description: | This is a new contract to provide ongoing occupational therapy, physical therapy, speech pathology, therapy and counseling services.  |  |                         |              |   |
|       |                       | Term of Contract:   | Upon Approval - 10/30/2028               | Contract # 29765        |              |   |
| 9.    |                       | VARIOUS STATE AGENCIES  | TRUCKEE MEADOWS FIRE PROTECTION DISTRICT | OTHER: VARIOUS AGENCIES | \$21,616,000 |   |
|       | Contract Description: | This is a new contract to provide services that reduce fire fuels and vegetation.   |  |                         |              |   |
|       |                       | Term of Contract:   | Upon Approval - 07/08/2028               | Contract # 29761        |              |   |
| 10.   |                       | VARIOUS STATE AGENCIES  | WHOLE DIETETICS LLC                      | OTHER: VARIOUS AGENCIES | \$100,000    |   |
|       | Contract Description: | This is a new contract to provide ongoing dietician and nutrition services.   |  |                         |              |   |
|       |                       | Term of Contract:   | Upon Approval - 10/30/2028               | Contract # 29868        |              |   |

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: 29864

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: Blue Whale ABA, LLC

Contractor Name: Blue Whale ABA, LLC

Address: 2920 S Rainbow Boulevard Suite 180

City/State/Zip: Las Vegas, NV 89146

Contact/Phone: Jinyu Zhang 702-600-0099

Vendor No.: T29049238

NV Business ID: NV20232891351

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15796

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/30/2028

Contract term: 3 years and 364 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?

**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   | Ideloach | 10/08/2024 11:06:17 AM |
| Division Approval         | Ideloach | 10/08/2024 11:06:19 AM |
| Department Approval       | Ideloach | 10/08/2024 11:06:22 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:14:52 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 06:33:27 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:14:17 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 CONTRACT

1. Contract Number: 24831

Amendment Number: 2

Agency Name: MSA MASTER SERVICE AGREEMENTS

Legal Entity Name: CROP JET AVIATION LLC

Agency Code: MSA

Contractor Name: CROP JET AVIATION LLC

Appropriation Unit: 9999 - All Categories

Address: 1921 South 1700 East

Is budget authority available?: Yes

City/State/Zip: GOODING, ID 83330

If "No" please explain: Not Applicable

Contact/Phone: George J. Parker III 208-358-1802

Vendor No.: T27042988

NV Business ID: NV20191405677

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 #: RFQ 99SWC-S1426 NF

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 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/07/2025

Contract term: 3 years and 210 days

4. Type of contract: MSA

Contract description: Fire Fuels Reduction

5. Purpose of contract:

This is the second amendment to the original contract which provides pest application, aerial seeding, rotorcraft aerial seeding, and herbicide and pesticide applications. This amendment increases the maximum amount from \$1,000,000 to \$2,000,000 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: | \$400,000.00   | \$400,000.00   | \$400,000.00    | Yes - Action |
| a. Amendment 1:                             | \$600,000.00   | \$600,000.00   | \$600,000.00    | Yes - Action |
| 2. Amount of current amendment (#2):        | \$1,000,000.00 | \$1,000,000.00 | \$1,000,000.00  | Yes - Action |
| 3. New maximum contract amount:             | \$2,000,000.00 |                |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

To reduce the risk of wildfire, fuels reduction and other services must be completed in various locations.

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):

b. Solicitation Waiver: **Not Applicable**

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

This RFQ is being awarded to 23 vendors that qualified in the various scopes of work.

d. Last bid date: Anticipated re-bid date: 04/07/2025

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 is party to statewide contract 99SWC-NV22-10726.

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

**No** If "Yes", please provide details of the litigation 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   | rvradenb | 10/09/2024 09:20:53 AM |
| Division Approval         | rvradenb | 10/09/2024 09:21:34 AM |
| Department Approval       | ldeloach | 10/09/2024 09:43:17 AM |
| Contract Manager Approval | nfese1   | 10/10/2024 10:06:25 AM |
| Budget Analyst Approval   | mbro28   | 10/16/2024 07:30:16 AM |
| BOE Agenda Approval       | stilley  | 10/21/2024 17:44:24 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: 29766

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, Love, and Dream, Inc.

Contractor Name: Hope, Love, and Dream, Inc.

Address: 1491 Polaris Parkway Suite 216

City/State/Zip: Columbus, OH 43240

Contact/Phone: Dr. Domonique Rice 740-526-1071

Vendor No.: T32016631

NV Business ID: NV20243193933

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15797

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/30/2028

Contract term: 3 years and 364 days

4. Type of contract: MSA

Contract description: Direct Client Srvcs

5. Purpose of contract:

This is a new contract to provide ongoing case management, counseling, early intervention, educational tutoring and education support, marriage and family therapy, mental health, psychology, social worker, and substance abuse counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$7,400,000.00

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?

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   | Ideloach | 10/08/2024 11:09:28 AM |
| Division Approval         | Ideloach | 10/08/2024 11:09:32 AM |
| Department Approval       | Ideloach | 10/08/2024 11:09:35 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:14:25 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 06:01:57 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:17:42 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 CONTRACT

1. Contract Number: 29865

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 Counseling & Wellness LLC

Contractor Name: Insight Counseling & Wellness LLC

Address: 12232 Sea Voyage Avenue

City/State/Zip: Las Vegas, NV 89138

Contact/Phone: Rowell Laino 702-350-1980

Vendor No.: PENDING

NV Business ID: NV20211993143

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15786

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/30/2028

Contract term: 3 years and 364 days

4. Type of contract: MSA

Contract description: Direct Client Srvcs

5. Purpose of contract:

This is a new contract to provide ongoing case management, counseling, marriage and family therapy, and mental health and substance abuse counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$3,400,000.00

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?

**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   | Ideloach | 10/08/2024 11:13:49 AM |
| Division Approval         | Ideloach | 10/08/2024 11:13:52 AM |
| Department Approval       | Ideloach | 10/08/2024 11:13:54 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:15:16 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 05:46:53 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:20:56 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 CONTRACT**1. Contract Number: **29869**

|                                 |                                      |                    |                                    |
|---------------------------------|--------------------------------------|--------------------|------------------------------------|
| Agency Name:                    | <b>MSA MASTER SERVICE AGREEMENTS</b> | Legal Entity Name: | Las Vegas Caring PCA, LLC          |
| Agency Code:                    | <b>MSA</b>                           | Contractor Name:   | <b>Las Vegas Caring PCA, LLC</b>   |
| Appropriation Unit:             | <b>9999 - All Categories</b>         | Address:           | <b>6166 S. Sandhill Rd Ste 120</b> |
| Is budget authority available?: | <b>Yes</b>                           | City/State/Zip     | <b>Las Vegas, NV 89120</b>         |
| If "No" please explain:         | Not Applicable                       | Contact/Phone:     | Crystal Contreras 702-344-6862     |
|                                 |                                      | Vendor No.:        | T29048446                          |
|                                 |                                      | NV Business ID:    | NV20201914934                      |

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 % | <b>X</b> Other funding | <b>100.00 % Various Agencies</b> |

Agency Reference #: S1737-RV 99SWC-VQ15840

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/30/2028**Contract term: **3 years and 364 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 senior care services.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00****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.**

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   | Ideloach | 10/08/2024 11:17:05 AM |
| Division Approval         | Ideloach | 10/08/2024 11:17:07 AM |
| Department Approval       | Ideloach | 10/08/2024 11:17:10 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:16:11 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 05:42:40 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:22:11 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: **29867**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: Point Quest Therapeutic Services, LLC

Contractor Name: **Point Quest Therapeutic Services, LLC**Address: **9355 E Stockton Boulevard Suite 225**City/State/Zip: **Elk Grove, CA 95624**

Contact/Phone: Dayna Thomas 916-390-9699

Vendor No.: T32016514

NV Business ID: NV20243162230

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15840

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/30/2028**Contract term: **3 years and 364 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 program, behavioral support, counseling, early intervention, educational tutoring and education support, mental health, occupational therapy, physical therapy, psychology, social worker and speech pathology, therapy and counseling 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?

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   | Ideloach | 10/08/2024 11:22:48 AM |
| Division Approval         | Ideloach | 10/08/2024 11:22:51 AM |
| Department Approval       | Ideloach | 10/08/2024 11:22:53 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:15:48 PM |
| Budget Analyst Approval   | mbro28   | 10/16/2024 07:35:44 AM |
| BOE Agenda Approval       | stilley  | 10/21/2024 17:36:24 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 CONTRACT**1. Contract Number: **29870**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: Shields Therapy Solutions, LLC

Contractor Name: **Shields Therapy Solutions, LLC**Address: **4660 South Eastern Avenue Suite 108A**City/State/Zip: **Las Vegas, NV 89119**

Contact/Phone: Robert Plowden 720-746-9254

Vendor No.: PENDING

NV Business ID: NV20243146616

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15882

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/30/2028**Contract term: **3 years and 364 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; behavioral support; counseling; early intervention; job development; mental health; pediatric; pre-employment; rehabilitation; safe-housing provider; social worker; and speech pathology, therapy and counseling 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?

**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   | Ideloach | 10/08/2024 11:25:52 AM |
| Division Approval         | Ideloach | 10/08/2024 11:25:55 AM |
| Department Approval       | Ideloach | 10/08/2024 11:25:58 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:16:41 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 07:40:44 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:12:42 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 CONTRACT

1. Contract Number: 29765

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: TILTONS THERAPY INC

Contractor Name: TILTONS THERAPY INC

Address: 11091 Kilkerran Court

City/State/Zip: Las Vegas, NV 89141

Contact/Phone: Casey Melvin 702-768-0491

Vendor No.: T32015244

NV Business ID: NV20191332781

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15800

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/30/2028

Contract term: 3 years and 364 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, speech pathology, therapy and counseling services.

6. NEW CONTRACT

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

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   | Ideloach | 10/08/2024 11:29:44 AM |
| Division Approval         | Ideloach | 10/08/2024 11:29:46 AM |
| Department Approval       | Ideloach | 10/08/2024 11:29:49 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:13:59 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 06:30:50 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:16:07 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: 29761

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: Truckee Meadows Fire Protection District

Contractor Name: Truckee Meadows Fire Protection District

Address: 3663 Barron Way

City/State/Zip: Reno, NV 89511

Contact/Phone: Adam Crichton 775-737-8782

Vendor No.: T32009979

NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

General Funds0.00 %

Fees0.00 %

Federal Funds0.00 %

Bonds0.00 %

Highway Funds0.00 %

X Other funding100.00 % Various Agencies

Agency Reference #: RFQ 99SWC-S818 NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? Yes

b. other effective date: NA

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/08/2028

Contract term: 3 years and 250 days

4. Type of contract: MSA

Contract description: Fire Fuels Reduction

5. Purpose of contract:

This is a new contract to provide services that reduce fire fuels and vegetation.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$21,616,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?

To reduce the risk of wildfires, fuels and vegetation in various locations throughout the state.

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):

Eureka Mill Company  
Battle Born Tree  
Cross Check Services

b. Solicitation Waiver: Not Applicable

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

This RFQ has been awarded to 26 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 not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

**Truckee Meadows Fire Protection District is exempt.**

16. a. Is 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.

**Truckee Meadows Fire Protection District is exempt.**

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.

**Truckee Meadows Fire Protection District is exempt.**

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer II Ph: 775-531-3319

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | rvradenb | 10/08/2024 08:12:07 AM |
| Division Approval         | rvradenb | 10/08/2024 08:12:19 AM |
| Department Approval       | ldeloach | 10/08/2024 08:40:27 AM |
| Contract Manager Approval | nfese1   | 10/08/2024 12:26:05 PM |
| Budget Analyst Approval   | mbro28   | 10/16/2024 07:32:52 AM |
| BOE Agenda Approval       | stilley  | 10/21/2024 17:40:17 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 CONTRACT**1. Contract Number: **29868**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: Whole Dletetics LLC

Contractor Name: **Whole Dletetics LLC**Address: **1887 Whitney Mesa Dr. #1330**City/State/Zip: **Henderson, NV 89014**

Contact/Phone: Jill Splinter 702-883-2838

Vendor No.: T32016272

NV Business ID: NV20171346835

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 99SWC-VQ15525

2. Contract start date:

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

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/30/2028**Contract term: **3 years and 364 days**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

**This is a new contract to provide ongoing dietician and nutrition services.**

6. NEW CONTRACT

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

7. What conditions require that this work be done?

**The agency does not have the personnel to perform these services.**

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

**This is a specialized service that requires specially trained individuals to provide these services.**9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

b. Solicitation Waiver: **Not Applicable**

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

**This vendor was selected as part of a multi award solicitation 99SWC-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   | Ideloach | 10/08/2024 11:32:49 AM |
| Division Approval         | Ideloach | 10/08/2024 11:32:52 AM |
| Department Approval       | Ideloach | 10/08/2024 11:32:56 AM |
| Contract Manager Approval | ascaffid | 10/08/2024 12:13:18 PM |
| Budget Analyst Approval   | mbro28   | 10/11/2024 05:44:24 AM |
| BOE Agenda Approval       | stilley  | 10/14/2024 17:19:20 PM |
| BOE Final Approval        | Pending  |                        |



# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY                                  | CONTRACTOR        | FUNDING SOURCE  | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|--------|---|-------------------|---|----------|---|
| 1.    | 010    | GOVERNOR'S OFFICE<br>- ATHLETIC<br>COMMISSION | ADAM WYGNANSKI    | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE<br>10% | \$30,000 |   |
|       |        |   |                   |   |          |   |
|       |        |   |                   |   |          |   |
| 2.    | 010    | GOVERNOR'S OFFICE<br>- ATHLETIC<br>COMMISSION | CHARLES HINES III | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE<br>10% | \$30,000 |   |
|       |        |   |                   |   |          |   |
|       |        |   |                   |   |          |   |
| 3.    | 010    | GOVERNOR'S OFFICE<br>- ATHLETIC<br>COMMISSION | CHARVEZ FOGER     | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE<br>10% | \$30,000 | CURRENT<br>EMPLOYEE                           |
|       |        |   |                   |   |          |   |
|       |        |   |                   |   |          |   |
| 4.    | 010    | GOVERNOR'S OFFICE<br>- ATHLETIC<br>COMMISSION | EMETERIO FLOREZ   | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE<br>10% | \$30,000 |   |
|       |        |   |                   |   |          |   |
|       |        |   |                   |   |          |   |
| 5.    | 010    | GOVERNOR'S OFFICE<br>- ATHLETIC<br>COMMISSION | LEON MOREHEAD     | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE<br>10% | \$30,000 |   |
|       |        |   |                   |   |          |   |
|       |        |   |                   |   |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY   | CONTRACTOR                  | FUNDING SOURCE                                     | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|--------|--|-----------------------------|--|----------|---|
| 6.    | 010    | GOVERNOR'S OFFICE - ATHLETIC COMMISSION  | EFREN MENDOZA SR.           | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE 10% | \$30,000 |   |
|       |        | Contract Description: This is a new contract to provide ongoing chief inspector services during weigh-ins and events.  |                             |  |          |   |
|       |        | Term of Contract:  | 09/18/2024 - 07/31/2028     | Contract # 29543                                   |          |   |
| 7.    | 010    | GOVERNOR'S OFFICE - ATHLETIC COMMISSION  | MICHAEL STEPHEN MARTINO     | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE 10% | \$30,000 |   |
|       |        | Contract Description: This is a new contract to provide ongoing inspector services during weigh-ins and events.  |                             |  |          |   |
|       |        | Term of Contract:  | 09/17/2024 - 07/31/2028     | Contract # 29560                                   |          |   |
| 8.    | 010    | GOVERNOR'S OFFICE - ATHLETIC COMMISSION  | TED GIBSON                  | FEE:<br>GATE 90%<br>OTHER:<br>TICKET SURCHARGE 10% | \$30,000 |   |
|       |        | Contract Description: This is a new contract to provide ongoing inspector services during weigh-ins and events.  |                             |  |          |   |
|       |        | Term of Contract:  | 09/17/2024 - 07/31/2028     | Contract # 29558                                   |          |   |
| 9.    | 015    | GOVERNOR'S OFFICE OF FINANCE - BUDGET DIVISION   | MAXIMUS US SERVICES, INC.   | GENERAL  | \$83,300 |   |
|       |        | Contract Description: This is a new service agreement under statewide contract #99SWC-NV23-17895 which provides consulting, marketing, and education services. This service agreement provides rate development consulting and calculation services. |                             |  |          |   |
|       |        | Term of Contract:  | 09/27/2024 - 07/30/2027     | Contract # 29633                                   |          |   |
| 10.   | 030    | ATTORNEY GENERAL'S OFFICE - CONSUMER ADVOCATE  | MSB ENERGY ASSOCIATES, INC. | OTHER:<br>REGULATORY ASSESSMENTS                   | \$80,000 | Professional Service                          |
|       |        | Contract Description: This is a new contract to provide ongoing expert witness services.   |                             |  |          |   |
|       |        | Term of Contract:  | 11/01/2024 - 05/24/2025     | Contract # 29676                                   |          |   |
| 11.   | 030    | ATTORNEY GENERAL'S OFFICE - TORT CLAIMS FUND   | JOHNNY EDWARD BATES         | OTHER:<br>TORT CLAIMS                              | \$13,000 | Professional Service                          |
|       |        | Contract Description: This is a new contract to provide ongoing expert witness services.   |                             |  |          |   |
|       |        | Term of Contract:  | 07/15/2024 - 06/30/2026     | Contract # 29510                                   |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY  | CONTRACTOR                   | FUNDING SOURCE   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|--------|---|------------------------------|--|----------|---|
| 12.   | 040    | SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE  | CLARK COUNTY SCHOOL DISTRICT | GENERAL  | \$82,405 | Exempt  |
|       |        | Contract Description: This is a new interlocal agreement to create engaging content for voter education.  |                              |  |          |   |
|       |        | Term of Contract:   | 09/12/2024 - 06/30/2025      | Contract # 29772   |          |   |
| 13.   | 051    | TREASURER'S OFFICE - COLLEGE SAVINGS TRUST  | ESTIPONA GROUP               | GENERAL 6% OTHER: TRANSFERS FROM ENDOWMENT, ABANDONED PROPERTY 94% | \$88,000 |   |
|       |        | Contract Description: This is the first amendment to the original service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing, and education services. This service agreement provides branding, marketing, and promotion services. This amendment increases the maximum amount from \$345,299 to \$433,299 due to the addition of marketing services for programs in the Financial Literacy and Security Division. |                              |  |          |   |
|       |        | Term of Contract:   | 02/13/2024 - 01/31/2025      | Contract # 28679   |          |   |
| 14.   | 051    | TREASURER'S OFFICE - COLLEGE SAVINGS TRUST  | THE ABBI AGENCY              | OTHER: TRANSFER FROM ENDOWMENT ACCOUNT                             | \$88,000 |   |
|       |        | Contract Description: This is the first amendment to the original service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing, and education services. This service agreement provides branding, marketing, and promotion services. This amendment increases the maximum amount from \$345,299 to \$433,299 due to the addition of marketing services for programs in the Financial Literacy and Security Division. |                              |  |          |   |
|       |        | Term of Contract:   | 02/13/2024 - 01/31/2025      | Contract # 28678   |          |   |
| 15.   | 054    | TREASURER'S OFFICE - UNCLAIMED PROPERTY   | HUNTINGTON GEM LAB, LLC      | OTHER: ABANDONED PROPERTY RECEIPTS                                 | \$20,000 |   |
|       |        | Contract Description: This is a new contract to provide ongoing appraisal of safekeeping items to be auctioned off at public auctions.  |                              |  |          |   |
|       |        | Term of Contract:   | 10/01/2024 - 10/31/2028      | Contract # 29597   |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                              | FUNDING SOURCE                             | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|--|----------|---|
| 16.   | 055                   | TREASURER - HEALTHCARE STUDENT LOAN REPAY   | SHI INTERNATIONAL CORP.                 | OTHER: ABANDONED PROPERTY RECEIPTS         | \$21,510 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-12271 which provides software value-added resources. This service agreement provides development and user training for a new module to enable eligible providers of health care to submit applications for student loan repayment. |   |  |          |   |
|       |                       | Term of Contract:   | 10/04/2024 - 09/30/2025                 | Contract # 29791                           |          |   |
| 17.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | ADVANCED LOCKSMITH SERVICES             | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$32,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing locksmith services to state-owned buildings in northern Nevada.   |   |  |          |   |
|       |                       | Term of Contract:   | 10/08/2024 - 07/31/2028                 | Contract # 29677                           |          |   |
| 18.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | AMERICAN LAWN AND LANDSCAPING LLC       | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$50,000 |   |
|       | Contract Description: | This is a new contract to provide snow removal and ice melt services for the Professional Circle building located in Reno.  |   |  |          |   |
|       |                       | Term of Contract:   | 09/07/2024 - 06/30/2025                 | Contract # 29652                           |          |   |
| 19.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | B & L BACKFLOW TESTING SPECIALISTS, LLC | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$16,000 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides ongoing backflow testing, repair, and cleaning for all state-owned facilities in northern Nevada. This amendment increases the maximum amount from \$39,752 to \$55,752 due to the addition of newly acquired properties.           |   |  |          |   |
|       |                       | Term of Contract:   | 06/11/2021 - 04/30/2025                 | Contract # 24375                           |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                                 | FUNDING SOURCE                             | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|--|----------|---|
| 20.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | BOMBARD ELECTRIC, LLC                      | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$16,500 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides ongoing electrical services, maintenance, and repairs in state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$33,302.55 to \$49,802.55 due to the addition of newly acquired buildings. |  |  |          |   |
|       |                       | Term of Contract:   | 03/31/2023 - 04/13/2027                    | Contract # 27241                           |          |   |
| 21.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | BURNEY'S COMMERCIAL SERVICE OF NEVADA INC. | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$20,000 |   |
|       | Contract Description: | This is a new contract to provide repair and maintenance services for commercial appliances at the Governor's Mansion and Nevada Room.  |  |  |          |   |
|       |                       | Term of Contract:   | 10/15/2024 - 07/31/2028                    | Contract # 29554                           |          |   |
| 22.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | G & S WINDOW CLEANING LLC                  | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$14,334 |   |
|       | Contract Description: | This is a new contract to provide ongoing exterior window cleaning for the Storey, Lyon, Douglas, Esmeralda, and Elko buildings at the McCarran Center in Las Vegas.  |  |  |          |   |
|       |                       | Term of Contract:   | 09/07/2024 - 12/31/2024                    | Contract # 29386                           |          |   |
| 23.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | LAWYER MECHANICAL SERVICES, INC.           | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$37,301 |   |
|       | Contract Description: | This is a new contract to provide ongoing emergency heating, ventilation, and air conditioning maintenance and repair for buildings in southern Nevada.   |  |  |          |   |
|       |                       | Term of Contract:   | 10/03/2024 - 08/31/2028                    | Contract # 29671                           |          |   |
| 24.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | MESA ENERGY SYSTEMS, INC.                  | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$53,953 |   |
|       | Contract Description: | This is a new contract to provide ongoing emergency heating, ventilation, and air conditioning maintenance and repair for buildings in southern Nevada.   |  |  |          |   |
|       |                       | Term of Contract:   | 09/10/2024 - 08/31/2028                    | Contract # 29666                           |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                                  | FUNDING SOURCE                             | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|--|----------|---|
| 25.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | PAR-3 LANDSCAPE & MAINTENANCE, INC.         | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$79,784 |   |
|       | Contract Description: | This is a new contract to provide ongoing landscaping services for buildings at the McCarran Center in Las Vegas.  |   |  |          |   |
|       |                       | Term of Contract:  | 09/07/2024 - 04/30/2025                     | Contract # 29473                           |          |   |
| 26.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | RENTOKIL NORTH AMERICA, INC.                | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$22,619 |   |
|       | Contract Description: | This is a new contract to provide pest control for buildings at the McCarran Center in Las Vegas.  |   |  |          |   |
|       |                       | Term of Contract:  | 09/07/2024 - 09/30/2025                     | Contract # 29462                           |          |   |
| 27.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | SOUTHLAND INDUSTRIES                        | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$55,139 |   |
|       | Contract Description: | This is a new contract to provide labor costs for repairs, replacements, modifications, and new installations of various heating, ventilation, and air conditioning control components for state-owned buildings in southern Nevada. |   |  |          |   |
|       |                       | Term of Contract:  | 10/15/2024 - 08/31/2028                     | Contract # 29503                           |          |   |
| 28.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | SCHNEIDER ELECTRIC BUILDINGS AMERICAS, INC. | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$45,000 | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide electrical work, and heating, ventilation, and air conditioning control services for the Department of Motor Vehicles' Henderson and Flamingo locations.   |   |  |          |   |
|       |                       | Term of Contract:  | 09/20/2024 - 07/15/2028                     | Contract # 29481                           |          |   |
| 29.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS  | TK ELEVATOR CORPORATION                     | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$14,456 |   |
|       | Contract Description: | This is a new contract to provide elevator service and maintenance for the Professional Circle building located in Reno.   |   |  |          |   |
|       |                       | Term of Contract:  | 09/07/2024 - 07/31/2025                     | Contract # 29595                           |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR   | FUNDING SOURCE                             | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|--|----------|---|
| 30.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS   | TREE SOLUTIONS, LLC  | OTHER: BUILDINGS AND GROUNDS RENTAL INCOME | \$30,800 |   |
|       | Contract Description: | This is a new contract to provide ongoing landscaping services for the Nevada Building at the McCarran Center in Las Vegas.   |  |  |          |   |
|       |                       | Term of Contract:   | 09/07/2024 - 04/30/2025                                    | Contract # 29470                           |          |   |
| 31.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERANS CIP PROJECTS - NON-EXEC  | GEORGE M. ROGERS, CHARTERED DBA GEORGE M. ROGERS ARCHITECT | GENERAL                                    | \$12,650 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the Southern Nevada Veterans Memorial Cemetery - Chapel Remodel CIP project: CIP Project No. 23-M15; SPWD Contract No. 116092. This amendment increases the maximum amount from \$52,300 to \$64,950 due to an additional cost estimate needed to complete the project.             |  |  |          |   |
|       |                       | Term of Contract:   | 01/18/2024 - 06/30/2027                                    | Contract # 28522                           |          |   |
| 32.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF MOTOR VEHICLES CIP PROJECTS - NON-EXEC  | TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK                | BONDS                                      | \$28,080 | Professional Service                          |
|       | Contract Description: | This is the second amendment to the original contract which provides professional architectural/engineering services for the Department of Motor Vehicles - Silverado Ranch Facility CIP Project: CIP Project No. 23-C02; SPWD Contract No. 115808. This amendment increases the maximum amount from \$1,120,992 to \$1,149,072 due to additional furniture, fixtures, and equipment coordination services. |  |  |          |   |
|       |                       | Term of Contract:   | 01/09/2024 - 06/30/2027                                    | Contract # 28577                           |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                                  | FUNDING SOURCE           | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|--------------------------|----------|---|
| 33.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC   | TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK | BONDS                    | \$40,420 | Professional Service                          |
|       | Contract Description: | This is the second amendment to the original contract which provides professional architecture/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116357. This amendment increases the maximum amount from \$607,840 to \$648,260 due to an additional dewatering investigation.   |   |                          |          |   |
|       | Term of Contract:     | 03/12/2024 - 06/30/2027  | Contract # 28840                            |                          |          |   |
| 34.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC   | CMB CONSULTANTS LC DBA UNVC                 | BONDS                    | \$37,700 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides professional architectural/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116320. This amendment increases the maximum amount from \$37,000 to \$74,700 due to additional systems commissioning services for this project.                               |   |                          |          |   |
|       | Term of Contract:     | 03/15/2024 - 06/30/2027  | Contract # 28809                            |                          |          |   |
| 35.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS  | KNIT  | OTHER: AGENCY FUNDED CIP | \$14,800 | Professional Service                          |
|       | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Southern Nevada Adult Mental Health Services - Rawson-Neal Wall Repair CIP project to include architectural development, design, structural engineering, bidding, and construction administration services for the repair of the exterior wall that was damaged by a vehicle collision: CIP Project No. 24-A019; SPWD Contract No. 116865. |   |                          |          |   |
|       | Term of Contract:     | 09/25/2024 - 06/30/2027  | Contract # 29501                            |                          |          |   |



# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                      | FUNDING SOURCE                        | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---------------------------------|---------------------------------------|----------|---|
| 36.   | 082                   | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS   | LGA ARCHITECTURE DBA LGA        | OTHER: AGENCY FUNDED CIP              | \$20,945 | Professional Service                          |
|       | Contract Description: | This is the second amendment to the original contract which provides professional architectural/engineering services for the Boulder City - Adventure Center CIP Project: CIP Project No. 23-A023-1; SPWD Contract No. 115554. This amendment increases the maximum amount from \$332,220 to \$353,165 due to additional documentation review and on-site surveys to address title report exceptions. |                                 |                                       |          |   |
|       |                       | Term of Contract:   | 07/11/2023 - 05/31/2027         | Contract # 27790                      |          |   |
| 37.   | 101                   | DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - TOURISM  | FIRST CHOICE TREE SERVICE, INC. | OTHER: LODGING TAX                    | \$98,947 |   |
|       | Contract Description: | This is a new contract to provide ongoing irrigation and landscape maintenance.   |                                 |                                       |          |   |
|       |                       | Term of Contract:   | 10/09/2024 - 10/31/2028         | Contract # 29848                      |          |   |
| 38.   | 180                   | OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES  | NAVAL FACILITIES ENGINEERING    | OTHER: REVENUE                        | \$28,331 | Exempt  |
|       | Contract Description: | This is a new revenue contract to provide ongoing rack space at Austin Peak in Lander County.   |                                 |                                       |          |   |
|       |                       | Term of Contract:   | 07/01/2024 - 06/30/2025         | Contract # 29694                      |          |   |
| 39.   | 240                   | DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT   | DATA PROCESSING AIR CORP.       | OTHER: PRIVATE/COUNTY 35% FEDERAL 65% | \$20,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing emergency repair and maintenance services for heating, ventilation, and air conditioning equipment.   |                                 |                                       |          |   |
|       |                       | Term of Contract:   | 09/19/2024 - 08/31/2028         | Contract # 29757                      |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY  | CONTRACTOR  | FUNDING SOURCE               | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|--------|---|---|------------------------------|----------|---|
| 40.   | 240    | DEPARTMENT OF VETERANS SERVICES - GENERAL VETERANS SERVICES-FEES - NON-EXEC | THE FACTORY LLC   | OTHER: VETERANS GIFT ACCOUNT | \$99,000 |   |
|       |        | Contract Description:   | This is a new contract to provide an updated website platform and infrastructure.   |                              |          |   |
|       |        | Term of Contract:   | 10/11/2024 - 12/31/2026   | Contract # 29856             |          |   |
| 41.   | 240    | DEPARTMENT OF VETERANS SERVICES - NORTHERN NEVADA VETERANS HOME ACCOUNT     | GARDEN SHOP NURSERY LANDSCAPE DIVISION, INC.  | FEDERAL                      | \$14,400 |   |
|       |        | Contract Description:   | This is a new contract to provide landscaping services and enhancements to the outdoor visitation area.   |                              |          |   |
|       |        | Term of Contract:   | 10/09/2024 - 04/30/2025   | Contract # 29801             |          |   |
| 42.   | 240    | DEPARTMENT OF VETERANS SERVICES - NORTHERN NEVADA VETERANS HOME ACCOUNT     | SAVAGE & SON, INC.  | FEDERAL                      | \$58,341 |   |
|       |        | Contract Description:   | This is a new contract to provide installation of gas heaters at the outdoor patio area.  |                              |          |   |
|       |        | Term of Contract:   | 10/09/2024 - 04/30/2025   | Contract # 29811             |          |   |
| 43.   | 300    | DEPARTMENT OF EDUCATION - OFFICE OF EARLY LEARNING AND DEVELOPMENT          | WASHOE COUNTY SCHOOL DISTRICT   | FEDERAL                      | \$90,000 | Exempt  |
|       |        | Contract Description:   | This is the first amendment to the original interlocal agreement which provides planning and design of instructional strategies, recruitment strategies, a video library, and other support to increase the effectiveness of preschool through third grade educators. This amendment increases the maximum amount from \$284,000 to \$374,000 due to the addition of developmentally appropriate classroom materials for educators. |                              |          |   |
|       |        | Term of Contract:   | 03/12/2024 - 12/30/2025   | Contract # 28805             |          |   |
| 44.   | 300    | DEPARTMENT OF EDUCATION - COVID-19 FUNDING                                  | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS   | FEDERAL                      | \$72,234 | Exempt  |
|       |        | Contract Description:   | This is a new interlocal agreement to provide assistance and consultation for Indian Education projects with Nevada educators for finalizing K-12 lesson plans.   |                              |          |   |
|       |        | Term of Contract:   | 10/01/2024 - 11/30/2025   | Contract # 29828             |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR  | FUNDING SOURCE               | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|------------------------------|----------|---|
| 45.   | 300                   | DEPARTMENT OF EDUCATION - COVID-19 FUNDING  | COLLEGE ENTRANCE EXAMINATION BOARD  | FEDERAL                      | \$62,206 | Sole Source                                   |
|       | Contract Description: | This is a new contract to provide advanced placement professional learning workshops to teachers.   |   |                              |          |   |
|       |                       | Term of Contract:   | 09/27/2024 - 09/01/2025   | Contract # 29819             |          |   |
| 46.   | 300                   | DEPARTMENT OF EDUCATION - COVID-19 FUNDING  | KENNY GUINN CENTER FOR POLICY   | FEDERAL                      | \$93,660 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17904 which provides consulting, marketing, and education services. This service agreement provides venue coordination, advertising, marketing, publication services, and administrative oversight for the Artificial Intelligence Conference. |   |                              |          |   |
|       |                       | Term of Contract:   | 09/27/2024 - 07/31/2025   | Contract # 29829             |          |   |
| 47.   | 300                   | DEPARTMENT OF EDUCATION - COVID-19 FUNDING  | DEPARTMENT OF NATIVE AMERICAN AFFAIRS   | FEDERAL                      | \$72,234 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide consultation sessions with educators for reviewing and finalizing draft K-12 lesson plans centered on Native American content.  |   |                              |          |   |
|       |                       | Term of Contract:   | 10/01/2024 - 11/30/2025   | Contract # 29830             |          |   |
| 48.   | 300                   | DEPARTMENT OF EDUCATION - SAFE AND RESPECTFUL LEARNING  | DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF PUBLIC AND BEHAVIORAL HEALTH RURAL CLINICS | FEDERAL                      | \$40,000 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide student access to mental health services in rural regions of the state.   |   |                              |          |   |
|       |                       | Term of Contract:   | 09/25/2024 - 09/30/2028   | Contract # 29713             |          |   |
| 49.   | 331                   | DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - MUSEUMS AND HISTORY  | WHEELER'S ELECTRIC, INC.  | OTHER: LICENSE PLATE FUNDING | \$28,648 |   |
|       | Contract Description: | This is a new contract to provide lighting repairs for the parking lot, exterior building, and interior gallery at the Lost City Museum.  |   |                              |          |   |
|       |                       | Term of Contract:   | 10/01/2024 - 12/31/2024   | Contract # 29339             |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR                            | FUNDING SOURCE                   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---------------------------------------|----------------------------------|----------|---|
| 50.   | 333                   | DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - NEVADA ARTS COUNCIL   | HOTEL NEVADA AND GAMBLING HALL, LTD.  | FEDERAL                          | \$16,835 |   |
|       | Contract Description: | This is a new contract to provide lodging and event room space for the Nevada Basin to Range Exchange conference.  |                                       |                                  |          |   |
|       |                       | Term of Contract:  | 09/17/2024 - 06/30/2025               | Contract # 29739                 |          |   |
| 51.   | 400                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - FUND FOR RESILIENT NEVADA  | NEVADA PUBLIC HEALTH FOUNDATION, INC. | OTHER: FUND FOR RESILIENT NEVADA | \$37,654 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides event and conference planning services to support an event to educate Nevadans on the effects of gestational substance use.   |                                       |                                  |          |   |
|       |                       | Term of Contract:  | 09/30/2024 - 12/31/2024               | Contract # 29817                 |          |   |
| 52.   | 400                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIRECTOR'S OFFICE - DEVELOPMENTAL DISABILITIES   | GLOBAL TECHNICAL COMMUNICATIONS LLC   | GENERAL 25%<br>FEDERAL 75%       | \$50,000 |   |
|       | Contract Description: | This is a new contract to provide American Sign Language interpretation services to assist in the goal of reducing identified barriers to accessing technology and digital information for individuals who are Deaf/Hard of Hearing, Blind/Visually Impaired, as well as those with intellectual/developmental disabilities, and/or those living in rural communities. |                                       |                                  |          |   |
|       |                       | Term of Contract:  | 09/06/2024 - 09/30/2025               | Contract # 29716                 |          |   |
| 53.   | 400                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - DIRECTOR'S OFFICE - INDIVIDUALS WITH DISABILITIES EDUCATION ACT PART C COMPLIANCE  | SOCIAL ENTREPRENEURS, INC.            | FEDERAL                          | \$37,614 |   |
|       | Contract Description: | This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides event and conference planning services for the Interagency Coordinating Council Retreat.  |                                       |                                  |          |   |
|       |                       | Term of Contract:  | 08/01/2024 - 09/30/2024               | Contract # 29762                 |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                 | FUNDING SOURCE   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|----------------------------|--|----------|---|
| 54.   | 402                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER  | TRANE U.S. INC.            | GENERAL 45%<br>OTHER:<br>CLIENT PAYMENTS 2%<br>FEDERAL 53% | \$79,009 |   |
|       | Contract Description: | This is a new contract to provide ongoing inspection and repair services for heating, ventilation, and air conditioning systems.  |                            |  |          |   |
|       |                       | Term of Contract:   | 09/25/2024 - 08/30/2028    | Contract # 29721   |          |   |
| 55.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES   | MESA ENERGY SYSTEMS INC.   | GENERAL  | \$24,620 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides ongoing heating, ventilation, and air conditioning equipment repair and maintenance services. This amendment increases the maximum amount from \$45,000 to \$69,620 due to emergency repair services.   |                            |  |          |   |
|       |                       | Term of Contract:   | 05/11/2022 - 07/31/2025    | Contract # 25712   |          |   |
| 56.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT   | SOCIAL ENTREPRENEURS, INC. | FEDERAL  | \$25,839 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides consulting and training services to address treatment gaps in continuum of care. This amendment increases the maximum amount from \$52,159.60 to \$77,998.60 due to the addition of support hours to complete the four phases of the project. |                            |  |          |   |
|       |                       | Term of Contract:   | 01/01/2024 - 09/30/2024    | Contract # 28493   |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY   | CONTRACTOR   | FUNDING SOURCE | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|----------------|----------|---|
| 57.   | 406                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - WOMEN, INFANT, AND CHILDREN FOOD SUPPLEMENT   | WESTERN MICHIGAN UNIVERSITY  | FEDERAL        | \$42,418 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide ongoing services for nutrition education modules to educate participants regarding the benefits of supplemental, healthy, and nutritious food.   |  |                |          |   |
|       | Term of Contract:     | 10/15/2024 - 09/30/2026  | Contract # 29499   |                |          |   |
| 58.   | 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        | \$30,031 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide an educational setting and payment for services to third-year medical students majoring in Psychiatry to allow the student to fulfill required externship licensure hours.   |  |                |          |   |
|       | Term of Contract:     | 07/01/2024 - 06/30/2025  | Contract # 29469   |                |          |   |
| 59.   | 409                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SUMMIT VIEW YOUTH CENTER   | METRO AWNINGS & IRON, INC.   | GENERAL        | \$86,100 |   |
|       | Contract Description: | This is a new contract to provide labor and materials to fabricate and install a custom shade sail canopy.   |  |                |          |   |
|       | Term of Contract:     | 09/12/2024 - 06/30/2025  | Contract # 29573   |                |          |   |
| 60.   | 409                   | DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE  | RITE OF PASSAGE, INC.  | FEDERAL        | \$68,250 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides youth residential treatment services. This amendment extends the termination date from September 30, 2024 to March 30, 2025 and increases the maximum amount from \$138,000 to \$206,250 due to the continued need for residential treatment services for a youth currently receiving treatment. |  |                |          |   |
|       | Term of Contract:     | 09/28/2023 - 03/30/2025  | Contract # 28362   |                |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR  | FUNDING SOURCE             | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|----------------------------|----------|---|
| 61.   | 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 | GENERAL 55%<br>FEDERAL 45% | \$41,407 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide ongoing fellowship programs for fellows to learn how to evaluate and treat adolescent psychiatric patients.   |   |                            |          |   |
|       |                       | Term of Contract:   | 07/01/2024 - 06/30/2025   | Contract # 29736           |          |   |
| 62.   | 431                   | OFFICE OF THE MILITARY  | AMERICAN LAWN AND LANDSCAPING LLC   | GENERAL 50%<br>FEDERAL 50% | \$18,300 |   |
|       | Contract Description: | This is a new contract to provide removal, installation, repair, and maintenance of the landscaping and irrigation at the Fairview Drive location in Carson City.                                 |   |                            |          |   |
|       |                       | Term of Contract:   | 10/08/2024 - 10/01/2026   | Contract # 29741           |          |   |
| 63.   | 431                   | OFFICE OF THE MILITARY  | ARTISTIC FENCE COMPANY, INC.  | GENERAL 50%<br>FEDERAL 50% | \$99,060 |   |
|       | Contract Description: | This is a new contract to provide installation, repair, and maintenance of fencing for facilities in northern Nevada.   |   |                            |          |   |
|       |                       | Term of Contract:   | 10/15/2024 - 10/01/2028   | Contract # 29786           |          |   |
| 64.   | 431                   | OFFICE OF THE MILITARY  | ENGIN8 LLC  | FEDERAL                    | \$49,700 | Professional Service                          |
|       | Contract Description: | This is a new contract to provide professional architectural/engineering services for a heating, ventilation, and air conditioning feasibility study for the Anthony Cometa Complex in Las Vegas. |   |                            |          |   |
|       |                       | Term of Contract:   | 10/11/2024 - 09/30/2026   | Contract # 29784           |          |   |
| 65.   | 431                   | OFFICE OF THE MILITARY  | NDI PLUMBING, INC.  | GENERAL 50%<br>FEDERAL 50% | \$11,687 |   |
|       | Contract Description: | This is a new contract to provide installation, repair, and maintenance services on seismic gas shut-off valves in Reno.  |   |                            |          |   |
|       |                       | Term of Contract:   | 09/26/2024 - 07/31/2026   | Contract # 29743           |          |   |
| 66.   | 550                   | STATE DEPARTMENT OF AGRICULTURE - REGISTRATION & ENFORCEMENT  | WESTERN BIOLOGICAL LLC  | FEDERAL                    | \$47,000 |   |
|       | Contract Description: | This is a new contract to provide native seed growing services.   |   |                            |          |   |
|       |                       | Term of Contract:   | 09/19/2024 - 09/30/2027   | Contract # 29643           |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                                 | FUNDING SOURCE   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|--|----------|---|
| 67.   | 550                   | DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION  | RHP MECHANICAL SYSTEMS                     | OTHER: COST ALLOCATION                                 | \$16,164 |   |
|       | Contract Description: | This is the third amendment to the original contract which provides preventative maintenance and repair services to the heating, ventilation, and air conditioning systems at the Sparks location. This amendment increases the maximum amount from \$314,173 to \$330,337 due to the unexpected failure of an exhaust fan. |  |  |          |   |
|       |                       | Term of Contract:   | 07/13/2021 - 07/12/2025                    | Contract # 24433                                       |          |   |
| 68.   | 611                   | GAMING CONTROL BOARD  | ASSURED DOCUMENT DESTRUCTION, INC.         | GENERAL  | \$15,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing off-site records storage services.  |  |  |          |   |
|       |                       | Term of Contract:   | 10/01/2024 - 09/30/2028                    | Contract # 29778                                       |          |   |
| 69.   | 650                   | DEPARTMENT OF PUBLIC SAFETY - EVIDENCE VAULT  | FILEONQ, INC.                              | OTHER: COST ALLOCATION 20% FEDERAL 80%                 | \$88,086 |   |
|       | Contract Description: | This is a new contract to provide a digital evidence management system.   |  |  |          |   |
|       |                       | Term of Contract:   | 10/02/2024 - 09/30/2026                    | Contract # 29580                                       |          |   |
| 70.   | 702                   | DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE  | REBECCA ANNE MOSSOW & JAMES G MOSSOW       | FEE: SPORTSMEN REVENUE                                 | \$21,600 |   |
|       | Contract Description: | This is a new contract to provide ongoing janitorial services at the Ely office.  |  |  |          |   |
|       |                       | Term of Contract:   | 10/01/2024 - 09/30/2028                    | Contract # 29458                                       |          |   |
| 71.   | 702                   | DEPARTMENT OF WILDLIFE - CONSERVATION EDUCATION   | EPIC OUTDOORS LLC                          | FEE: SPORTSMEN REVENUE                                 | \$30,000 |   |
|       | Contract Description: | This is a new contract to provide marketing, content creation, and promotional strategies for hunting.  |  |  |          |   |
|       |                       | Term of Contract:   | 10/14/2024 - 09/30/2028                    | Contract # 29804                                       |          |   |
| 72.   | 702                   | DEPARTMENT OF WILDLIFE - GAME MANAGEMENT  | CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE | GENERAL 52% FEE: LAW ENFORCEMENT SPORTSMEN REVENUE 48% | \$25,000 | Exempt  |
|       | Contract Description: | This is a new contract to provide scientific and forensic support services for conservation law enforcement and wildlife management.  |  |  |          |   |
|       |                       | Term of Contract:   | 10/01/2024 - 09/30/2028                    | Contract # 29651                                       |          |   |



# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR   | FUNDING SOURCE   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|--|----------|---|
| 73.   | 702                   | DEPARTMENT OF WILDLIFE - FISHERIES MANAGEMENT   | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO WESTERN NEVADA COLLEGE | OTHER: TROUT STAMP 40% FEDERAL 60%                           | \$24,800 | Exempt  |
|       | Contract Description: | This is the first amendment to the original contract which provides commercial driver's license training for new employees. This amendment extends the termination date from December 31, 2024 to December 31, 2025 and increases the maximum amount from \$30,400 to \$55,200 due to the continued need for these services.      |  |  |          |   |
|       |                       | Term of Contract:   | 08/23/2023 - 12/31/2025  | Contract # 27049   |          |   |
| 74.   | 702                   | DEPARTMENT OF WILDLIFE - HABITAT  | BOISE STATE UNIVERSITY   | FEE: HABITAT CONSERVATION                                    | \$10,186 | Exempt  |
|       | Contract Description: | This is a new interlocal agreement to provide assistance in conducting an in-depth analysis of the Nevada Winter Raptor Survey dataset.   |  |  |          |   |
|       |                       | Term of Contract:   | 09/21/2024 - 06/30/2025  | Contract # 29270   |          |   |
| 75.   | 702                   | DEPARTMENT OF WILDLIFE - HABITAT  | MATRIX SCIENCES INTERNATIONAL, INC.  | FEE: HABITAT CONSERVATION; UPLAND GAME STAMP 90% FEDERAL 10% | \$30,000 |   |
|       | Contract Description: | This is a new contract to provide laboratory analysis of herbicide residues in soil and plant samples.  |  |  |          |   |
|       |                       | Term of Contract:   | 09/30/2024 - 06/30/2026  | Contract # 29209   |          |   |
| 76.   | 704                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS  | AZTECH MATERIALS TESTING, INC.   | OTHER: HELMSLEY GRANT VALLEY OF FIRE & DEFERRED MAINTENANCE  | \$13,057 | Professional Service                          |
|       | Contract Description: | This is the first amendment to the original contract which provides inspection and testing services for the new visitor center at Valley of Fire State Park. This amendment increases the maximum amount from \$159,552 to \$172,609 due to additional third-party inspections for the restroom replacement at the west entrance. |  |  |          |   |
|       |                       | Term of Contract:   | 06/11/2024 - 12/31/2025  | Contract # 29166   |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                  | FUNDING SOURCE                      | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|-----------------------------|-------------------------------------|----------|---|
| 77.   | 704                   | STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS  | THE CHAPEL LLC              | OTHER: REVENUE                      | \$10,500 |   |
|       | Contract Description: | This is a new revenue contract to allow wedding ceremonies at Valley of Fire State Park.  |                             |                                     |          |   |
|       | Term of Contract:     | 09/30/2024 - 09/30/2026   | Contract # 29770            |                                     |          |   |
| 78.   | 705                   | DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES - USGS CO-OP - NON-EXEC  | U.S. DEPARTMENT OF INTERIOR | OTHER: PASS-THROUGH 65% FEDERAL 35% | \$33,400 | Exempt  |
|       | Contract Description: | This is the first amendment to the original joint-funding agreement which provides ongoing cooperative water data-monitoring in the Carlin Trend area. This amendment increases the maximum amount from \$354,458 to \$387,858 due to the installation and monitoring by U.S. Geological Survey of one stream gauge at Indian Creek in Crescent Valley. |                             |                                     |          |   |
|       | Term of Contract:     | 07/01/2023 - 06/30/2025   | Contract # 27666            |                                     |          |   |
| 79.   | 902                   | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - UNEMPLOYMENT INSURANCE  | ALL-AMERICAN FENCE CO. INC  | FEDERAL                             | \$12,540 |   |
|       | Contract Description: | This is a new contract to provide fence and gate installation and repair services at the East Saint Louis Avenue building in Las Vegas.   |                             |                                     |          |   |
|       | Term of Contract:     | 10/07/2024 - 06/30/2025   | Contract # 29758            |                                     |          |   |
| 80.   | B002                  | LICENSING BOARDS AND COMMISSIONS - ARCHITECTURE, INTERIOR DESIGN AND RESIDENTIAL DESIGN   | AARON TVETER, LTD           | FEE: APPLICATION AND REGISTRATION   | \$38,400 |   |
|       | Contract Description: | This is a new contract to provide financial services.   |                             |                                     |          |   |
|       | Term of Contract:     | 01/01/2025 - 12/31/2028   | Contract # 29686            |                                     |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR                                | FUNDING SOURCE   | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|------------------|----------|---|
| 81.   | B003                  | LICENSING BOARDS AND COMMISSIONS - AUDIOLOGY AND SPEECH PATHOLOGY   | NUMBERS INC.                              | FEE: LICENSURE   | \$14,400 |   |
|       | Contract Description: | This is a new contract to provide ongoing bookkeeping and payroll services.   |   |                  |          |   |
|       |                       | Term of Contract:   | 07/01/2024 - 06/30/2028                   | Contract # 29280 |          |   |
| 82.   | B014                  | LICENSING BOARDS AND COMMISSIONS - MARRIAGE AND FAMILY THERAPISTS AND CLINICAL PROFESSIONAL COUNSELORS  | CASEY NEILON, INC.                        | FEE: LICENSURE   | \$36,600 | Professional Service                          |
|       | Contract Description: | This is a new contract to provide annual financial statement audits.  |   |                  |          |   |
|       |                       | Term of Contract:   | 10/04/2024 - 12/31/2025                   | Contract # 29618 |          |   |
| 83.   | B015                  | LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS  | CHARLES BURCHAM, PROFESSIONAL CORPORATION | FEE: LICENSURE   | \$45,000 | Professional Service                          |
|       | Contract Description: | This is a new contract to provide hearing officer services.   |   |                  |          |   |
|       |                       | Term of Contract:   | 09/11/2024 - 08/31/2026                   | Contract # 29644 |          |   |
| 84.   | B015                  | LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS  | FM MARKETING, LLC                         | FEE: LICENSURE   | \$17,452 |   |
|       | Contract Description: | This is the first amendment to the original contract which provides public relations and information consulting. This amendment extends the termination date from October 31, 2024 to October 31, 2025 and increases the maximum amount from \$30,000.00 to \$47,452.50 due to the continued need for these services. |   |                  |          |   |
|       |                       | Term of Contract:   | 11/14/2023 - 10/31/2025                   | Contract # 28359 |          |   |
| 85.   | B015                  | LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS  | GINA COULTER SESSION                      | FEE: LICENSURE   | \$45,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing hearing officer services.   |   |                  |          |   |
|       |                       | Term of Contract:   | 09/11/2024 - 06/30/2026                   | Contract # 29672 |          |   |
| 86.   | B015                  | LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS  | ROBISON, SHARP, SULLIVAN & BRUST, LTD.    | FEE: LICENSURE   | \$25,000 | Professional Service                          |
|       | Contract Description: | This is a new contract to provide legal services.   |   |                  |          |   |
|       |                       | Term of Contract:   | 10/14/2024 - 08/31/2026                   | Contract # 29568 |          |   |

# INFORMATION CONTRACT SUMMARY

| BOE # | DEPT #                | STATE AGENCY  | CONTRACTOR              | FUNDING SOURCE                    | AMOUNT   | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|-------------------------|-----------------------------------|----------|---|
| 87.   | B017                  | LICENSING BOARDS AND COMMISSIONS - NURSING  | CASEY NEILON, INC.      | FEE: LICENSURE                    | \$41,000 |   |
|       | Contract Description: | This is a new contract to provide ongoing independent audit services.   |                         |                                   |          |   |
|       |                       | Term of Contract:   | 07/01/2024 - 09/01/2026 | Contract # 29529                  |          |   |
| 88.   | B019                  | LICENSING BOARDS AND COMMISSIONS - DISPENSING OPTICIANS   | BDG WEB DESIGN, LLC     | FEE: LICENSURE                    | \$43,200 |   |
|       | Contract Description: | This is a new contract to provide design and maintenance services for the online user database.   |                         |                                   |          |   |
|       |                       | Term of Contract:   | 09/24/2024 - 06/30/2026 | Contract # 29682                  |          |   |
| 89.   | B021                  | LICENSING BOARDS AND COMMISSIONS - ORIENTAL MEDICINE  | THE GRIFFIN COMPANY LLC | GENERAL                           | \$12,000 |   |
|       | Contract Description: | This is a new contract to provide professional lobbying services.   |                         |                                   |          |   |
|       |                       | Term of Contract:   | 01/01/2025 - 06/30/2025 | Contract # 29839                  |          |   |
| 90.   | B022                  | LICENSING BOARDS AND COMMISSIONS - PHARMACY   | APPRISS LLC             | FEE: LICENSURE 87%<br>FEDERAL 13% | \$48,000 | Sole Source                                   |
|       | Contract Description: | This is the first amendment to the original contract which provides licensing for the Prescription Drug Monitoring Program required by NRS 453.362. This amendment assigns the contract due to a change in business structure from Appriss Inc. to Appriss LLC and increases the maximum amount from \$364,000 to \$412,000 due to the addition of a module to identify providers that are writing prescriptions for controlled substances in Nevada without the appropriate license. |                         |                                   |          |   |
|       |                       | Term of Contract:   | 12/03/2020 - 12/02/2024 | Contract # 23763                  |          |   |

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: 29783

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: ADAM WYGNANSKI  
Contractor Name: ADAM WYGNANSKI  
Address: 1620 Black Oak Rd.  
City/State/Zip: Sparks, NV 89436  
Contact/Phone: Adam Wycznanski 775-233-4992  
Vendor No.: T29049445  
NV Business ID: NV20243184387

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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 10/14/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/31/2028

Contract term: 4 years and 18 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-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,000.00

Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes 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 only eight full-time employees 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, or the number of staff required to cover these tasks. The use of inspectors is an industry standard practice around the world. Additionally, we have no staff members in the north so having a small pool of contracted Inspectors in northern Nevada saves us from having to fly inspectors up.

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):

Raymond Steiber  
Charles Hines  
Emeterio Florez  
Raymond C. Steiber  
Ruben P. Rodriguez

b. Solicitation Waiver: **Not Applicable**

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

This vendor has advanced 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 Inspector Ph: 702-903-0018

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jvictor  | 09/23/2024 08:19:05 AM |
| Division Approval         | jkidd    | 09/26/2024 17:03:41 PM |
| Department Approval       | jkidd    | 09/26/2024 17:03:43 PM |
| Contract Manager Approval | ssands   | 10/03/2024 09:30:25 AM |
| Budget Analyst Approval   | rgiffor1 | 10/14/2024 12:55:45 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: 29780

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: CHARLES HINES III  
Contractor Name: CHARLES HINES III  
Address: 9108 Costa De Oro Court  
City/State/Zip: Las Vegas, NV 89131  
Contact/Phone: Charles Hines 702-787-4985  
Vendor No.: T29049439  
NV Business ID: NV20243182710

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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 10/14/2024  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 10/31/2028  
Contract term: 4 years and 18 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-ins and events.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$30,000.00  
Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?  
Nevada Revised Statutes 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.

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):

Russell E. Black Jr  
Raymond C. Steiber  
Carlos Rangel  
Ruben P. Rodriguez  
Aldo Galvan

b. Solicitation Waiver: **Not Applicable**

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

This vendor has advanced 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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

Alex Ybarra, Chief Inspector Ph: 702-903-0018

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jkidd    | 09/23/2024 08:17:50 AM |
| Division Approval         | jkidd    | 09/26/2024 17:10:22 PM |
| Department Approval       | jkidd    | 09/26/2024 17:10:24 PM |
| Contract Manager Approval | ssands   | 10/03/2024 09:31:05 AM |
| Budget Analyst Approval   | rgiffor1 | 10/14/2024 15:02:39 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: 29562

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: Charvez L. Foger  
Contractor Name: Charvez L. Foger  
Address: 8012 San Mateo St.  
City/State/Zip: NORTH LAS VEGAS, NV 89085  
Contact/Phone: Charvez Foger 702/682-0187  
Vendor No.: T81091552  
NV Business ID: NV20243068439

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

|               |        |   |               |         |                                    |
|---------------|--------|---|---------------|---------|------------------------------------|
| General Funds | 0.00 % | X | Fees          | 90.00 % | ATHLETIC COMMISSION GATE FEE       |
| Federal Funds | 0.00 % |   | Bonds         | 0.00 %  |                                    |
| Highway Funds | 0.00 % | X | Other funding | 10.00 % | TICKET SURCHARGE (AMATEUR PROGRAM) |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/12/2024

Anticipated BOE meeting date 09/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/31/2028

Contract term: 3 years and 323 days

4. Type of contract: Contract

Contract description: Specialty Services

5. Purpose of contract:

This is a new contract to provide ongoing Inspector Services during Athletic Commission weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,000.00

Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.

9. Were quotes or proposals solicited? Yes

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

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

MICHAEL MARTINO  
CHARVEZ FOGER  
EFREN MENDOZA  
TED GIBSON  
LEON MOREHEAD

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 successfully completed previous Inspector Services contract terms. 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?

**Yes**

See the attached Authorization to Contract form for details.

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

**No**

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Specialty Services - Inspector Services Unarmed Combat Sports, Nevada State Athletic Commission. 2020-6/31/2024

14. Is the contractor currently involved in litigation with the State 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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

Aldo Galvan, Chief Inspector Ph: 702-327-5947

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mlynn    | 08/05/2024 19:03:18 PM |
| Division Approval         | nmann    | 08/28/2024 15:28:54 PM |
| Department Approval       | nmann    | 08/28/2024 15:28:57 PM |
| Contract Manager Approval | ssands   | 08/28/2024 15:34:09 PM |
| Budget Analyst Approval   | rgiffor1 | 09/12/2024 10:37:17 AM |

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: August 8, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: Roxana Gifford, Executive Branch Budget Officer  
Governor's Finance Office

Subject: BOARD OF EXAMINERS **ACTION** ITEM

APPROVED BY THE  
BOARD OF EXAMINERS  
AT THEIR SEP 11 2024  
MEETING #4  
Initials

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

**NEVADA STATE ATHLETIC COMMISSION**

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Nevada State Athletic Commission (NSAC) requests authority to contract with a current employee, Charvez Fogar, currently serving as Deputy Administrator with the Real Estate Division of the Department of Business and Industry, to provide inspector services at NSAC sanctioned weigh-ins and events.

Additional Information:

NRS 467.050 allows NSAC to utilize and employ inspectors as independent contractors. NSAC does not have the staff with sufficient knowledge to support the regulatory oversight and duties required during NSAC sanctioned weigh-ins and events. Mr. Fogar has extensive knowledge of the rules and regulations of unarmed combat and has successfully completed previous Inspector Services contract terms. NSAC intends to contract with Mr. Fogar from September 11, 2024 through July 31, 2028, on a part-time basis.

Statutory Authority:

NRS 333.705 (1)

REVIEWED:   a    
ACTION ITEM: \_\_\_\_\_



Joe Lombardo  
**Governor**

STATE OF NEVADA  
ATHLETIC COMMISSION

Jeff Mullen  
**Executive Director**

**Chairman:** Dallas Haun

**Members:** Gregory Bortolin, Alexander G. Chen, Anthony A. Marnell III, Richard Reviglio

## **MEMORANDUM**

**To:** State of Nevada Board of Examiners

**From:** Jeff Mullen, Executive Director

**Date:** March 11, 2024

**Subject:** Authorization to Contract with a Current Employee – Charvez Foger

### **SUMMARY**

Pursuant to the Administrative Manual Section 0323, the Nevada State Athletic Commission (NSAC) requests the authority to contract with current state employee, Mr. Charvez Foger.

### **BACKGROUND**

It is not cost effective for the state to maintain full or part-time staff with sufficient knowledge and experience, to support the regulatory oversight and duties required during events. Additionally, the inspectors provide oversight of both male and female locker rooms. The agency does not have the appropriate ratio of staff, or the number of staff required to cover all required tasks. Utilizing Independent Contractors allows the agency to assign the correct number of Inspector coverage required for male/female combatants, as well as utilizing specific skills sets, such as language skills. Combatants come from all over the world to compete in Nevada, the contracted Inspectors assist in ensuring that rules and regulations are understood by non-English speakers and their fight camps. Currently, within our pool of Inspectors, we have individuals who assist with Mandarin, Spanish, Russian, Japanese, Tagalog, and Portuguese, speaking combatants and camps.

The utilization of Inspectors is a long-standing industry practice. The agency would accrue additional overtime trying to fulfill these obligations.


NRS 467.050 allows the Commission to utilize and employ inspectors as independent contractors.

This vendor has extensive knowledge of the rules and regulations of unarmed combat and has successfully completed previous Inspector Services contract terms with the Nevada State Athletic Commission. Performance was satisfactory.

Due to the inherently dangerous nature of the sport, it is imperative that the entire NSAC team (including Inspectors), are well versed in the regulations/statutes/rules and catastrophic injury protocol. Mr. Foger has proven himself to be an asset in this area.

**RECOMMENDATION**

We respectfully request your consideration for approval for NSAC to engage Mr. Foger as an Independent Contractor to provide Inspector Services at NSAC sanctioned weigh-ins and events, in all counties in the State of Nevada.



Jeff Mullen, Executive 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 Current Employee**

| Employee Information     |                                      |              |        |         |
|--------------------------|--------------------------------------|--------------|--------|---------|
| Employee Name:           | Charvez Foger                        |              |        |         |
| Employee ID Number:      | 61964                                |              |        |         |
| Job Title:               | Deputy Administrator                 |              |        |         |
| Current Employee Agency: | State of Nevada Real Estate Division |              |        |         |
| Current Class and Grade: | Class:                               | Unclassified | Grade: | G99     |
| Employment Dates:        | From:                                | 2-13-2017    | To:    | present |
| Requesting Agency:       | 010 - Athletic Commission            |              |        |         |
| Vendor:                  | Charvez Foger                        |              |        |         |

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

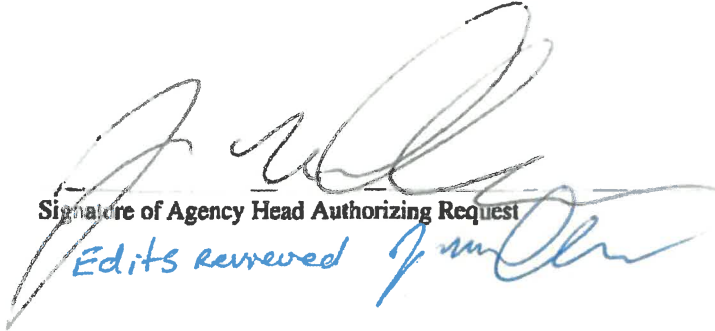

- X** Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee.
- Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services.
- Summarize scope of contract work.**
- A** Scope of work includes supporting the Athletic Commission staff during unarmed combat sport weigh-ins and events. High level summary of duties include - Pre-Inspection of Premises; Dressing Rooms; Gloves Review; Corner Inspectors; Dressing Rooms; Post-Fight Support; Other Duties as required.
- Document the employee's current job description.**
- B** Responsible for overseeing the development of the Divisions educational offerings, compliance section enhancement, new technology, staff development, and statewide outreach and resource deployment.
- Explain how this differs from current State duties.**
- C** Contractor role helps support the regulatory oversight of unarmed combat (NRS 467, NAC 467)
- D** Explain why existing State employees within your agency cannot perform these duties.

|   |  |
|---|--|
| E | <p>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, or the number of staff required to cover these tasks. Finally, the utilization of inspectors is an industry standard practice.</p> <p><b>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.</b></p> <p>There is no relationship between any Athletic Commission staff member and the contractor/s, including the individuals who oversee, monitor, or establish the contract.</p> |
| F | <p><b>List contractors' hourly rate and employee's hourly rate.</b></p> <p>Contractors are paid per weigh-in or event. There is a sliding scale based on the size of the event. The average time at an event is 10 hours, therefore the hourly range falls between \$17.50 and \$25.00 per hour. State Employee (unclassified) current hourly rate is \$55.22</p>  |
| G | <p><b>List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.</b></p> <p>Obviously, unarmed combat sports is a unique industry with its own set of regulations, rules and industry standard processes. Comparable state employee rates might include Motor Vehicle Inspector 1 - II Grade 23-25 and Brand Inspector I-II Grade 23-25 Hourly Rates \$18.88-\$20.42.</p>  |
| H | <p><b>Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%).</b></p> <p>N/A</p>   |
| I | <p><b>Document justification for hiring contractor.</b></p> <p>This vendor has knowledge of the rules and regulations of unarmed combat and has successfully completed previous Inspector Services contract terms. Performance was satisfactory.</p>   |
| J | <p><b>Will the employee be collecting PERS at any time during the contract?</b></p> <p>NO</p>  |
| K | <p><b>What is the duration of the contract with the current employee? (Include start and end date)</b></p> <p>Inspector Contracts are for a four (4) year period. If approved the contract period would be from Upon Approval Clerk of the Board to 7/31/2028.</p>   |
| L | <p><b>Will the current employee be working full time or part time? If part time, how many hours?</b></p> <p>Less than part time. Assignments are based on contractor availability and at times assignments are considered by skill level, I.E, language skills as our combatants are international. This individual worked approximately 230 hours (averaging 19.16 hours per month) over the course of Fiscal Year 2023. Expect future fiscal year estimates to be similar.</p>   |
| M | <p><b>Is the employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).</b></p> <p>NO</p>  |

**Comments – Provide any additional comments:**

NRS 467.050 allows the Commission to utilize and employ inspectors as independent contractors. Inspectors are an integral part of the Nevada State Athletic Commission team.

**Approval for Authorization to Contract with a Current Employee:**

  
Signature of Agency Head Authorizing Request  
Edits reviewed 

8-2-24  
Date  
8-8-24


N/A

Purchasing Administrator Signature (if a Statewide Contract)

Date

  
Budget Analyst Signature

8/8/2024  
Date

  
Clerk of the Board of Examiners Signature

SEP 11 2024  
Date



## Secondary Employment Disclosure

**Employee Name:** Charvez Foger  
**Employee ID number:** 61964  
**Name of Secondary Employer:**  
(If self employed, enter the business name) Nevada State Athletic Commission (NSAC)  
**Address of Secondary Employer/Self Employment:** 3300 W. Sahara Ave. Suite 450, Las Vegas, NV 89102  
**Secondary Employer Phone Number:** (702) 486-2575

|  |   |
|--|---|
| Describe the nature of the work performed by the secondary employer or self employment business.   | Provide Inspector Services at NSAC sanctioned Unarmed Combat Weigh-Ins and Events.  |
| Might this activity require or induce you to disclose controlled information obtained as part of your job or impair your independence or ethics?   | NO  |
| List the specific duties, functions, and activities that you personally will perform for the secondary employer or in the self-employment business.  | Support the Commission in the regulatory over-site of unarmed combat events. Monitoring of combatants and fight camps to ensure compliance and health & safety. |
| Document your work schedule with the secondary/self employment; how many and what hours weekly; what your State work schedule is; how many and what hours you will work weekly. Will this conflict with your State work hours? | State position is Mon-Fri 8-5pm and Secondary is weekends/evenings. I decline schedules that conflict with my full time position.                               |
| If applicable, list provider agreements, brief scope of services, and associated State agencies.   | N/A   |

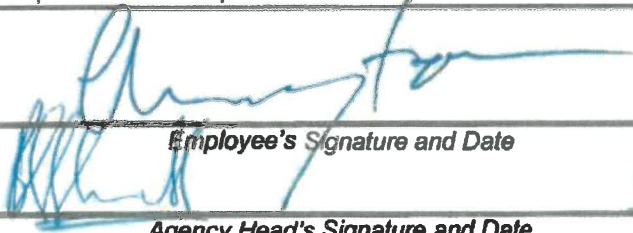

Comments:

### Employee statement

☒ I certify that my outside employment does not present a conflict with my State employment. The employment may not be construed as an extension of my duties or responsibilities with the State. I will devote my full time, attention and effort to State employment during official duty hours and not to contractual obligations. If a potential conflict arises, I will notify my supervisor and agency head, within three business days. I agree to submit a new application for approval by July 1 of each year, or within 30 days of a change in outside employment status.

### Employee's agency head shall check one of the following statements:

☒ I have reviewed the information provided on this form and determined that this secondary employment DOES NOT present a real or potential conflict of interest to the State of Nevada.  
☐ I have reviewed the information provided on this form and determined that this secondary employment DOES present a real or potential conflict of interest to the State of Nevada.

  
\_\_\_\_\_  
Employee's Signature and Date 3-11-24  
  
\_\_\_\_\_  
Agency Head's Signature and Date 3/11/24

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: 29781

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: EMETERIO FLOREZ  
Contractor Name: EMETERIO FLOREZ  
Address: 6460 Peavine Hills Ave.  
City/State/Zip: Reno, NV 89523  
Contact/Phone: Emmett Florez 775-560-8308  
Vendor No.: T29049493  
NV Business ID: NV20243188296

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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 10/14/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/31/2028

Contract term: 4 years and 18 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-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,000.00

Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes 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 only eight full-time employees 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, or the number of staff required to cover these tasks. The use of inspectors is an industry standard practice around the world. Additionally, we have no staff members in northern Nevada. A pool of local inspectors helps reduce flying inspectors up.

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 advanced 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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

Alex Ybarra, Chief Inspector Ph: 702-903-0018

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jvictor  | 09/23/2024 08:17:12 AM |
| Division Approval         | jkidd    | 09/26/2024 17:12:51 PM |
| Department Approval       | jkidd    | 09/26/2024 17:12:54 PM |
| Contract Manager Approval | ssands   | 10/03/2024 09:32:50 AM |
| Budget Analyst Approval   | rgiffor1 | 10/14/2024 13:12:21 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: **29561**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: **LEON MOREHEAD**Contractor Name: **LEON MOREHEAD**Address: **2615 HIKO AVE**City/State/Zip: **RENO, NV 89512-3239**Contact/Phone: **Leon Morehead 775/229-3709**Vendor No.: **T27044954**NV Business ID: **NV20151200915**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|               |        |          |               |   |
|---------------|--------|----------|---------------|---|
| General Funds | 0.00 % | <b>X</b> | Fees          | <b>90.00 % ATHLETIC COMMISSION GATE FEES</b>      |
| Federal Funds | 0.00 % |          | Bonds         | 0.00 %  |
| Highway Funds | 0.00 % | <b>X</b> | Other funding | <b>10.00 % TICKET SURCHARGE (AMATEUR PROGRAM)</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/17/2024**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **07/31/2028**Contract term: **3 years and 318 days**4. Type of contract: **Contract**Contract description: **Specialty Services**

5. Purpose of contract:

**This is a new contract to provide ongoing Inspector Services during Athletic Commission weigh-ins and events.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00**

Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.**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):

EFREN MENDOZA  
TED GIBSON  
CHARVEZ FOGER  
LEON MOREHEAD  
JACK LAZZORATO  
MICHAEL MARTINO

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 successfully completed previous Inspector Services contract terms. 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?

**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:

Specialty Services - Inspector Services Unarmed Combat Sports, Nevada State Athletic Commission. 2020-6/30/024. Performance 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:  
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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

ALDO GALVAN, Chief Inspector Ph: 702-327-5947

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mlynn    | 08/02/2024 10:23:25 AM |
| Division Approval         | nmann    | 08/28/2024 13:42:19 PM |
| Department Approval       | nmann    | 08/28/2024 13:42:23 PM |
| Contract Manager Approval | ssands   | 08/28/2024 14:45:13 PM |
| Budget Analyst Approval   | rgiffor1 | 09/17/2024 16:02:11 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: 29543

Agency Name: GOVERNOR'S OFFICE

Agency Code: 010

Appropriation Unit: 3952-04

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: MENDOZA, EFREN

Contractor Name: MENDOZA, EFREN

Address: 370 STRADELLA WAY

City/State/Zip: RENO, NV 89521-4298

Contact/Phone: Efren Mendoza 775/815-3864

Vendor No.: T27006388

NV Business ID: NV20121216302

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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

b. other effective date 09/18/2024

Anticipated BOE meeting date 09/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/31/2028

Contract term: 3 years and 317 days

4. Type of contract: Contract

Contract description: Specialty Services

5. Purpose of contract:

This is a new contract to provide ongoing Chief Inspector Services during Athletic Commission weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,000.00

Other basis for payment: \$150-\$250 per event (additional \$100 if assigned event lead) and \$75-\$150 per weigh-in or gym inspection, not to exceed \$30,000 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.

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):

Jack Lazzoratto  
Michael Martino  
Ted Gibson  
Leon Morehead  
Charvez Foger  
Efren Mendoza

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 successfully completed previous Inspector Services contract terms. 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?

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

Athletic Commission - Specialty Services (Inspector Unarmed Combat) . 2020-6/30/2024. Performance 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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

Aldo Galvan, Chief Inspector Ph: 702-327-5947

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mlynn    | 08/28/2024 11:23:19 AM |
| Division Approval         | nmann    | 08/28/2024 12:31:35 PM |
| Department Approval       | nmann    | 08/28/2024 12:31:38 PM |
| Contract Manager Approval | ssands   | 08/28/2024 13:02:10 PM |
| Budget Analyst Approval   | rgiffor1 | 09/18/2024 11:33:44 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: 29560

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: Michael S Martino  
Contractor Name: Michael S Martino  
Address: 1400 COPPER POINT CIR  
City/State/Zip: RENO, NV 89519-6262  
Contact/Phone: Mike Martino 775/303-3747  
Vendor No.: T80931199  
NV Business ID: NV20121007823

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to 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 09/17/2024  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 07/31/2028  
Contract term: 3 years and 318 days

4. Type of contract: Contract  
Contract description: Specialty Services

5. Purpose of contract:  
This is a new contract to provide ongoing Inspector Services during Athletic Commission weigh-ins and events.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$30,000.00  
Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.

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):



JACK LAZZAROTTO  
EFEN MENDOZA  
LEON MOREHEAD  
GHARVEZ FOGER  
TED GIBSON  
MICHAEL MARTINO

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:

Specialty Services - Inspector Services Unarmed Combat Sports. Nevada State Athletic Commission 2020-6/30/2024. Performance 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:

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

Aldo Galvan, Chief Inspector Ph: 702-327-5947

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mlynn    | 08/02/2024 10:20:55 AM |
| Division Approval         | nmann    | 08/28/2024 14:28:13 PM |
| Department Approval       | nmann    | 08/28/2024 14:28:26 PM |
| Contract Manager Approval | ssands   | 08/28/2024 14:40:11 PM |
| Budget Analyst Approval   | rgiffor1 | 09/17/2024 15:50:40 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29558

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: Ted Gibson  
Contractor Name: Ted Gibson  
Address: 3397 NAMBE DR  
City/State/Zip: RENO, NV 89511-4300  
Contact/Phone: Ted Gibson 775/851-9669  
Vendor No.: T27021503  
NV Business ID: NV20243076243

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

|               |        |   |               |         |                                    |
|---------------|--------|---|---------------|---------|------------------------------------|
| General Funds | 0.00 % | X | Fees          | 90.00 % | ATHLETIC COMMISSION GATE FEE       |
| Federal Funds | 0.00 % |   | Bonds         | 0.00 %  |                                    |
| Highway Funds | 0.00 % | X | Other funding | 10.00 % | TICKET SURCHARGE (AMATEUR PROGRAM) |

2. Contract start date:  
a. Effective upon Board of Examiner's approval? No or b. other effective date 09/17/2024  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 07/31/2028  
Contract term: 3 years and 318 days

4. Type of contract: Contract  
Contract description: Specialty Services

5. Purpose of contract:  
This is a new contract to provide ongoing Inspector Services during Athletic Commission weigh-ins and events.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$30,000.00  
Other basis for payment: \$150-\$250 per event (based on event size/duration) and \$75-\$150 per weigh-in and per assignment of gym inspection; not to exceed \$30,000 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 only 8 full-time employees 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, or the number of staff required to cover these tasks. The use of Inspectors is an industry standard practice around the world.

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):

Efren Mendoza  
Ted Gibson  
Michael Martino  
Charvez Foger  
Leon Morehead

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 successfully completed previous Inspector Services contract terms. 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?

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:

Specialty Services - Inspector Services unarmed combat sports with Nevada State Athletic Commission. Performance Satisfactory. 2020-6/30/2024

14. Is the contractor currently involved in litigation with the State 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:

Aldo Galvan, Chief Inspector Ph: 702-327-5947

Matthew Valenzuela, Chief Assistant Ph: 702-486-2581

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mlynn    | 08/02/2024 10:17:14 AM |
| Division Approval         | nmann    | 08/28/2024 14:57:46 PM |
| Department Approval       | nmann    | 08/28/2024 14:57:49 PM |
| Contract Manager Approval | ssands   | 08/28/2024 15:03:24 PM |
| Budget Analyst Approval   | rgiffor1 | 09/17/2024 15:08:10 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: 29633

Agency Name: GOVERNOR'S FINANCE OFFICE  
Agency Code: 015  
Appropriation Unit: 1340-04  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: MAXIMUS US Services, Inc.  
Contractor Name: MAXIMUS US Services, Inc.  
Address: 1600 Tysons Boulevard Ste 1400  
City/State/Zip: McLean, VA 22102  
Contact/Phone: 631-847-5526  
Vendor No.: T27043917  
NV Business ID: NV20081088905

To what State Fiscal Year(s) will the contract be charged? 2025-2028

What is the source of funds that 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 09/27/2024  
Anticipated BOE meeting date 10/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 07/30/2027  
Contract term: 2 years and 306 days

4. Type of contract: Other (include description): Service Agreement  
Contract description: SWCAP

5. Purpose of contract:  
This is a new service agreement under statewide contract 99SWC-NV23-17895 which provides consulting, marketing, and education services. This service agreement provides rate development consulting and calculation services.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$83,300.00

II. JUSTIFICATION

7. What conditions require that this work be done?  
This service is a requirement of Nevada Revised Statutes 353.331, and the work is beyond the capability and expertise of the state agency.

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

9. Were quotes or proposals solicited? No  
Was the solicitation (RFP) done by the Purchasing Division? No  
a. List the names of vendors that were solicited to submit proposals (include at least three):  
Not Applicable  
b. Solicitation Waiver: Not Applicable  
c. Why was this contractor chosen in preference to other?

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

10. 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   | mlynn    | 08/07/2024 18:43:11 PM |
| Division Approval         | jkidd    | 08/15/2024 14:52:02 PM |
| Department Approval       | jkidd    | 08/15/2024 14:52:06 PM |
| Contract Manager Approval | ssands   | 09/20/2024 07:24:23 AM |
| Budget Analyst Approval   | djohns37 | 09/27/2024 08:14:30 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: 29676

Agency Name: ATTORNEY GENERAL'S OFFICE  
Agency Code: 030  
Appropriation Unit: 1038-10  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: MSB ENERGY ASSOCIATES, INC.  
Contractor Name: MSB ENERGY ASSOCIATES, INC.  
Address: 6907 UNIVERSITY AVE. #162  
City/State/Zip: MIDDLETON, WI 53562-2767  
Contact/Phone: Jerry Mendl 608-219-0698  
Vendor No.: T27007225  
NV Business ID: NV20101475151

To what State Fiscal Year(s) will the contract be charged? 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 % Regulatory Assessments |

Agency Reference #: 26746

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 11/01/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 05/24/2025

Contract term: 204 days

4. Type of contract: Contract

Contract description: Professional Service

5. Purpose of contract:

This is a new contract to provide ongoing professional services as an expert witness and full litigation support to the Bureau of Consumer Protection for matters relating to utilities' energy planning and procurement, demand and supply alternatives, prudence review, as well as environmental and ratepayer impacts.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$80,000.00

Payment for services will be made at the rate of \$175.00 per hour maximum.

Other basis for payment: Invoices must be itemized by description of work performed, dates of services provided and approval by the Bureau of Consumer Protection.

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory requirement to represent consumer's interests in matters before the Public Utilities Commission and any legislature, board or commission with jurisdiction over Nevada regulated public utilities.

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

Specialized expertise is required by our office to adequately protect the public interest.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

This vendor was chosen for their specialized expertise, availability and reasonable rate.

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:

Since 2004 this contractor has provided services to the Bureau of Consumer Protection of the Office of the Attorney General. All previous services have been completed 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:

Michael Saunders, Sr. Deputy Attorney General Ph: (702) 486-3793

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jhoba2   | 09/17/2024 11:04:24 AM |
| Division Approval         | jhoba2   | 09/17/2024 11:04:27 AM |
| Department Approval       | jhoba2   | 09/17/2024 11:04:30 AM |
| Contract Manager Approval | pmcco1   | 09/17/2024 11:19:51 AM |
| Budget Analyst Approval   | vmilazz1 | 09/30/2024 15:28:32 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: **29510**

|   |   |
|---|---|
| Agency Name: <b>ATTORNEY GENERAL'S OFFICE</b> | Legal Entity Name: <b>JOHNNY EDWARD BATES</b>                 |
| Agency Code: <b>030</b>                       | Contractor Name: <b>QCHC MANAGEMENT SERVICES COMPANY, INC</b> |
| Appropriation Unit: <b>1348-15</b>            | Address: <b>200 NARROW PARKWAY, SUITE A</b>                   |
| Is budget authority available?: <b>Yes</b>    | City/State/Zip: <b>BIRMINGHAM, AL 35242</b>                   |
| If "No" please explain: Not Applicable        | Contact/Phone: <b>JOHNNY BATES 205-437-1512</b>               |
|   | Vendor No.: <b>T29046175</b>                                  |
|   | NV Business ID: <b>NV20222614175</b>                          |

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % | <b>X Other funding</b> | <b>100.00 % TORT CLAIMS</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/15/2024**

Anticipated BOE meeting date 09/2024

Retroactive? **Yes**

If "Yes", please explain

**We are requesting this contract to be retroactive to July 15, 2024, due to our office having an increase in workload due to training of new staff, budget build and budget close and we did not have the resources available to accurately complete and process this contract sooner.**

3. Termination Date: **06/30/2026**Contract term: **1 year and 350 days**4. Type of contract: **Contract**Contract description: **Expert Witness**

5. Purpose of contract:

**This is a new contract to provide ongoing expert witness services for a correctional healthcare lawsuit.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,000.00**

Other basis for payment: \$650 an hour and \$3,500 for a half day of a deposition.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

The expert will review documents and reports and testify as the correctional healthcare expert.

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 matter.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

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



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

(b) (1) An expert witness

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 vendor has current contracts (CETS #26984 & #28980) with the Office of the Attorney General. The vendor is performing satisfactory on their current contracts with the Office of the Attorney General and would like to continue working with this vendor as their expert witness.

14. Is the contractor currently involved in litigation with the State 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:

Its a DBA.

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

NATHAN CLAUS, Deputy Attorney General Ph: (702) 486-7629

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jhoba2   | 08/09/2024 13:37:33 PM |
| Division Approval         | jhoba2   | 08/09/2024 13:37:38 PM |
| Department Approval       | jhoba2   | 08/09/2024 13:37:42 PM |
| Contract Manager Approval | tlyon1   | 10/03/2024 16:13:50 PM |
| Budget Analyst Approval   | vmilazz1 | 10/11/2024 16:25:17 PM |

AARON D. FORD  
*Attorney General*

CRAIG A. NEWBY  
*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

TERESA BENITEZ-  
THOMPSON  
*Chief of Staff*

LESLIE NINO PIRO  
*General Counsel*

HEIDI PARRY STERN  
*Solicitor General*

## MEMORANDUM

**To:** Budd Milazzo  
Governor's Finance Office

**From:** Tanya Lyons  
Office of the Attorney General

**Date:** October 3, 2024

**Subject:** Retroactive Approval for Contract #29510 QCHC Management  
Services Company, Inc.

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We are requesting this contract to be retroactive to July 15, 2024, due to our office having an increase in workload due to training of new staff, budget build and budget close and we did not have the resources available to accurately complete and process this contract sooner.

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CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29772

Agency Name: SECRETARY OF STATE'S OFFICE  
Agency Code: 040  
Appropriation Unit: 1050-41  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: CLARK COUNTY SCHOOL DISTRICT  
Contractor Name: CLARK COUNTY SCHOOL DISTRICT  
Address: 3050 E FLAMINGO RD  
City/State/Zip: LAS VEGAS, NV 89121  
Contact/Phone: NATALIE CULLEN 702-799-1010  
Vendor No.: T40231800  
NV Business ID: NV19721001277

To what State Fiscal Year(s) will the contract be charged? 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 %  
Federal Funds 0.00 %  
Highway Funds 0.00 %

Fees 0.00 %  
Bonds 0.00 %  
Other funding 0.00 %

2. Contract start date:  
a. Effective upon Board of Examiner's approval? No or b. other effective date 09/12/2024  
Anticipated BOE meeting date 10/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 06/30/2025  
Contract term: 291 days

4. Type of contract: Interlocal Agreement  
Contract description: Vegas PBS - Voter Ed

5. Purpose of contract:  
This is a new interlocal agreement to create engaging content for voter education.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$82,405.00  
Other basis for payment: As invoiced by contractor and approved by the state.

II. JUSTIFICATION

7. What conditions require that this work be done?  
The Secretary of State's office is in collaboration with the Clark County School District, Vegas PBS, to create videos to cover voting processes, elections types, and candidate offices. The videos will be distributed across multiple platforms with the intent to support the education of elections.

8. Explain why State employees in your agency or other State agencies are not able to do this work:  
Employees of the state of Nevada do not have the expertise nor the platform to create video content.

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?

Interlocal between state agencies

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   | dbowma1  | 09/10/2024 10:17:27 AM |
| Division Approval         | dbowma1  | 09/10/2024 10:17:30 AM |
| Department Approval       | dbowma1  | 09/10/2024 10:17:35 AM |
| Contract Manager Approval | pmclaugh | 09/12/2024 14:07:55 PM |
| Budget Analyst Approval   | mranki1  | 09/12/2024 14:11:53 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: **28679** Amendment Number: **1**

Legal Entity Name: **Estipona Group**

Agency Name: **TREASURER - COLLEGE SAVINGS TRUST** Contractor Name: **Estipona Group**

Agency Code: **051** Address: **P.O. Box 10606**

Appropriation Unit: **1092-20** City/State/Zip: **Reno, NV 89510**

Is budget authority available?: **Yes** Contact/Phone: **Edward Estipona 775-624-8720**

If "No" please explain: **Not Applicable** Vendor No.: **T29035435**

NV Business ID: **NV19951042070**

To what State Fiscal Year(s) will the contract be charged? **2024-2025**

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.

|          |               |               |                        |   |
|----------|---------------|---------------|------------------------|---|
| <b>X</b> | General Funds | <b>6.00 %</b> | Fees                   | <b>0.00 %</b>   |
|          | Federal Funds | <b>0.00 %</b> | Bonds                  | <b>0.00 %</b>   |
|          | Highway Funds | <b>0.00 %</b> | <b>X</b> Other funding | <b>94.00 % Transfers from Endowment, Abandoned Property</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/13/2024**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved Termination Date: **01/31/2025**Contract term: **353 days**4. Type of contract: **Contract**Contract description: **Marketing**

5. Purpose of contract:

**This is the first amendment to the original service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services. This amendment increases the maximum amount from \$345,299 to \$433,299 due to the addition of marketing services for programs in the the Financial Literacy and Security Division.**

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$345,299.00 | \$345,299.00  | \$345,299.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$88,000.00  | \$88,000.00   | \$88,000.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$433,299.00 |               |                 |              |

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**NRS 353B.370 authorizes the College Savings Board to contract with qualified entities for the day-to-day operations of the Nevada College Savings Programs as the program administrator for the management of marketing of the program(s).**

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

The State Treasurer's Office is seeking the services of the professional marketing firm, which is outside the scope of the expertise of staff members.

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 chosen based on their proposal and the services they can provide to fit the marketing needs of the Nevada College Savings program(s).

d. Last bid date: 08/01/2023 Anticipated re-bid date: 07/30/2027

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 use these services under the State Purchasing 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:

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   | jlanderf | 09/18/2024 16:10:08 PM |
| Division Approval         | jlanderf | 09/18/2024 16:10:29 PM |
| Department Approval       | jlanderf | 09/18/2024 16:11:05 PM |
| Contract Manager Approval | jveit    | 09/18/2024 16:15:11 PM |
| Budget Analyst Approval   | stilly   | 10/11/2024 14:00:49 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: 28678

Amendment Number: 1

Legal Entity Name: The Abbi Agency

Agency Name: TREASURER - COLLEGE SAVINGS TRUST

Contractor Name: The Abbi Agency

Agency Code: 051

Address: 1385 Haskell Street, Suite A

Appropriation Unit: 1092-20

City/State/Zip: Reno, NV 89509

Is budget authority available?: Yes

Contact/Phone: Patrick Whitaker 775-323-2977

If "No" please explain: Not Applicable

Vendor No.: T27037235

NV Business ID: NV20081200897

To what State Fiscal Year(s) will the contract be charged? 2024-2025

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 % Transfer from Endowment Account |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 02/13/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 01/31/2025

Contract term: 353 days

4. Type of contract: Contract

Contract description: Marketing

5. Purpose of contract:

This is the first amendment to the original service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services. This amendment increases the maximum amount from \$345,299 to \$433,299 due to the addition of marketing services for programs in the the Financial Literacy and Security Division.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$345,299.00 | \$345,299.00  | \$345,299.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$88,000.00  | \$88,000.00   | \$88,000.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$433,299.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 353B.370 authorizes the College Savings Board to contract with qualified entities for the day-to-day operations of the Nevada College Savings Programs as the program administrator for the management of marketing of the program(s).

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

The State Treasurer's Office is seeking the services of the professional marketing firm, which is outside the scope of the expertise of staff members.

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 chosen based on their proposal and the services they can provide to fit the marketing needs of the Nevada College Savings program(s).

d. Last bid date: 08/01/2023 Anticipated re-bid date: 07/30/2027

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 use these services under the State Purchasing 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:

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   | jlanderf | 09/18/2024 16:07:40 PM |
| Division Approval         | jlanderf | 09/18/2024 16:07:58 PM |
| Department Approval       | jlanderf | 09/18/2024 16:08:16 PM |
| Contract Manager Approval | jveit    | 09/19/2024 11:43:18 AM |
| Budget Analyst Approval   | stilly   | 10/03/2024 17:25:26 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: 29597

Agency Name: TREASURER - UNCLAIMED PROPERTY  
Agency Code: 054  
Appropriation Unit: 3815-04  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: HUNTINGTON GEM LAB, LLC  
Contractor Name: HUNTINGTON GEM LAB, LLC  
Address: 6655 W Sahara Ave, Ste B200  
City/State/Zip: LAS VEGAS, NV 89146  
Contact/Phone: Richard Huntington 702/810-6103  
Vendor No.: T27021390  
NV Business ID: NV20081264098

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 10/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/31/2028

Contract term: 4 years and 31 days

4. Type of contract: Contract

Contract description: Unclaimed Appraisals

5. Purpose of contract:

This is a new contract to provide ongoing appraisal of safekeeping items to be auctioned off at public auctions.

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 \$125.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 120A.610 mandates that abandoned safe deposit box contents be sold at public auctions within two years of receipt by the State Treasurer's Office, Unclaimed Property Division. A professional appraisal is necessary to establish fair market value for the items auctioned.

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

State Treasurer's Office employees do not possess the expertise necessary to perform professional appraisal 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):

The Jewelers of Las Vegas  
Nevada Coin Mart  
Huntington Gem Lab

b. Solicitation Waiver: **Not Applicable**

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

The selected vendor was the only vendor interested.

d. Last bid date: 03/04/2024 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:

State Treasurer's Office, Unclaimed Property Division - excellent

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

No If "Yes", please provide details of the litigation 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   | Ihoove1 | 08/02/2024 10:23:30 AM |
| Division Approval         | Ihoove1 | 08/02/2024 10:24:06 AM |
| Department Approval       | Ihoove1 | 08/02/2024 10:25:48 AM |
| Contract Manager Approval | Ihoove1 | 08/02/2024 10:26:21 AM |
| Budget Analyst Approval   | stilley | 09/11/2024 14:11:52 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: **29791**

|                                 |                                       |                    |                                 |
|---------------------------------|---------------------------------------|--------------------|---------------------------------|
| Agency Name:                    | <b>TREASURER - FINANCIAL SECURITY</b> | Legal Entity Name: | SHI INTERNATIONAL CORP.         |
| Agency Code:                    | <b>055</b>                            | Contractor Name:   | <b>SHI INTERNATIONAL CORP.</b>  |
| Appropriation Unit:             | <b>1104-04</b>                        | Address:           | <b>290 Davidson Ave</b>         |
| Is budget authority available?: | <b>Yes</b>                            | City/State/Zip     | <b>Somerset, NJ 08873</b>       |
| If "No" please explain:         | Not Applicable                        | Contact/Phone:     | Michael Greenfeder 732-652-4752 |
|                                 |                                       | Vendor No.:        | PUR0001595C                     |
|                                 |                                       | NV Business ID:    | NV20131129294                   |

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % | <b>X Other funding</b> | <b>100.00 % 6150: Abandoned Property</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/04/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2025**Contract term: **361 days**4. Type of contract: **Contract**Contract description: **Web Module Build**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV23-12271 which provides software value-added resources. This service agreement provides development and user training for a new module within the existing IQ System to enable eligible providers of health care to submit applications for student loan repayment.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,509.74**

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 Student Loan Repayment for Providers of Health Care in Underserved Communities Program is a newly created program in the State Treasurer's Office whereby eligible providers of health care may apply for up to \$120,000 in student loan repayment funding (over a period of five years) if they commit to clinical practice in underserved communities throughout the State. The State will pay the loan servicers directly on behalf of those providers who are awarded funding. This project will create and implement a new module within the State Treasurer's Office existing IQ System, to allow for providers of health care to submit applications and required documents. It will also provide a certain level of automation and reporting for the application process. Project management/supervision, system configuration, webform development and onsite user training for the new IQ System module is included in this project.**

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

**State employees are not qualified to create the type of module required for this Program.**

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?

Quotes and proposals were solicited for the Statewide bid through Purchasing Division

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?

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 is a Statewide contract and used by numerous agencies. STO is satisfied with the products and services SHI provides.

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

**No** If "Yes", please provide details of the litigation 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   | lhoove1 | 09/17/2024 08:00:59 AM |
| Division Approval         | lhoove1 | 09/17/2024 08:01:03 AM |
| Department Approval       | lhoove1 | 09/17/2024 08:01:06 AM |
| Contract Manager Approval | jveit   | 09/17/2024 08:01:48 AM |
| EITS Approval             | ljea    | 09/20/2024 11:54:22 AM |
| Budget Analyst Approval   | stille  | 10/04/2024 13:36:58 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: 29677

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: ADVANCED LOCKSMITH SERVICES

Contractor Name: ADVANCED LOCKSMITH SERVICES

Address: PO BOX 4707

City/State/Zip: SPARKS, NV 89432-4707

Contact/Phone: Leah Morby 775-425-5005

Vendor No.: T81072313

NV Business ID: NV20021516256

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 Rent Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 10/08/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/31/2028

Contract term: 3 years and 297 days

4. Type of contract: Contract

Contract description: Locksmith services

5. Purpose of contract:

This is a new contract to provide ongoing locksmith services to various buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$32,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide ongoing locksmith services to various buildings in northern Nevada.

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 facilitate 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):

Alpine lock and key  
Integrity Locksmith  
Advanced Locksmith Services

b. Solicitation Waiver: Not Applicable

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

Advanced Locksmith Services provided the lowest 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?

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:

Advanced Locksmith Services has been a vendor to various agencies since 1950 and the agency is satisfied with their 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:

Michael Johnson, Facility Manager Ph: 775-690-8208

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | dcarlso4 | 08/28/2024 09:52:25 AM |
| Division Approval         | nmann    | 08/28/2024 11:14:09 AM |
| Department Approval       | nmann    | 08/28/2024 11:14:14 AM |
| Contract Manager Approval | bhow1    | 09/26/2024 10:19:44 AM |
| Budget Analyst Approval   | klay0    | 10/08/2024 17:02:41 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29652

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: American Lawn and Landscaping, LLC  
Contractor Name: American Lawn and Landscaping, LLC  
Address: 3810 Fairview Road  
City/State/Zip: Reno, NV 89511  
Contact/Phone: 775-443-8989  
Vendor No.: T32015096  
NV Business ID: NV20201869846

To what State Fiscal Year(s) will the contract be charged? 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 % Buildings and Grounds Rental Income |

2. Contract start date:  
a. Effective upon Board of Examiner's approval? No or b. other effective date 09/07/2024  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 06/30/2025  
Contract term: 296 days

4. Type of contract: Contract  
Contract description: Snow Removal

5. Purpose of contract:  
This is a new contract to provide snow removal and ice melt services at 10375 Professional Circle in Reno.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$50,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?  
Remove snow and ice from 10375 Professional Circle for health and safety.

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 equipment or the manpower needed 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):  
American Lawn and Landscaping  
Summerscape  
b. Solicitation Waiver: Not Applicable  
c. Why was this contractor chosen in preference to other?  
Summerscape did not have room for another location

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   | slon5  | 08/15/2024 07:56:38 AM |
| Division Approval         | jkidd  | 08/22/2024 14:47:53 PM |
| Department Approval       | jkidd  | 08/22/2024 14:47:57 PM |
| Contract Manager Approval | ssands | 08/26/2024 10:38:49 AM |
| Budget Analyst Approval   | klay0  | 09/07/2024 11:04:38 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: 24375

Amendment Number: 1

Legal Entity Name: B&L BACKFLOW TESTING SPECIALIST, LLC

Contractor Name: B&L BACKFLOW TESTING SPECIALIST, LLC

Address: PO BOX 4867

City/State/Zip: INCLINE VILLAGE, NV 89450-4867

Contact/Phone: Linda Buxton 775-831-0123

Vendor No.: T27036732

NV Business ID: NV20021021494

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

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

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

|               |        |                 |  |
|---------------|--------|-----------------|--|
| General Funds | 0.00 % | Fees            | 0.00 %                                       |
| Federal Funds | 0.00 % | Bonds           | 0.00 %                                       |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Buildings and Grounds Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 06/11/2021

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 04/30/2025

Contract term: 3 years and 324 days

4. Type of contract: Contract

Contract description: backflow testing

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing backflow testing, repair, and cleaning for all state-owned facilities in the northern Nevada area. This amendment increases the maximum amount from \$39,752 to \$55,752 due to the addition of newly acquired properties in the area.

| 6. CONTRACT AMENDMENT |  | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|-----------------------|--|-------------|---------------|-----------------|------------|
| 1.                    | The max amount of the original contract: | \$39,752.00 | \$39,752.00   | \$39,752.00     | Yes - Info |
| 2.                    | Amount of current amendment (#1):        | \$16,000.00 | \$16,000.00   | \$55,752.00     | Yes - Info |
| 3.                    | New maximum contract amount:             | \$55,752.00 |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

This work is required by the State Health Department to protect potable water systems.

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

Lack of manpower, equipment and experience

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 per quote

d. Last bid date: 04/13/2021 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:  
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   | slon5  | 06/11/2024 09:55:01 AM |
| Division Approval         | nmann  | 08/15/2024 10:30:33 AM |
| Department Approval       | nmann  | 08/15/2024 10:31:40 AM |
| Contract Manager Approval | ssands | 08/15/2024 15:40:29 PM |
| Budget Analyst Approval   | klay0  | 09/07/2024 10:15:33 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: 27241

Amendment Number: 1

Legal Entity Name: Bombard Electric, LLC

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Contractor Name: Bombard Electric, LLC

Address: 4380 West Post Road

Agency Code: 082

City/State/Zip: Las Vegas, NV 89118

Appropriation Unit: 1349-12

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Contact/Phone: Jess Prisbrey 7022633570

Vendor No.: T27020126

NV Business ID: NV20051306419

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 % | Fees            | 0.00 %                                       |
| Federal Funds | 0.00 % | Bonds           | 0.00 %                                       |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Buildings and Grounds Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 03/31/2023

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 04/13/2027

Contract term: 4 years and 14 days

4. Type of contract: Contract

Contract description: Electrical

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing electrical services, maintenance, and repairs as needed in state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$33,302.55 to \$49,802.55 due to the addition of newly acquired buildings.

6. CONTRACT AMENDMENT

|   | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|---|-------------|---------------|-----------------|------------|
| 1. The max amount of the original contract: | \$33,302.55 | \$33,302.55   | \$33,302.55     | Yes - Info |
| 2. Amount of current amendment (#1):        | \$16,500.00 | \$16,500.00   | \$49,802.55     | Yes - Info |
| 3. New maximum contract amount:             | \$49,802.55 |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

Maintain proper operation of electrical systems in State-owned buildings.

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 for 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):

b. Solicitation Waiver: **Not Applicable**

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

This is one of many contractors and per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 12/15/2022 Anticipated re-bid date: 12/15/2026

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:

B&G from 01/01/2019 to 12/31/2022

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

**No** If "Yes", please provide details of the litigation 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   | slon5  | 06/03/2024 16:43:23 PM |
| Division Approval         | nmann  | 06/04/2024 12:22:18 PM |
| Department Approval       | ssands | 06/04/2024 13:02:10 PM |
| Contract Manager Approval | ssands | 08/26/2024 11:02:49 AM |
| Budget Analyst Approval   | klay0  | 09/10/2024 09:12:52 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: **29554**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: Burney's Commercial Service of Nevada Inc.

Contractor Name: **Burney's Commercial Service of Nevada Inc.**Address: **1528 Linda Way**City/State/Zip: **Sparks, NV 89431**

Contact/Phone: Paul Boyer 775-355-9111

Vendor No.: T8909486

NV Business ID: NV19791004978

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? 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 % | <b>X Other funding</b> | <b>100.00 % Buildings and Grounds Rental Income</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/15/2024**

Anticipated BOE meeting date 09/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **07/31/2028**Contract term: **3 years and 290 days**4. Type of contract: **Contract**Contract description: **Appliance Repair**

5. Purpose of contract:

**This is a new contract to provide repair and maintenance services for the commercial appliances at the Governor's Mansion and Nevada Room.**

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?

Commercial appliances at the Governor's Mansion and Nevada Room are in need of maintenacne and repairs and are necessary safety practices as well as certification purposes.

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 facilitate.

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):

Hill Top Refrigeration  
Burney's Commercial  
Mountain Vistab. Solicitation Waiver: **Not Applicable**

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

best 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:

Since 2017 -Various state agencies-service is satisfactory

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User   | Signature Date         |
|---------------------------|--------|------------------------|
| Budget Account Approval   | slon5  | 07/28/2024 12:57:29 PM |
| Division Approval         | jkidd  | 08/29/2024 12:20:42 PM |
| Department Approval       | jkidd  | 08/29/2024 12:20:46 PM |
| Contract Manager Approval | ssands | 10/09/2024 10:52:07 AM |
| Budget Analyst Approval   | klay0  | 10/15/2024 18:52:24 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29386

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: G & S Window Cleaning, LLC  
Contractor Name: G & S Window Cleaning, LLC  
Address: 9706 Summer Bliss Avenue  
City/State/Zip: Las Vegas, NV 89149  
Contact/Phone: Kevin Sarbacker 702-889-9779  
Vendor No.: T32016048  
NV Business ID: NV20212096630

To what State Fiscal Year(s) will the contract be charged? 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 % Buildings and Grounds Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 09/07/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2024

Contract term: 115 days

4. Type of contract: Contract

Contract description: Window cleaning

5. Purpose of contract:

This is a new contract to provide ongoing exterior window cleaning for the Storey, Lyon, Douglas, Esmeralda, and Elko buildings at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,334.00

Other basis for payment: \$9,334.00 and \$5,000.00 extra services if needed

II. JUSTIFICATION

7. What conditions require that this work be done?

Window cleaning removes dirt and grime and helps the building look clean, neat and prolongs the life of the windows.

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 personnel to do this job.

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):

Real Window Cleaning  
Vegas VIP Cleaning  
G & S Window Cleaning  
Enzl's Cleaning Service

b. Solicitation Waiver: **Not Applicable**

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

Best quote for the job

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   | slon5  | 06/13/2024 10:10:07 AM |
| Division Approval         | nmann  | 08/14/2024 11:55:41 AM |
| Department Approval       | nmann  | 08/14/2024 11:55:47 AM |
| Contract Manager Approval | ssands | 08/14/2024 12:02:11 PM |
| Budget Analyst Approval   | klay0  | 09/07/2024 09:26:13 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: 29671

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: LAWYER MECHANICAL SERVICES, INC.

Contractor Name: LAWYER MECHANICAL SERVICES, INC.

Address: AC SYSTEMS SUPPLY/LAWYER TRANE  
3036 S. VALLEY VIEW BLVD.  
LAS VEGAS, NV 89102-7805

City/State/Zip: LAS VEGAS, NV 89102-7805

Contact/Phone: John Miramontes 702/876-7530

Vendor No.: T80172730B

NV Business ID: NV19711001712

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 Rent Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 10/03/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/31/2028

Contract term: 3 years and 333 days

4. Type of contract: Contract

Contract description: HVAC Maintenance

5. Purpose of contract:

This is a new contract to provide emergency heating, ventilation, and air conditioning maintenance and repair for various buildings in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$37,301.21

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide emergency heating, ventilation, and air conditioning maintenance and repair for various buildings in southern Nevada.

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 facilitate 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):

Carrier  
Emcor  
Lawyer Mechanical Services Inc

b. Solicitation Waiver: **Not Applicable**

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

Lawyer Mechanical Services provided the lowest 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?

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:

Lawyer Mechanical Services has been a vendor to various agencies since 1999 and the agency is satisfied with their 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:

Terra Cooke-Gatzmer, HVAC Specialist III Ph: 702-481-4286

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | dcarlso4 | 08/28/2024 09:50:14 AM |
| Division Approval         | nmann    | 08/28/2024 11:10:35 AM |
| Department Approval       | nmann    | 08/28/2024 11:10:40 AM |
| Contract Manager Approval | bhow1    | 08/28/2024 11:26:05 AM |
| Budget Analyst Approval   | klay0    | 10/03/2024 10:05:41 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: 29666

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: MESA ENERGY SYSTEMS, INC.  
Contractor Name: MESA ENERGY SYSTEMS, INC.  
Address: 6295 S. PEARL ST., STE. 1400  
City/State/Zip: LAS VEGAS, NV 89120  
Contact/Phone: Randy Alvarado 702 597-0314  
Vendor No.: T27027115A  
NV Business ID: NV20071267110

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 09/10/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/31/2028

Contract term: 3 years and 356 days

4. Type of contract: Contract

Contract description: HVAC Maintenance

5. Purpose of contract:

This is a new contract to provide ongoing emergency heating, ventilation, and air conditioning maintenance and repair for various buildings in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$53,953.23

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide ongoing emergency heating, ventilation, and air conditioning maintenance and repair for various buildings in southern Nevada.

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 facilitate 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):

Carrier  
LMS  
Emcor

b. Solicitation Waiver: Not Applicable

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

Mesa Energy provided the lowest 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?

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:

Mesa Energy has been a vendor to various agencies since 2022 and the agency is satisfied with their 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:

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:

Terra Cooke-Gatsmer, HVACR Specialist III Ph: 702-481-4286

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | dcarlso4 | 08/28/2024 09:48:21 AM |
| Division Approval         | nmann    | 08/28/2024 11:03:54 AM |
| Department Approval       | nmann    | 08/28/2024 11:03:59 AM |
| Contract Manager Approval | ssands   | 09/04/2024 10:46:46 AM |
| Budget Analyst Approval   | klay0    | 09/10/2024 11:52:39 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29473

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: PAR-3 LANDSCAPE & MAINTENANCE

Contractor Name: PAR-3 LANDSCAPE & MAINTENANCE

Address: 4610 WYNN RD.

City/State/Zip: LAS VEGAS , NV 89074

Contact/Phone: Bobby Rivera 702-253-7878

Vendor No.: T29047645

NV Business ID: NV19951047149

To what State Fiscal Year(s) will the contract be charged? 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 % Buildings and Grounds Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 09/07/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 04/30/2025

Contract term: 235 days

4. Type of contract: Contract

Contract description: Landscaping

5. Purpose of contract:

This is a new contract to provide ongoing landscaping services to various buildings at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$79,784.24

II. JUSTIFICATION

7. What conditions require that this work be done?

This new contract will provide Landscape services for State properties needing to be maintained and serviced for the safety of the employees and public.

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 facilitate 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):

Par3 Landscape  
Bright View  
Tierra Scapes  
Del Sol Landscape

b. Solicitation Waiver: **Not Applicable**

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

Par 3 Landscape provided the lowest 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?

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:

Par 3 Landscape & maintenance has been a vendor to various agencies since 2006 and the agency is satisfied with their 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:

Ryan Reigle, Facility Supervisor III Ph: 702-486-4305

20. Contract Status:

Contract Approvals:

| Approval Level            | User  | Signature Date         |
|---------------------------|-------|------------------------|
| Budget Account Approval   | slon5 | 07/10/2024 17:27:35 PM |
| Division Approval         | nmann | 08/05/2024 15:46:33 PM |
| Department Approval       | nmann | 08/05/2024 15:46:37 PM |
| Contract Manager Approval | bhow1 | 08/05/2024 16:22:55 PM |
| Budget Analyst Approval   | klay0 | 09/07/2024 08:19:03 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: 29462

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: RENTOKIL NORTH AMERICA, INC.

Contractor Name: RENTOKIL NORTH AMERICA, INC.

Address: 2943 E. Alexander Rd.

City/State/Zip: Las Vegas, NV 89030

Contact/Phone: Trish Hyman 725-500-8997

Vendor No.: PUR0005242

NV Business ID: NV20101438952

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/07/2024

Anticipated BOE meeting date 11/2025

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 09/30/2025

Contract term: 1 year and 23 days

4. Type of contract: Contract

Contract description: Pest Control

5. Purpose of contract:

This is a new contract to provide pest control at various buildings at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$22,619.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to properly handle pest problems and to ensure State employees and the public well-being and health; professional pest control management is a must for State-owned buildings.

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 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):

Rentokil  
Preventive Pest  
JS Pest Control  
Fischer's Pest Control  
Orkin

b. Solicitation Waiver: **Not Applicable**

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

Rentokil provided the lowest 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?

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:

Rentokil North America, Inc. has been a vendor with various agencies since 2016 and the agency is satisfied with their 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:

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:

Ryan Reigle, Facility Supervisor III Ph: 702486-4305

20. Contract Status:

Contract Approvals:

| Approval Level            | User  | Signature Date         |
|---------------------------|-------|------------------------|
| Budget Account Approval   | slon5 | 07/08/2024 19:09:11 PM |
| Division Approval         | jkidd | 07/09/2024 12:47:35 PM |
| Department Approval       | jkidd | 07/09/2024 12:47:37 PM |
| Contract Manager Approval | bhow1 | 07/09/2024 14:06:05 PM |
| Budget Analyst Approval   | klay0 | 09/07/2024 08:21:36 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: 29503

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: SOUTHLAND INDUSTRIES  
Contractor Name: SOUTHLAND INDUSTRIES  
Address: 4765 CAMERON STREET  
City/State/Zip: LAS VEGAS, NV 89103  
Contact/Phone: Kavon Asgari 702-533-5704  
Vendor No.: T29045769  
NV Business ID: NV19621000518

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 10/15/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/31/2028

Contract term: 3 years and 321 days

4. Type of contract: Contract

Contract description: HVAC

5. Purpose of contract:

This is a new contract to provide qualified labor for repairs, replacements, modifications, and new installations of various heating, ventilation, and air conditioning control components for several southern state-owned buildings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$55,138.77

II. JUSTIFICATION

7. What conditions require that this work be done?

HVAC systems control the overall climate in a building, maintain good indoor air quality, adequate ventilation with filtration that provides occupants a comfortable environment. HVAC services is important for the safety, health and working conditions for all State employees and public.

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

Lack of expertise.

9. Were quotes or proposals solicited? Yes

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

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

Southland Industries  
Diversified Thermol Services  
EMCOR

b. Solicitation Waiver: **Not Applicable**

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

Southland Industries is the company that installed and wrote the program logic for our building automation systems. They are very knowledgeable with our building automations systems and controls components. It is likely Southland Industries will spend less billable service hours to address any emergency situations due to their extensive knowledge and experience working with our buildings and 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?

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:

various state agencies as well as Buildings and Grounds and service is satisfactory.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | dcarlso4 | 09/10/2024 16:10:59 PM |
| Division Approval         | jkidd    | 09/12/2024 15:58:05 PM |
| Department Approval       | jkidd    | 09/12/2024 15:58:10 PM |
| Contract Manager Approval | ssands   | 10/10/2024 14:56:01 PM |
| Budget Analyst Approval   | klay0    | 10/15/2024 19:04:01 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: 29481

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: Schneider Electric Buildings Americas, Inc.

Contractor Name: Schneider Electric Buildings Americas, Inc.

Address: 731 Pilot Road, Suite 1

City/State/Zip: Las Vegas, NV 89119-4437

Contact/Phone: 702-803-4845

Vendor No.: PUR0001005C

NV Business ID: NV20071402383

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 09/20/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/15/2028

Contract term: 3 years and 299 days

4. Type of contract: Contract

Contract description: HVAC

5. Purpose of contract:

This is a new contract to provide electrical work, as well as heating, ventilation, and air conditioning control services, for the Department of Motor Vehicles Henderson and Flamingo locations.

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?

Schneider Electric is the only authorized representative in Clark County to access, support, provide replacement parts, and maintain the software for building automation systems installed in the Henderson DMV and Flamingo DMV.

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

Lack of expertise

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

Approval #: 240703

Approval Date: 07/02/2024

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

Schneider is the only authorized representative in Clark County representing Schneider Electric Building Automation Systems installed.

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   | slon5  | 07/15/2024 08:27:39 AM |
| Division Approval         | nmann  | 08/14/2024 09:56:57 AM |
| Department Approval       | nmann  | 08/14/2024 09:57:01 AM |
| Contract Manager Approval | ssands | 08/14/2024 15:02:36 PM |
| Budget Analyst Approval   | klay0  | 09/20/2024 17:00:54 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#: 240703 @

**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: |                     |                             |
|    | <b>STATE AGENCY NAME REQUIRED:</b> <i>SPWD Buildings and Grounds</i>                                      |                     |                             |
|    | <i>Contact Name and Title</i>   | <i>Phone Number</i> | <i>Email Address</i>        |
|    | <i>Shiyann Living, Program Officer I</i>  | <i>702-486-5360</i> | <i>sliving@admin.nv.gov</i> |
|    | <i>Terra Cooke-Gatzmer, HVACR Specialist III</i>  | <i>702-481-4286</i> | <i>t.cooke@admin.nv.gov</i> |
|    | <i>Sue Sands, Program Officer II</i>  | <i>775-531-3173</i> | <i>sasands@admin.nv.gov</i> |

|    |                            |  |
|----|----------------------------|--|
| 1b | <b>Vendor Information:</b> |  |
|    | Vendor Name:               | <i>Schneider Electric</i>                          |
|    | Contact Name:              | <i>Gavin Lastrapes</i>                             |
|    | <b>Complete Address:</b>   | <i>731 Pilot Rd., Suite I, Las Vegas, NV 89119</i> |
|    | City, State, and Zip Code  |  |
|    | Telephone Number:          | <i>702-803-4845</i>                                |
|    | Email Address:             | <i>Gavin.lastrapes@se.com</i>                      |

|    |   |                                     |
|----|---|-------------------------------------|
| 1c | <b>Type of Waiver Requested – Check the appropriate type:</b> |                                     |
|    | Sole or Single Source:  | <input checked="" type="checkbox"/> |
|    | Professional Service Exemption:                               |                                     |

|    |  |      |                                     |     |
|----|--|------|-------------------------------------|-----|
| 1d | <b>Contract Information:</b>           |      |                                     |     |
|    | Is this a new Contract? Check One:     | Yes: | <input checked="" type="checkbox"/> | No: |
|    | <b>If 'No' Enter Amendment Number:</b> | #    |                                     |     |
|    | <b>Enter CETS Number:</b>              | #    |                                     |     |

|    |                                   |             |                   |           |
|----|-----------------------------------|-------------|-------------------|-----------|
| 1e | <b>Term:</b>                      |             |                   |           |
|    | One (1) Time Purchase? Check One: | Yes:        |                   | No:       |
|    | Contract:                         | Start Date: | <i>07/15/2024</i> | End Date: |

|    |                     |  |
|----|---------------------|--|
| 1f | <b>Funding:</b>     |  |
|    | State Appropriated: |  |
|    | Federal Funds:      |  |

Dec'd 06/25/24 1:17PM/autv

|                  |                             |
|------------------|-----------------------------|
| Grant Funds:     |                             |
| Other (Explain): | <i>B&amp;G Rent Revenue</i> |

|                             |                |
|-----------------------------|----------------|
| <b>Purchasing Use Only:</b> |                |
| Approval #:                 | <i>2407030</i> |

|    |  |
|----|--|
| 1g | <b>Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:</b> |
|    | <i>\$45,000</i>  |

|   |  |
|---|--|
| 2 | <b>Provide a description of work/services to be performed or services with goods to be purchased:</b><br><i>This contract will provide maintenance and upgrade work such as logic programming, upgrade revisions, create or edit graphics for Building Automation Systems (Schneider Electric), trouble shooting controls, programming VFD's, replacing controllers, actuators, and safety devices. This will cover the Henderson DMV 1399 American Pacific Dr., Henderson 89074 and Flamingo DMV 8250 Flamingo Rd., Las Vegas, 89147.</i> |
|---|--|

|   |  |
|---|--|
| 3 | <b>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</b><br><i>Schneider Electric has extensive knowledge of the HVAC building automation systems in the Henderson DMV and Flamingo DMV buildings.</i> |
|---|--|

|   |  |
|---|--|
| 4 | <b>Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:</b><br><i>Schneider Electric is the only authorized representative in Clark County to access, support, provide replacement parts and maintain the software for Building Automation Systems installed in the Henderson DMV and Flamingo DMV buildings.</i> |
|---|--|

|   |  |                   |    |          |
|---|--|-------------------|----|----------|
| 5 | Were alternative services or commodities evaluated?  | <b>Check One:</b> |    |          |
|   |  | Yes               | No |          |
|   |  |                   |    | <i>X</i> |
|   | 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>   |                   |    |          |

Purchasing Use Only:

Approval #:

240703 @

|   |  |          |       |                   |  |        |    |
|---|--|----------|-------|-------------------|--|--------|----|
|   | Has the agency purchased these services/services with goods in the past? Check One:  |          |       |                   |  | Yes    | No |
|   | <p><b>NOTE: To avoid delays or your request being rejected, 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></b></p>   |          |       |                   |  |        | X  |
| 6 | a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u> |          |       |                   |  |        |    |
|   | Term   |          | Value | Short Description | Provide Type of Procurement RFP#, RFQ#, Waiver # | CETS # |    |
|   | Start Date   | End Date |       |                   |  |        |    |
|   |  |          | \$    |                   |  |        |    |
|   |  |          | \$    |                   |  |        |    |
|   |  |          | \$    |                   |  |        |    |
|   |  |          | \$    |                   |  |        |    |
|   |  |          | \$    |                   |  |        |    |

|   |  |  |
|---|--|--|
| 7 | What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?  |  |
|   | <p><i>The potential consequences if this waiver request is denied would be catastrophic to the whole HVAC system at the Henderson DMV and Flamingo DMV buildings and we would lose our logs to the energy consumption to the building.</i></p> |  |

|   |  |  |
|---|--|--|
| 8 | What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?   |  |
|   | <p><i>This is a proprietary building automation and energy management system for Henderson DMV and Flamingo DMV and Schneider Electric is the only authorized vendor in Clark County to maintain licensing and software revisions.</i></p> |  |

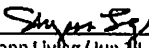
|   |   |  |  |  |  |     |    |
|---|---|--|--|--|--|-----|----|
|   | Will this purchase obligate the State to this vendor for future purchases? Check One:   |  |  |  |  | Yes | No |
|   | <p><b>NOTE: Before selecting your answer, please review information included on Page 2, <u>Section 9 of the instructions.</u></b></p>   |  |  |  |  | X   |    |
| 9 | a. If yes, please provide details regarding future obligations or needs.  |  |  |  |  |     |    |
|   | <p><i>Schneider Electric is needed as we have the HVAC building automation and energy management system for Henderson DMV and Flamingo DMV buildings. Schneider Electric is the only authorized representative in Clark County.</i></p> |  |  |  |  |     |    |

Purchasing Use Only:

Approval #:

240703 (C)

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.

  
Shiyann Living (Jun 24, 2024 17:01 PDT)

Signature of Agency Representative Initiating Request

Shiyann Living

Jun 24, 2024

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Michele Killian

Jun 25, 2024

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:

Representative Providing Review

Print Name of Representative Providing Review

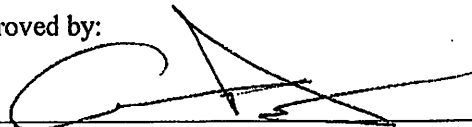
Date

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 Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

**NOTE:** If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.

Approved by:

  
Administrator, Purchasing Division or Designee

7/2/24  
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: 29595

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: TK ELEVATOR CORPORATION

Contractor Name: TK ELEVATOR CORPORATION

Address: 770 Smithridge Dr., Ste. 350

City/State/Zip: Reno, NV 89502

Contact/Phone: James Raferty 775-247-0898

Vendor No.: T80943796

NV Business ID: NV19841018200

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/07/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 07/31/2025

Contract term: 327 days

4. Type of contract: Contract

Contract description: Elevator service

5. Purpose of contract:

This is a new contract to provide elevator service and maintenance at 10375 Professional Circle in Reno.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,455.60

II. JUSTIFICATION

7. What conditions require that this work be done?

Elevator maintenance and repairs are necessary safety practices.

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 facilitate.

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 agency contracts with this vendor to service other locations already and would like to add this location. Minor Maintenance per SAM 330.

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   | slon5  | 08/02/2024 16:52:56 PM |
| Division Approval         | nmann  | 08/15/2024 15:17:55 PM |
| Department Approval       | nmann  | 08/15/2024 15:18:01 PM |
| Contract Manager Approval | ssands | 08/26/2024 07:52:21 AM |
| Budget Analyst Approval   | klay0  | 09/07/2024 11:11:14 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: 29470

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: TREE SOLUTIONS, LLC  
Contractor Name: TREE SOLUTIONS, LLC  
Address: 2657 Windmill PKWY #687  
City/State/Zip: Henderson, NV 89074  
Contact/Phone: Pedro Luna 702-309-8733  
Vendor No.: T32011643  
NV Business ID: NV20061662453

To what State Fiscal Year(s) will the contract be charged? 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 % Buildings and Grounds Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 09/07/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 04/30/2025

Contract term: 235 days

4. Type of contract: Contract

Contract description: Landscaping

5. Purpose of contract:

This is a new contract to provide ongoing landscaping services for the Nevada Building at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,800.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This new contract will provide Landscape services for State properties needing to be maintained and serviced for the safety of the employees and public.

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 facilitate 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):

Bright View  
Par3 Landscape  
Tierra Scapes  
Del Sol Landscape

b. Solicitation Waiver: **Not Applicable**

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

Tree Solutions, LLC provided the lowest 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?

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:

Tree Solutions LLC has been a vendor to various agencies since 2022 and the agency is satisfied with their 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:

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:

Ryan Reigle, Facility Supervisor III Ph: 702-486-4305

20. Contract Status:

Contract Approvals:

| Approval Level            | User  | Signature Date         |
|---------------------------|-------|------------------------|
| Budget Account Approval   | slon5 | 07/10/2024 17:18:13 PM |
| Division Approval         | nmann | 07/23/2024 15:45:49 PM |
| Department Approval       | nmann | 08/08/2024 16:01:34 PM |
| Contract Manager Approval | bhow1 | 08/12/2024 14:24:13 PM |
| Budget Analyst Approval   | klay0 | 09/07/2024 08:46:11 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: **28522** Amendment Number: **1**

Legal Entity Name: **GEORGE M. ROGERS, CHARTERED DBA GEORGE M. ROGERS ARCHITECT**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Contractor Name: **GEORGE M. ROGERS, CHARTERED DBA GEORGE M. ROGERS ARCHITECT**

Agency Code: **082** Address: **6325 S. JONES BLVD., STE. 100**

Appropriation Unit: **1567-37** City/State/Zip: **LAS VEGAS, NV 89118-3332**

Is budget authority available?: **Yes** Contact/Phone: **702-894-5027**

If "No" please explain: **Not Applicable** Vendor No.: **T32009325**

NV Business ID: **NV19971103296**

To what State Fiscal Year(s) will the contract be charged? **2024-2027**

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.

|          |               |                 |               |        |
|----------|---------------|-----------------|---------------|--------|
| <b>X</b> | General Funds | <b>100.00 %</b> | Fees          | 0.00 % |
|          | Federal Funds | 0.00 %          | Bonds         | 0.00 % |
|          | Highway Funds | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: **116092**

## 2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/18/2024**

Anticipated BOE meeting date **11/2024**

Retroactive? **No**

If "Yes", please explain

**Not Applicable**

3. Previously Approved Termination Date: **06/30/2027**

Contract term: **3 years and 163 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

## 5. Purpose of contract:

**This is the first amendment to the original contract which provides professional architectural/engineering services for the Southern Nevada Veterans Memorial Cemetery - Chapel Remodel CIP project: CIP Project No. 23-M15; SPWD Contract No. 116092. This amendment increases the maximum amount from \$52,300 to \$64,950 due to an additional cost estimate needed to complete the project.**

## 6. CONTRACT AMENDMENT

|   | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|---|-------------|---------------|-----------------|------------|
| 1. The max amount of the original contract: | \$52,300.00 | \$52,300.00   | \$52,300.00     | Yes - Info |
| 2. Amount of current amendment (#1):        | \$12,650.00 | \$12,650.00   | \$64,950.00     | Yes - Info |
| 3. New maximum contract amount:             | \$64,950.00 |               |                 |            |

**II. JUSTIFICATION**

## 7. What conditions require that this work be done?

**2023 Legislative approved CIP Projects**

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 09/24/2024 11:40:31 AM |
| Division Approval         | nmann   | 09/24/2024 11:40:35 AM |
| Department Approval       | nmann   | 09/24/2024 11:40:41 AM |
| Contract Manager Approval | lwildes | 10/07/2024 10:39:58 AM |
| Budget Analyst Approval   | klay0   | 10/08/2024 16:25:22 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: 28577

Amendment Number: 2

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK

Agency Code: 082

Contractor Name: TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK

Appropriation Unit: 1593-24

Address: 314 S. WATER ST.

Is budget authority available?: Yes

City/State/Zip: HENDERSON, NV 89015-7311

If "No" please explain: Not Applicable

Contact/Phone: 702-456-3000

Vendor No.: T80883470

NV Business ID: NV20212004081

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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

Agency Reference #: 115808

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/09/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 172 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architectural/engineering services for the Department of Motor Vehicles - Silverado Ranch Facility CIP Project: CIP Project No. 23-C02; SPWD Contract No. 115808. This amendment increases the maximum amount from \$1,120,992 to \$1,149,072 due to additional furniture, fixtures, and equipment coordination services needed.

6. CONTRACT AMENDMENT

|   | Trans \$       | Info Accum \$  | Action Accum \$ | Agenda       |
|---|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$1,087,394.00 | \$1,087,394.00 | \$1,087,394.00  | Yes - Action |
| a. Amendment 1:                             | \$33,598.00    | \$33,598.00    | \$33,598.00     | Yes - Info   |
| 2. Amount of current amendment (#2):        | \$28,080.00    | \$28,080.00    | \$61,678.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$1,149,072.00 |                |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislative approved CIP Projects

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 08/30/2024 12:16:32 PM |
| Division Approval         | nmann   | 08/30/2024 12:19:50 PM |
| Department Approval       | nmann   | 08/30/2024 12:21:17 PM |
| Contract Manager Approval | lwildes | 08/30/2024 12:33:21 PM |
| Budget Analyst Approval   | klay0   | 09/10/2024 10:04:17 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: 28840

Amendment Number: 2

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK

Agency Code: 082

Contractor Name: TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK

Appropriation Unit: 1594-26

Address: 314 S. WATER ST.

Is budget authority available?: Yes

City/State/Zip: HENDERSON, NV 89015-7311

If "No" please explain: Not Applicable

Contact/Phone: 775-827-2949

Vendor No.: T80883470

NV Business ID: NV20212004081

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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

Agency Reference #: 116357

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 03/12/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 110 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architecture/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116357. This amendment increases the maximum amount from \$607,840 to \$648,260.00 due to additional dewatering investigation.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$590,940.00 | \$590,940.00  | \$590,940.00    | Yes - Action |
| a. Amendment 1:                             | \$16,900.00  | \$16,900.00   | \$16,900.00     | Yes - Info   |
| 2. Amount of current amendment (#2):        | \$40,420.00  | \$40,420.00   | \$57,320.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$648,260.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | 08/29/2024 15:29:53 PM |
| Division Approval         | nmann   | 08/29/2024 15:32:17 PM |
| Department Approval       | nmann   | 08/29/2024 15:33:48 PM |
| Contract Manager Approval | lwildes | 08/30/2024 08:12:00 AM |
| Budget Analyst Approval   | klay0   | 09/10/2024 09:28:24 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: 28809

Amendment Number: 1

Legal Entity Name: UNVC DBA CMB CONSULTANTS LC

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Contractor Name: UNVC DBA CMB CONSULTANTS LC

Agency Code: 082

Address: 1067 W. 1400 S.

Appropriation Unit: 1594-26

City/State/Zip: LEHI, UT 84043

Is budget authority available?: Yes

Contact/Phone: 801-641-7270

If "No" please explain: Not Applicable

Vendor No.: T32012002

NV Business ID: NV20222334133

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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

Agency Reference #: 116320

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 03/15/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2027

Contract term: 3 years and 107 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 Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116320. This amendment increases the maximum amount from \$37,000 to \$74,700 due to additional systems commissioning services for this project.

6. CONTRACT AMENDMENT

|   | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|---|-------------|---------------|-----------------|------------|
| 1. The max amount of the original contract: | \$37,000.00 | \$37,000.00   | \$37,000.00     | Yes - Info |
| 2. Amount of current amendment (#1):        | \$37,700.00 | \$37,700.00   | \$74,700.00     | Yes - Info |
| 3. New maximum contract amount:             | \$74,700.00 |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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?

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. SPWD, and currently with satisfactory results.

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

No If "Yes", please provide details of the litigation 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   | nmann   | 08/29/2024 15:09:57 PM |
| Division Approval         | nmann   | 08/29/2024 15:11:13 PM |
| Department Approval       | nmann   | 08/29/2024 15:12:17 PM |
| Contract Manager Approval | lwildes | 08/30/2024 07:42:19 AM |
| Budget Analyst Approval   | klay0   | 09/10/2024 09:48:16 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: 29501

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 1352, expenditure category 14, Property Claims.

Legal Entity Name: KNIT

Contractor Name: KNIT

Address: 7250 PEAK DR., STE. 216

City/State/Zip: LAS VEGAS, NV 89128-9029

Contact/Phone: 702-363-2222

Vendor No.: T29033716

NV Business ID: NV19851015692

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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 % | Fees            | 0.00 %                     |
| Federal Funds | 0.00 % | Bonds           | 0.00 %                     |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Agency Funded CIP |

Agency Reference #: 116865

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 09/25/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2027

Contract term: 2 years and 278 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Southern Nevada Adult Mental Health Services - Rawson-Neal Wall Repair CIP project to include architectural development, as well as design, structural engineering, bidding, and construction administration services for the repair of the exterior wall that was damaged by a vehicle collision: CIP Project No. 24-A019; SPWD Contract No. 116865.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,800.00

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 - Southern Nevada Adult Mental Health Services (SNAMHS)

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

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:

Philip DeLa Mara, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level            | User    | Signature Date         |
|---------------------------|---------|------------------------|
| Budget Account Approval   | nmann   | 09/25/2024 11:19:47 AM |
| Division Approval         | nmann   | 09/25/2024 11:19:49 AM |
| Department Approval       | nmann   | 09/25/2024 11:19:52 AM |
| Contract Manager Approval | lwildes | 09/25/2024 11:50:01 AM |
| Budget Analyst Approval   | klay0   | 09/25/2024 17:15:18 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: **27790**Amendment  
Number: **2**Agency Name: **ADMIN - STATE PUBLIC WORKS  
DIVISION**Legal Entity  
Name: **LGA ARCHITECTURE DBA LGA**Agency Code: **082**Contractor Name: **LGA ARCHITECTURE DBA LGA**Appropriation Unit: **All Appropriations**Address: **241 W. CHARLESTON BLVD.,  
STE. 107**Is budget authority  
available?: **No**City/State/Zip **LAS VEGAS, NV 89102-2592**

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 1522, expenditure category 25, EDA - ARPA Grant.

Contact/Phone: **702-263-7111**Vendor No.: **T27041309**NV Business ID: **NV19861005290**To what State Fiscal Year(s) will the contract be charged? **2024-2027**

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 % | Fees                   | 0.00 %                            |
| Federal Funds | 0.00 % | Bonds                  | 0.00 %                            |
| Highway Funds | 0.00 % | <b>X Other funding</b> | <b>100.00 % Agency Funded CIP</b> |

Agency Reference #: **115554**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/11/2023**  
Examiner's approval?

Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved **05/31/2027**  
Termination Date:Contract term: **3 years and 325 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

**This is the second amendment to the original contract which provides professional architectural/engineering services for the Boulder City - Adventure Center CIP Project: CIP Project No. 23-A023-1; SPWD Contract No. 115554. This amendment increases the maximum amount from \$332,220 to \$353,165 due to additional documentation review and on-site surveys to address title report exceptions.**

**6. CONTRACT AMENDMENT**

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$329,960.00 | \$329,960.00  | \$329,960.00    | Yes - Action |
| a. Amendment 1:                             | \$2,260.00   | \$2,260.00    | \$2,260.00      | No           |
| 2. Amount of current amendment (#2):        | \$20,945.00  | \$23,205.00   | \$23,205.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$353,165.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?  
Agency Submitted Application - Nevada Tourism & Cultural Affairs
8. Explain why State employees in your agency or other State agencies are not able to do this work:  
Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.
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?  
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. SPWD, and currently with satisfactory results.
14. Is the contractor currently involved in litigation with the State of Nevada?  
No If "Yes", please provide details of the litigation 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 09/24/2024 11:01:05 AM



|                           |         |                        |
|---------------------------|---------|------------------------|
| Division Approval         | nmann   | 09/24/2024 11:01:08 AM |
| Department Approval       | nmann   | 09/24/2024 11:01:11 AM |
| Contract Manager Approval | lwildes | 09/24/2024 11:09:51 AM |
| Budget Analyst Approval   | klay0   | 09/25/2024 13:31:37 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: 29848

Agency Name: DTCA - DIVISION OF TOURISM  
Agency Code: 101  
Appropriation Unit: 1522-04  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: FIRST CHOICE TREE SERVICE, INC  
Contractor Name: FIRST CHOICE TREE SERVICE, INC  
Address: PO BOX 98295  
City/State/Zip: LAS VEGAS, NV 89193-8295  
Contact/Phone: John Arroyo 702-564-1998  
Vendor No.: T27015604 A  
NV Business ID: NV20001359816

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that will be used to pay the contractor? 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 10/09/2024

Anticipated BOE meeting date 11/2025

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/31/2028

Contract term: 4 years and 23 days

4. Type of contract: Contract

Contract description: Landscaping

5. Purpose of contract:

This is a new contract to provide ongoing irrigation and landscaping maintenance as well as a one-time clean up service fee.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$98,947.00

Payment for services will be made at the rate of \$1,630.00 per Month

Other basis for payment: \$20,707 for irrigation and one-time clean up service; \$1,630 per month for landscape maintenance program

II. JUSTIFICATION

7. What conditions require that this work be done?

As part of the negotiations with State Lands for the site of the Boulder City Adventure Center, the Division of Tourism has recently become landlords of the Boulder City Chamber of Commerce building. With this comes the costs of maintaining the building, which includes landscape maintenance.

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

Because this is not a state-owned building, Buildings and Grounds would not be responsible for the maintenance of the Boulder City Chamber of Commerce grounds. The agency staff do not have the necessary expertise for this job.

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):

First Choice Tree Service  
Go Greenline Landscape  
US Turf

b. Solicitation Waiver: **Not Applicable**

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

This vendor was the only vendor who responded to the solicitation.

d. Last bid date: 09/05/2024 Anticipated re-bid date: 03/31/2028

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   | amathies | 10/02/2024 11:26:22 AM |
| Division Approval         | amathies | 10/02/2024 11:26:25 AM |
| Department Approval       | amathies | 10/02/2024 11:26:27 AM |
| Contract Manager Approval | amathies | 10/02/2024 11:32:30 AM |
| Budget Analyst Approval   | mbro28   | 10/09/2024 05:07:39 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: 29694

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  
Contractor Name: NAVAL FACILITIES ENGINEERING  
Address: 750 PACIFIC HIGHWAY, 4TH FLOOR  
REAL ESTATE DEPT  
City/State/Zip: SAN DIEGO, CA 92132  
Contact/Phone: Victoria Brizuela 619-705-4338  
Vendor No.:  
NV Business ID: GOVERNMENT ENTITY

To what State Fiscal Year(s) will the contract be charged? 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 % REVENUE |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 07/01/2024

Anticipated BOE meeting date 10/2025

Retroactive? Yes

If "Yes", please explain

The previous contract lapsed due to legal review of amendment language. Agencies have negotiating contract language to fulfill both Federal and State requirements.

3. Termination Date: 06/30/2025

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 to provide ongoing rack space at Austin Peak in Lander County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$28,330.75

Payment for services will be made at the rate of \$28,330.75 per Year

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   | mmellow | 09/12/2024 08:29:52 AM |
| Division Approval         | ddodge  | 09/12/2024 08:39:43 AM |
| Department Approval       | ddodge  | 09/12/2024 08:39:45 AM |
| Contract Manager Approval | thudder | 09/18/2024 09:49:14 AM |
| Budget Analyst Approval   | mranki1 | 09/27/2024 13:34:04 PM |



**STATE OF NEVADA**  
**OFFICE OF THE CHIEF INFORMATION OFFICER**  
**WITHIN THE OFFICE OF THE GOVERNOR**

100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701

Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | [eitsadministration@admin.nv.gov](mailto:eitsadministration@admin.nv.gov) | Fax: (775) 687-9097

**MEMORANDUM**

DATE: 09 September 2024

TO: Michael Rankin, Executive Branch Budget Officer  
Governor's Finance Office

FROM: Timothy Galluzi, State Chief Information Officer  09/06/24

SUBJECT: Request BOE retroactive approval for attached expense agreement

The attached expense agreement with Naval Facilities Engineering Systems Command has been submitted for approval to the Board of Examiners. Naval Facilities Engineering Systems Command's contract was under their legal review from May, 2024 until August 20, 2024.

This revenue agreement is a continuation of service to provide rack space to the Naval Command. We are requesting the retroactive approval date to have contractual authority between the State and Naval Facilities Engineering Systems Command to receive revenue for the services provided by the State of Nevada.

If the agreement is not approved with an effective date of 01 July 2024, the Office of the Chief Information Officer within the Office of the Governor would not be able to receive revenue, impacting not only OCIO but all of the state's infrastructure.

We respectfully request the Board of Examiners to retroactively approve this expense agreement with a start date of 01 July 2024.

Signature:   
Timothy Galluzi (Sep 6, 2024 14:23 PDT)

Email: [tim.galluzi@it.nv.gov](mailto:tim.galluzi@it.nv.gov)

**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: **29757**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: **DATA PROCESSING AIR CORP**Contractor Name: **DATA PROCESSING AIR CORP**Address: **DBA AIR CORPORATION  
7531 EASTGATE RD**City/State/Zip: **HENDERSON, NV 89011**Contact/Phone: **Walter Jurczyk 702-798-4564**Vendor No.: **T32001177A**NV Business ID: **NV19931093438**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|                        |                |                        |                               |
|------------------------|----------------|------------------------|-------------------------------|
| General Funds          | 0.00 %         | Fees                   | 0.00 %                        |
| <b>X</b> Federal Funds | <b>65.00 %</b> | Bonds                  | 0.00 %                        |
| Highway Funds          | 0.00 %         | <b>X</b> Other funding | <b>35.00 % Private/County</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/19/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **08/31/2028**Contract term: **3 years and 347 days**4. Type of contract: **Contract**Contract description: **HVAC Repair**

5. Purpose of contract:

**This is a new contract to provide emergency repair and maintenance services for HVAC equipment at the Southern Nevada State Veterans Home.**

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?

**All HVAC Equipment at the home occasionally requires emergency repair and maintenance to ensure home adheres to all federal regulations and provides a comfortable ambient temperature for the residents who live in the facility.**

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

**HVAC equipment requires specialized training, and tools to properly diagnose and repair, state employees in our agency are not equipped to provide repairs to such equipment.**9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

**DP Air  
EMCOR  
Redi**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to NRS 333.300(3)(a), agencies should solicit at least three persons to ensure the lowest, most responsible vendors for services are procured. Lowest cost vendor was selected for these services.

d. Last bid date: 07/08/2024 Anticipated re-bid date: 06/05/2028

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:

DP Air has been utilized by Agency 240 currently, and services have been satisfactory.

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

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

Not Applicable

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

Foreign Corporation

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

**Yes**

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

**Yes**

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

**Yes**

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jtheil1  | 09/05/2024 13:35:38 PM |
| Division Approval         | jtheil1  | 09/05/2024 13:35:42 PM |
| Department Approval       | jtheil1  | 09/05/2024 13:35:45 PM |
| Contract Manager Approval | jclodfel | 09/17/2024 09:03:18 AM |
| Budget Analyst Approval   | spowel3  | 09/19/2024 12:03:29 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: 29856

Agency Name: DEPARTMENT OF VETERANS SERVICES  
Agency Code: 240  
Appropriation Unit: 2564-10  
Is budget authority available?: Yes  
If "No" please explain: Not Applicable

Legal Entity Name: The Factory, LLC  
Contractor Name: The Factory, LLC  
Address: 655 S. Virginia St.  
City/State/Zip: Reno, NV 89501  
Contact/Phone: Brian Stoudt 775-846-0522  
Vendor No.: T32004634  
NV Business ID: NV20091222446

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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 % | Fees            | 0.00 %                         |
| Federal Funds | 0.00 % | Bonds           | 0.00 %                         |
| Highway Funds | 0.00 % | X Other funding | 100.00 % VETERANS GIFT ACCOUNT |

2. Contract start date:  
a. Effective upon Board of Examiner's approval? No or b. other effective date 10/11/2024  
Anticipated BOE meeting date 11/2024  
Retroactive? No  
If "Yes", please explain  
Not Applicable

3. Termination Date: 12/31/2026  
Contract term: 2 years and 81 days

4. Type of contract: Contract  
Contract description: Website Rebuild

5. Purpose of contract:  
This is a new contract to implement an approved technology investment request which provides an updated platform and infrastructure for the department's website.

6. NEW CONTRACT  
The maximum amount of the contract for the term of the contract is: \$99,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?  
Nevada Department of Veterans Services needs to update to a new website platform and IT infrastructure.

8. Explain why State employees in your agency or other State agencies are not able to do this work:  
Department employees do not have experience and knowledge of platform needing to update to and fulfill needed work for State website transition in future.

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):  
BDG Webdesign  
Estiponia  
The Factory  
b. Solicitation Waiver: Not Applicable

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

Pursuant to NRS 333.300(3)(a), agencies should solicit at least three persons to ensure the lowest, most responsible vendors for services are procured. Only one solicited vendor can fulfill requirements to adhere to scope of work and integrate to State requirements.

d. Last bid date: 10/30/2023 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 Factory has been engaged under contract for website maintenance for Nevada Department of Veterans Services, and work has been verified as satisfactory.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jtheil1  | 10/03/2024 12:45:46 PM |
| Division Approval         | jtheil1  | 10/03/2024 12:45:49 PM |
| Department Approval       | jtheil1  | 10/03/2024 12:45:52 PM |
| Contract Manager Approval | jclodfel | 10/03/2024 13:08:38 PM |
| EITS Approval             | ljean    | 10/04/2024 13:55:10 PM |
| Budget Analyst Approval   | vmilazz1 | 10/11/2024 16:32:56 PM |



**STATE OF NEVADA  
GOVERNOR'S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Mary Devine, Director, NDVS  
Joseph Theile, Executive Officer/Chief Financial Officer, NDVS  
Brandon Torres, IT Manager/Information Security Officer, NDVS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
Sean Montierth, Computing Services Unit, OCIO  
Michael D. Smith, Support Services Unit, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – NDVS – TIN 804 – *NDVS Website Upgrade* –  
BA 2564, 2560, 2561, 2569

**DATE:** August 14, 2024

We have completed our review for the Nevada Department of Veterans Services' (NDVS) – *NDVS Website Upgrade* – TIN 804.

The submitted TIN, for an estimated value of \$30,000 in the FY24/FY25 biennium and \$60,000 in the FY26/FY27 biennium (Veterans License Gift Account 2564 funding), is to replace an outdated website solution with a complete redesign of the department's extensive 200+ page website.

NDVS' goal is to create a more user-friendly navigation menu, provide a modern aesthetic, and ensure accessibility across mobile devices. The redesigned website will maintain ADA compliance and include

search engine optimization to enhance visibility. Initially, the website will be hosted using cloud-based vendor services that will require over a decade's worth of historical data being converted and transferred to this vendor-hosted site. Once the state's Digital Experience Platform (DXP) becomes available, the website, along with all its data, will be migrated to the state-hosted solution.

The OCIO supports this investment as it aligns with the state's position that all executive branch agencies should utilize the state's DXP for hosting websites and web applications whenever possible. This approach leverages enhanced security, modern web services, data insights, intelligent mobile capabilities, economies of scale, and a standardized set of templates to create a unified user experience (UX) across the state. Additionally, the OCIO encourages agencies to use their own content creators, MSAs, or other contract vehicles to build their websites and applications on the State's DXP platform. OCIO's web team, while focused on creating a unified statewide online experience and providing ADA training, does not have the resources to build websites for agencies, with only minor exceptions.

OCIO encourages NDVS to reach out to our web team to identify possible design criteria that might ease the integration back into the state's DXP solution (once it becomes available). If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: **29801**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2569-13**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Garden Shop Nursery Landscape Division, Inc.

Contractor Name: **Garden Shop Nursery Landscape Division, Inc.**Address: **485 Western Rd.**City/State/Zip **RENO, NV 89506**

Contact/Phone: Mike Warden 775/358-3080

Vendor No.: T32015966

NV Business ID: NV19901046420

To what State Fiscal Year(s) will the contract be charged? **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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | 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 **10/09/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **04/30/2025**Contract term: **203 days**4. Type of contract: **Contract**Contract description: **Pet Relief Station**

5. Purpose of contract:

**This is a new contract to provide landscaping, and enhancements to the outdoor visitation area including the pet relief station.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,400.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**The outdoor visitation area requires landscaping, and concrete sidewalk installation to provide a pet relief station for veterans and their families.**

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 proper tools to install concrete and complete necessary landscaping enhancements to area designated for pet relief station.**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):

**Legends Landscaping  
Garden Shop Nursery  
Moana Nursery**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to NRS 333.300(3)(a), agencies should solicit at least three persons to ensure the lowest, most responsible vendors for services are procured. Lowest cost vendor was selected for these services.

d. Last bid date: 06/14/2024 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   | jtheil1  | 09/18/2024 14:47:43 PM |
| Division Approval         | jtheil1  | 09/18/2024 14:47:48 PM |
| Department Approval       | jtheil1  | 09/18/2024 14:47:53 PM |
| Contract Manager Approval | jclodfel | 10/02/2024 17:20:48 PM |
| Budget Analyst Approval   | spowel3  | 10/09/2024 12:39:19 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: **29811**

|   |   |
|---|---|
| Agency Name: <b>DEPARTMENT OF VETERANS SERVICES</b> | Legal Entity Name: <b>Savage &amp; Son Inc</b>      |
| Agency Code: <b>240</b>                             | Contractor Name: <b>Savage &amp; Son Inc</b>        |
| Appropriation Unit: <b>2569-13</b>                  | Address: <b>3101 Yori Avenue</b>                    |
| Is budget authority available?: <b>Yes</b>          | City/State/Zip: <b>Reno, NV 89502</b>               |
| If "No" please explain: Not Applicable              | Contact/Phone: <b>Courtney Melhaff 775-828-4193</b> |
|   | Vendor No.: <b>PUR0000504</b>                       |
|   | NV Business ID: <b>NV19341000063</b>                |

To what State Fiscal Year(s) will the contract be charged? **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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | 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 **10/09/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **04/30/2025**Contract term: **203 days**4. Type of contract: **Contract**Contract description: **Heater Installation**

5. Purpose of contract:

**This is a new contract to provide installation of six gas heaters including extending natural gas and electricity access in the outdoor patio area of the Northern Nevada State Veterans Home.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$58,341.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**This is part of the outdoor visitation area enhancement to provide heaters for patio area outdoors for veterans and family to spend time outside.**

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

**Scope of work requires equipment and expertise in electrical installation state employees do not have to complete 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):

**Savage & Son  
EMCOR  
ACCO**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: 08/20/2024 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:

Savage & Son has been used by multiple agencies including NDVS and work has been satisfactory.

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

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

Not Applicable

15. The contractor is 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  | 09/24/2024 06:33:36 AM |
| Division Approval         | jtheil1  | 09/24/2024 06:33:40 AM |
| Department Approval       | jtheil1  | 09/24/2024 06:33:43 AM |
| Contract Manager Approval | jclodfel | 09/24/2024 18:28:33 PM |
| Budget Analyst Approval   | spowel3  | 10/09/2024 10:21:19 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: 28805

Amendment Number: 1

Legal Entity Name: WASHOE COUNTY SCHOOL DISTRICT

Agency Name: NDE - DEPARTMENT OF EDUCATION

Contractor Name: WASHOE COUNTY SCHOOL DISTRICT

Agency Code: 300

Address: 425 E 9TH STREET

Appropriation Unit: 2709-64

City/State/Zip: RENO, NV 89512-2800

Is budget authority available?: Yes

Contact/Phone: Jill Murdock 775-348-0212

If "No" please explain: Not Applicable

Vendor No.: T40234300B

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2024-2026

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 03/12/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/30/2025

Contract term: 1 year and 293 days

4. Type of contract: Interlocal Agreement

Contract description: P-3 Instruction

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides planning and design of instructional strategies, recruitment strategies, a video library, and other support to increase the effectiveness of preschool through third grade educators. This amendment increases the maximum amount from \$284,000 to \$374,000 due to changing the leadership model used.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$284,000.00 | \$284,000.00  | \$284,000.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$90,000.00  | \$90,000.00   | \$90,000.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$374,000.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Federal Preschool Development Grant Birth through Five requires quality program supports through Activity 5, supports to the early childhood workforce through Activity 4, and improving transitions to kindergarten through Activity 3. This project supports PDG B-5 vision: All children and families have equitable access to receive and participate in high-quality, affordable, and comprehensive ECCE programs and services and can meaningfully engage within and experience a seamless early learning continuum that inclusively, culturally, and linguistically meets their needs. It also directly supports the PDG B-5 goal: Access to high-quality ECCE settings enable children to thrive in developmentally appropriate care and learning environments throughout the early learning continuum of Birth through 3rd grade (or 0-8 years).

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 have the capacity or resources to do 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?

NRS 277.180 - Interlocal contracts

- 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

3.24

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

**No**

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

**No**

- c. Is the contractor employed by any of Nevada's political subdivisions or 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 contracts 24278, 28805 satisfactory  
expired 14145

14. Is the contractor currently involved in litigation with the State 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 | smill22 | 09/18/2024 08:36:36 AM |
| Division Approval       | carnol1 | 09/18/2024 09:38:05 AM |

|                           |         |                        |
|---------------------------|---------|------------------------|
| Department Approval       | carnol1 | 09/18/2024 09:38:13 AM |
| Contract Manager Approval | khoy1   | 09/18/2024 13:58:11 PM |
| Budget Analyst Approval   | vfajota | 10/02/2024 15:04:46 PM |

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**

1. Contract Number: 29828

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: BOARD OF REGENTS-UNLV

Contractor Name: BOARD OF REGENTS-UNLV

Address: UNLV OFFICE OF ADMISSIONS  
4505 S MARYLAND PKWY MS 451021

City/State/Zip: LAS VEGAS, NV 89154

Contact/Phone: 702/895-1812

Vendor No.: D35000813B

NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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

b. other effective date 10/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/30/2025

Contract term: 1 year and 60 days

4. Type of contract: Interlocal Agreement

Contract description: Indian Education

5. Purpose of contract:

This is a new interlocal agreement which provides assistance and consultation for Indian Education projects with Nevada educators for finalizing the K-12 lesson plans.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$72,233.50

Other basis for payment: as invoiced by the vendor and accepted by the state.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

UNLV curriculum developers will be assisting in lessons plans for Indian Education and will lead professional development programs via Canvas for learning opportunities for Nevada teachers across the state.

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 have the expertise to facilitate these lessons.

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:

Current contracts with NDE 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:  
 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 | 09/27/2024 15:45:25 PM |
| Division Approval         | carnol1 | 09/27/2024 15:45:28 PM |
| Department Approval       | carnol1 | 09/27/2024 15:45:31 PM |
| Contract Manager Approval | mranks1 | 09/27/2024 15:49:14 PM |
| Budget Analyst Approval   | mranks1 | 09/27/2024 15:49:18 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: 29819

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: College Entrance Examination Board

Contractor Name: College Entrance Examination Board

Address: 250 Vesey St.

City/State/Zip: New York City, NY 10281

Contact/Phone: Adam Jhonson 702-271-0358

Vendor No.: Pending

NV Business ID: NV20141214415

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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

b. other effective date 09/27/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 09/01/2025

Contract term: 339 days

4. Type of contract: Contract

Contract description: AP Math Training

5. Purpose of contract:

This is a new contract to provide advanced placement professional learning workshops to Nevada teachers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$62,206.00

Other basis for payment: As invoiced by the Vendor and accepted by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

The AP College Board are the sole national provider of the advanced placement exams that utilized in the state of Nevada and provides specialized training on advanced placement Exam recourses for educators directly used in Nevada and across the Nation.

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

The Department of education staff do not have the resources or staff to provide the needed training to Nevada's educators for Advanced Placement Exams and the System 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: **Sole Source Contract (As Approved by Chief of Purchasing)**

**Approval #: 240803**

**Approval Date: 08/06/2024**

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

The College Board is the Sole Source of AP Examination training for the only AP examination system used across the nation.

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:

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   | carnol1 | 09/25/2024 13:25:55 PM |
| Division Approval         | carnol1 | 09/25/2024 13:25:58 PM |
| Department Approval       | carnol1 | 09/25/2024 13:26:04 PM |
| Contract Manager Approval | khoy1   | 09/25/2024 13:27:36 PM |
| Budget Analyst Approval   | mranki1 | 09/27/2024 13:45:33 PM |



**STATE OF NEVADA  
DEPARTMENT OF ADMINISTRATION**

*Purchasing Division*

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

**Purchasing Use Only:**

Approval#: **240803 (2)**

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|           |  |                       |                                |
|-----------|--|-----------------------|--------------------------------|
| <b>1a</b> | <b>Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:</b> |                       |                                |
|           | <b>STATE AGENCY NAME REQUIRED:</b>   |                       | <i>Department of Education</i> |
|           | <b>Contact Name and Title</b>  | <b>Phone Number</b>   | <b>Email Address</b>           |
|           | <i>Kaylene Hoyt</i>  | <i>775-687-9101</i>   | <i>Kaylene.hoyt@doe.nv.gov</i> |
|           | <i>Cindi Chang</i>   | <i>(702) 486-7952</i> | <i>cchang@doe.nv.gov</i>       |

|           |                            |  |
|-----------|----------------------------|--|
| <b>1b</b> | <b>Vendor Information:</b> |  |
|           | Vendor Name:               | <i>College Board</i>                             |
|           | Contact Name:              | <i>Adam Johnson</i>                              |
|           | <b>Complete Address:</b>   |  |
|           | City, State, and Zip Code  | <i>250 Vesey Street, New York City, NY 10281</i> |
|           | Telephone Number:          | <i>702.271.0358</i>                              |
|           | Email Address:             | <i>adjohnson@collegeboard.org</i>                |

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

|           |  |      |          |     |
|-----------|--|------|----------|-----|
| <b>1d</b> | <b>Contract Information:</b>           |      |          |     |
|           | Is this a new Contract? Check One:     | Yes: | <i>X</i> | No: |
|           | <b>If 'No' Enter Amendment Number:</b> | #    |          |     |
|           | <b>Enter CETS Number:</b>              | #    |          |     |

|           |                                   |             |                      |                             |
|-----------|-----------------------------------|-------------|----------------------|-----------------------------|
| <b>1e</b> | <b>Term:</b>                      |             |                      |                             |
|           | One (1) Time Purchase? Check One: | Yes:        | <i>X</i>             | No:                         |
|           | Contract:                         | Start Date: | <i>Upon approval</i> | End Date: <i>09/01/2025</i> |

|           |                     |          |
|-----------|---------------------|----------|
| <b>1f</b> | <b>Funding:</b>     |          |
|           | State Appropriated: |          |
|           | Federal Funds:      | <i>X</i> |



|                  |  |
|------------------|--|
| Grant Funds:     |  |
| Other (Explain): |  |

Purchasing Use Only:

Approval #:

2408030

|    |   |
|----|---|
| 1g | Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: |
|    | \$75,110.00   |

|   |   |
|---|---|
| 2 | <p><b>Provide a description of work/services to be performed or services with goods to be purchased:</b></p> <p><i>The AP College Board will provide training to Nevada teachers which will consist of In-person Pre-AP Summer Institutes for 35 teachers; virtual half-day AP Subject Workshops for 75 teachers; in-person (with virtual follow up) AP cross-curricular workshops for 63 teachers; AP Mentoring for 15 teachers (online, group setting); and in-person AP Annual Conference registrations for 30 teachers.</i></p> |
|---|---|

|   |  |
|---|--|
| 3 | <p><b>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</b></p> <p><i>The AP College Board is the sole national provider of the AP exams utilized by the state of Nevada and provides specialized training on AP exam resources for educators directly related to the system used in Nevada and across the nation.</i></p> |
|---|--|

|   |  |
|---|--|
| 4 | <p><b>Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:</b></p> <p><i>The AP College Board is the exclusive provider of AP exams and is the only entity responsible for offering the requested services and training</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>b. <u>If not</u>, why were alternatives not evaluated?</p> <p><i>The AP College Board is the exclusive provider of AP exams and is the only entity responsible for offering the requested services and training</i></p> |            |    |

Purchasing Use Only:

Approval #:

2408030

|   |  |          |       |                   |   |        |    |
|---|--|----------|-------|-------------------|---|--------|----|
| 6 | Has the agency purchased these services/services with goods in the past? Check One:  |          |       |                   |   | Yes    | No |
|   | NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <b><u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u></b>  |          |       |                   |   |        | X  |
|   | a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u> |          |       |                   |   |        |    |
|   | Term   |          | Value | Short Description | Provide Type of Procurement<br>RFP#, RFQ#, Waiver # | CETS # |    |
|   | Start Date   | End Date |       |                   |   |        |    |
|   |  |          | \$    |                   |   |        |    |
|   |  | \$       |       |                   |   |        |    |
|   |  | \$       |       |                   |   |        |    |
|   |  | \$       |       |                   |   |        |    |
|   |  | \$       |       |                   |   |        |    |

|   |  |
|---|--|
| 7 | What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?  |
|   | The AP College Board is the only service provider for the AP exams and is the only entity responsible for the requested services and training. If this is denied, we would not have access to these training opportunities for the State's teachers and staff. |

|   |  |
|---|--|
| 8 | What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?   |
|   | A search has shown that as the sole source of the AP College Board examinations currently in use within the state and services and trainings on AP examinations, they are the only entity available to support in this manner. |

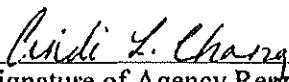
|   |  |  |  |  |  |     |    |
|---|--|--|--|--|--|-----|----|
| 9 | Will this purchase obligate the State to this vendor for future purchases? Check One:  |  |  |  |  | Yes | No |
|   | NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.   |  |  |  |  |     | X  |
|   | a. If yes, please provide details regarding future obligations or needs.   |  |  |  |  |     |    |
|   | Please Note: The Nevada Department of Education (NDE) has noticed a decline in mathematics scores and anticipates that only one round of professional development will be needed at this time. This development, provided through the College Board, aims to support growth in mathematics teaching for LEAs and help them implement process changes necessary to improve AP mathematics scores. |  |  |  |  |     |    |

Purchasing Use Only:

Approval #:

2408030

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. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



Signature of Agency Representative Initiating Request

Cindi Chang

Print Name of Agency Representative Initiating Request

7/25/2024

Date



Signature of Agency Head Authorizing Request

07/26/24

Megan Peterson, Deputy Superintendent, Student Investment Division

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:

Representative Providing Review

Print Name of Representative Providing Review

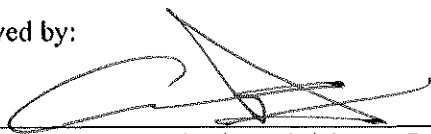
Date

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 Cindy Stoeffler at 775-684-0173 or email at [cstoeffler@admin.nv.gov](mailto:cstoeffler@admin.nv.gov).

**NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.**

Approved by:



Administrator, Purchasing Division or Designee

8/6/24

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: **29829**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2710-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **KENNY GUINN CENTER FOR POLICY**Contractor Name: **KENNY GUINN CENTER FOR POLICY**Address: **PO BOX 750117**City/State/Zip: **Las Vegas , NV 89136-0117**Contact/Phone: **775/682-5083**Vendor No.: **T27039031B**NV Business ID: **NV20131262985**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | 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 **09/27/2024**

Anticipated BOE meeting date 10/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **07/31/2025**Contract term: **307 days**4. Type of contract: **Contract**Contract description: **AI conference**

5. Purpose of contract:

**This is a new service agreement under statewide contract 99SWC-NV23-17904 which provides marketing services, conference planning services, facilitation, community building, program evaluation, training needs assessments, project management, data analysis and report development. This service agreement provides venue coordination, advertising marketing, publication services, and administrative oversight for the Artificial Intelligence Conference.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$93,660.00**

Other basis for payment: As invoiced by the Vendor and accepted by the state.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Department of Education has entered into a service agreement with the Kenny Guinn Center for Policy for the purpose of hosting and managing the Artificial Intelligence Conference. The will involve specific services provided by the Guinn Center, including venue coordination, advertising and marketing, publication services, and administrative oversight.

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 have the capacity to facilitate this work

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?

statewide contract 99SWC-NV23-17904

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   | carnol1 | 09/27/2024 15:46:14 PM |
| Division Approval         | carnol1 | 09/27/2024 15:46:17 PM |
| Department Approval       | carnol1 | 09/27/2024 15:46:20 PM |
| Contract Manager Approval | mranki1 | 09/27/2024 16:18:59 PM |
| Budget Analyst Approval   | mranki1 | 09/27/2024 16:19:02 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: **29830**

|                                 |                                      |                    |  |
|---------------------------------|--------------------------------------|--------------------|--|
| Agency Name:                    | <b>NDE - DEPARTMENT OF EDUCATION</b> | Legal Entity Name: | The Department of Native American Affairs        |
| Agency Code:                    | <b>300</b>                           | Contractor Name:   | <b>The Department of Native American Affairs</b> |
| Appropriation Unit:             | <b>2710-21</b>                       | Address:           | <b>5366 Snyder Avenue, Building 3</b>            |
| Is budget authority available?: | <b>Yes</b>                           | City/State/Zip     | <b>Carson City , NV 89701</b>                    |
| If "No" please explain:         | Not Applicable                       | Contact/Phone:     | Stacey Montooth 775-687-8333                     |
|                                 |                                      | Vendor No.:        |  |
|                                 |                                      | NV Business ID:    | governmental agency                              |

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | 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 **10/01/2024**

Anticipated BOE meeting date 10/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **11/30/2025**Contract term: **1 year and 60 days**4. Type of contract: **Interlocal Agreement**Contract description: **Native American**

5. Purpose of contract:

**This is a new interlocal agreement to provide consultation sessions with Nevada educators for reviewing and finalizing draft K-12 lesson plans centered on American Indian content.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$72,233.50**

Other basis for payment: As invoiced by the Vendor and Accepted by the State

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**The Department of Native American Affairs will collaborate with the Nevada Department of Education to hold consultation sessions with Nevada educators for reviewing and finalizing draft K-12 lesson plans centered on American Indian content.**

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 have the expertise to facilitate these lessons.**

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?

In accordance with NRS.277.180 the agency has contracted with the Department of Native American Affairs.

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   | mranks1 | 09/27/2024 16:29:24 PM |
| Division Approval         | mranks1 | 09/27/2024 16:29:26 PM |
| Department Approval       | mranks1 | 09/27/2024 16:29:28 PM |
| Contract Manager Approval | mranks1 | 09/27/2024 16:29:31 PM |
| Budget Analyst Approval   | mranks1 | 09/27/2024 16:29:34 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: 29713

Agency Name: NDE - DEPARTMENT OF EDUCATION

Agency Code: 300

Appropriation Unit: 2721-60

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Department of Health and Human Services, Division of Public and Behavioral Health Rural Clinics

Contractor Name: Department of Health and Human Services, Division of Public and Behavioral Health Rural Clinics

Address: 727 Fairview Drive, Suite A

City/State/Zip: Carson City, NV 89701

Contact/Phone: Michelle Sandoval 775-434-9011

Vendor No.: NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

General Funds0.00 %

Fees0.00 %

X Federal Funds100.00 %

Bonds0.00 %

Highway Funds0.00 %

Other funding0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/25/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 09/30/2028

Contract term: 4 years and 6 days

4. Type of contract: Interlocal Agreement

Contract description: DHHS Rural Clinics

5. Purpose of contract:

This is a new interlocal contract for the purpose of engaging with Rural Clinics is to increase student access to mental health services in rural regions of the State.

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 by the Vendor and accepted by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose of engaging with Rural Clinics is to increase student access to mental health services in rural regions of the State. Through expanding access to licensed clinicians, the aim of the Trauma Recovery Project is to improve student wellness, adaptive student behavior, school safety and academic performance through supporting trauma specific treatment for students who are low-income and uninsured or low-income and underinsured.

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 have the staff or experience to complete 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 Applicable

b. Solicitation Waiver: **Not Applicable**

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

In accordance with NRS.277.180 the agency has contracted with Department of Health and Human Resources Division of Public and Behavioral Health Rural Clinics.

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 #23564. 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   | smill22  | 08/23/2024 15:15:36 PM |
| Division Approval         | carnol1  | 08/23/2024 15:23:50 PM |
| Department Approval       | carnol1  | 08/23/2024 15:23:53 PM |
| Contract Manager Approval | yalliso1 | 08/23/2024 15:34:35 PM |
| Budget Analyst Approval   | vfajota  | 09/25/2024 11:18:05 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: 29339

Agency Name: DTCA - MUSEUMS AND HISTORY DIVISION

Agency Code: 331

Appropriation Unit: 2941-20

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: WHEELER'S ELECTRIC, INC

Contractor Name: WHEELER'S ELECTRIC, INC

Address: PO BOX 398

City/State/Zip: OVERTON, NV 89040-0398

Contact/Phone: Rodney Leavitt 702/397-8457

Vendor No.: T81202013

NV Business ID: NV19811002885

To what State Fiscal Year(s) will the contract be charged? 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 % License Plate Funding |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 10/01/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2024

Contract term: 91 days

4. Type of contract: Contract

Contract description: Lighting Repair

5. Purpose of contract:

This is a new contract to repair lighting at the Lost City Museum. Areas to be addressed include the parking lot, exterior building, and interior gallery.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$28,648.00

II. JUSTIFICATION

7. What conditions require that this work be done?

To ensure the continuing health and safety of the Museum's visitors and staff, lighting in good working order is 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 skills or equipment to complete the lighting repairs.

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):

Callidus Electric  
Allstate Electric  
Wheeler's Electric Inc.

b. Solicitation Waiver: Not Applicable

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

Selected vendor submitted the most responsive quote.

d. Last bid date: 03/15/2024 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   | ddeleo2  | 05/30/2024 11:14:42 AM |
| Division Approval         | ddeleo2  | 05/30/2024 11:14:45 AM |
| Department Approval       | amathies | 05/30/2024 12:11:36 PM |
| Contract Manager Approval | ddeleo2  | 10/01/2024 08:41:35 AM |
| Budget Analyst Approval   | mbro28   | 10/01/2024 09:33:36 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: 29739

Agency Name: DTCA - NEVADA ARTS COUNCIL

Agency Code: 333

Appropriation Unit: 2979-29

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: HOTEL NEVADA & GAMBLING HALL, LTD.

Contractor Name: HOTEL NEVADA & GAMBLING HALL, LTD.

Address: 501 AULTMAN ST

City/State/Zip: ELY, NV 89301-1578

Contact/Phone: Lynne Godfrey 775/289-6665

Vendor No.: T81030903

NV Business ID: NV19931006456

To what State Fiscal Year(s) will the contract be charged? 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 Funds0.00 %

Fees0.00 %

X Federal Funds100.00 %

Bonds0.00 %

Highway Funds0.00 %

Other funding0.00 %

Agency Reference #: 333

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/17/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 286 days

4. Type of contract: Contract

Contract description: Hotel Nevada

5. Purpose of contract:

This is a new contract to provide lodging and event room space for the Nevada Basin to Range Exchange program conference.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$16,834.64

Payment for services will be made at the rate of \$16,834.64 per null

Other basis for payment: Completion of deliverables and receipt of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Basin to Range Exchange supports, promotes, and celebrates rural-urban collaboration through arts and culture. This conference provides a setting in a rural environment to allow ease of attendance for underserved and rural communities to experience inter-community arts-based opportunities.

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

A state agency does not have the facilities and appropriate location to host this event.

9. Were quotes or proposals solicited? Yes

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

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

Mizpah Hotel  
Gold Dust West Elko

b. Solicitation Waiver: **Not Applicable**

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

This vendor was chosen based on its location and availability, as well as providing reasonable costs for the event.

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:

Michelle Patrick, Program Officer, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | mmoren1  | 08/29/2024 09:52:42 AM |
| Division Approval         | mmoren1  | 08/29/2024 09:52:45 AM |
| Department Approval       | amathies | 09/11/2024 16:07:46 PM |
| Contract Manager Approval | mmoren1  | 09/11/2024 16:09:30 PM |
| Budget Analyst Approval   | mbro28   | 09/17/2024 09:33:53 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: **29817**Agency Name: **DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE**Agency Code: **400**Appropriation Unit: **3060-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **NEVADA PUBLIC HEALTH FOUNDATION, INC**Contractor Name: **NEVADA PUBLIC HEALTH FOUNDATION, INC**Address: **3476 Executive Pointe Way Ste 10**City/State/Zip: **Carson City, NV 89706**Contact/Phone: **Natalie Gautereaux 775 884-0392**Vendor No.: **T81018059**NV Business ID: **NV19961104052**To what State Fiscal Year(s) will the contract be charged? **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 % Fund for Resilient Nevada**Agency Reference #: **SA 10019**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/30/2024**Anticipated BOE meeting date **11/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **12/31/2024**Contract term: **92 days**4. Type of contract: **Contract**Contract description: **Event Planning**

5. Purpose of contract:

**This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides event/conference planning, facilitation, community building, and training services. This service agreement provides event and conference planning services to support an event to educate Nevadans on the effects of gestational substance use.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$37,654.00**

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

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**The division requires assistance coordinating event logistics, engaging vendors and finalizing assets and outreach for this event to support Nevadans.**

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 capacity to complete this work.**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 by Purchasing as part of a multi award solicitation 99SWC-S2340 to provide various consulting, marketing, and education services.

d. Last bid date: 04/17/2023 Anticipated re-bid date: 01/30/2027

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 is currently under contract with various DHHS agencies. 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:

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   | chadwic1 | 09/25/2024 09:23:00 AM |
| Division Approval         | chadwic1 | 09/25/2024 09:23:03 AM |
| Department Approval       | chadwic1 | 09/25/2024 09:23:05 AM |
| Contract Manager Approval | jstoffs1 | 09/25/2024 09:33:11 AM |
| Budget Analyst Approval   | pokeefe  | 09/30/2024 13:21:59 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29716

Agency Name: DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE

Agency Code: 400

Appropriation Unit: 3154-10

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Global Technical Communications LLC

Contractor Name: Global Technical Communications LLC

Address: 102 N Krohn Place

City/State/Zip: Sioux Falls, SD 57103

Contact/Phone: Benjamin Soukup 605-370-6597

Vendor No.: T32013296

NV Business ID: NV20232941745

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 25.00 %

X Federal Funds 75.00 %

Highway Funds 0.00 %

Fees 0.00 %

Bonds 0.00 %

Other funding 0.00 %

Agency Reference #: C005

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/06/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 09/30/2025

Contract term: 1 year and 24 days

4. Type of contract: Contract

Contract description: ASL Interpretation

5. Purpose of contract:

This is a new contract to provide American Sign Language (ASL) Interpretation Services to assist in the goal of reducing identified barriers to accessing technology and digital information for individuals with intellectual/developmental disabilities (I/DD), as well as those who are Deaf/Hard of Hearing or Blind/Visually Impaired and/or those living in rural communities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$50,000.00

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?

Identified as one of the most pressing needs of people in the state, the Nevada Governor's Council on Developmental Disabilities must develop a cost-effective way to reduce the barriers to accessing technology and digital information for individuals with intellectual/developmental disabilities (I/DD) representing racial and or ethnic disparities, Deaf/Hard of Hearing, Blind/Visually Impaired and /or those living in rural communities.

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

State staff do not have the expertise to complete this work.

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):

Global Technical Communications LLC

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #40DHHS-S2873, and in accordance with NRS 333, the selected vendor was the only vendor that submitted a proposal.

d. Last bid date: 07/23/2024 Anticipated re-bid date: 07/01/2028

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

10%

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

**No**

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

**No**

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

**No** If "Yes", please explain

Not Applicable

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

**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 Health and Human Services, satisfactory.

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

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

Not Applicable

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

LLC

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

**Yes**

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

**Yes**

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

**Yes**

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | chadwic1 | 09/01/2024 11:45:09 AM |
| Division Approval         | chadwic1 | 09/01/2024 11:45:12 AM |
| Department Approval       | chadwic1 | 09/01/2024 12:00:14 PM |
| Contract Manager Approval | chadwic1 | 09/01/2024 12:00:17 PM |
| Budget Analyst Approval   | pokeefe  | 09/06/2024 08:16:19 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: 29762

Agency Name: DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE

Agency Code: 400

Appropriation Unit: 3276-33

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: SOCIAL ENTREPRENEURS, INC

Contractor Name: SOCIAL ENTREPRENEURS, INC

Address: 6548 S MCCARRAN BLVD STE B

City/State/Zip: RENO, NV 89509-6150

Contact/Phone: Kelly Marschall 775/324-4567

Vendor No.: T27004599

NV Business ID: NV19961250456

To what State Fiscal Year(s) will the contract be charged? 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 % U.S. Department of Education annual formula grant |

Agency Reference #: SA 10017

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 08/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? Yes

If "Yes", please explain

Due to Department budget closings, ongoing discussions with the identified vendor, program travel and prioritized workloads, a retroactive agreement is being requested to ensure the announced meeting date is able to proceed.

3. Termination Date: 09/30/2024

Contract term: 60 days

4. Type of contract: Contract

Contract description: Project Management

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides event and conference planning services to support the Nevada Office of Individuals with Disabilities Education Act Part C and the Interagency Coordinating Council in the facilitation of Interagency Coordinating Council Retreat.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$37,614.00

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 Interagency Coordinating Council must meet, at a minimum, on a quarterly basis and the division requires assistance coordinating event logistics, engaging vendors, and finalizing assets to meet this requirement.

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 capacity to complete this work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected by Purchasing as a part of a multi-award solicitation, 99SWC-NV23-17884, to provide various consulting, marketing, and education services.

d. Last bid date: 08/01/2023 Anticipated re-bid date: 07/31/2027

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 Health and Human Services, satisfactory.

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

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

Not Applicable

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

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   | dreynol2 | 09/06/2024 14:55:41 PM |
| Division Approval         | dreynol2 | 09/06/2024 14:55:44 PM |
| Department Approval       | dreynol2 | 09/06/2024 14:55:47 PM |
| Contract Manager Approval | jstoffe1 | 09/06/2024 14:58:00 PM |
| Budget Analyst Approval   | pokeefe  | 09/06/2024 15:58:25 PM |



**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIRECTOR'S OFFICE  
*Helping people. It's who we are and what we do.*



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**MEMORANDUM**

DATE: September 4, 2024

TO: Amy Stephenson, Director, Governor's Finance Office

THROUGH: Debi Reynolds, Deputy Director, Department of Health and Human Services *SA*

FROM: Lori Ann Malina-Lovell, Clinical Program Planner 2/Part C Coordinator, IDEA Part C Office

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL: Social Entrepreneurs Inc (SEI)

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

- Statewide Contract: 99SWC-NV23-17884
- Agency ID: SA 10017

The following information is required:

- Name of Vendor: Social Entrepreneurs Inc (SEI)
- Project Description: Facilitation of federally required statewide stakeholder Interagency Coordinating Council (ICC) strategic planning meetings on September 11-12, 2024.
- Consideration: Total Contract not to exceed: \$37,614.00
- Funding Source: BA# 3276 - CAT 33; Annual Formula Grant H181A230019/H181A240019
- Requested start date of work: August 1, 2024
- Expected execution date of agreement: September 9, 2024
- Detailed explanation as to why a retroactive agreement is necessary, including:

- Reason(s) why the agreement was not submitted timely:

- In discussion and planning for the federally required statewide stakeholder Interagency Coordinating Council (ICC) strategic planning meeting it was identified that support from an outside entity would be beneficial to ensure the meeting and strategic planning were completed in a smooth and efficient manner. The agency contacted MSA vendor Social Entrepreneurs, Inc. (SEI), who are experienced professionals with effective, complex meeting facilitation. A proposal and budget was received from the vendor in July and the program worked with SEI to finalize the request, scope of work and budget, while also engaging with Department fiscal on next steps. Due to Department budget closings, ongoing discussions with the identified vendor, program travel and prioritized workloads, a retroactive agreement is being requested to ensure the announced meeting date is able to proceed.

- Describe the impact to the program/services if work is not started prior to the execution of the agreement:
  - According to 34 CFR 303.600, all states and territories accepting federal IDEA Part C funds from the U.S. Department of Education Office of Special Education Programs must have a governor-appointed advisory board known as the Interagency Coordinating Council (ICC). The impact to the ICC and the statewide early intervention system without the service agreement with the vendor will result in a lack of much needed support to the ICC, which then affects early intervention (EI) programs and families in aspects such as programming, planning, evaluation, equity/access and family engagement.

While IDEA Part C would do our best to facilitate the complex strategic planning meetings, we recognize that the professional vendor who is well experienced in working with critical state and community stakeholders would optimize the meeting facilitation in strategic ways which would best honor and ideally accelerate the time and efforts of each council member as well as any public community members in attendance, as all meetings must be open and accessible to the public.

Without the vendor assisting us with meeting facilitation, it is expected that information would not be gathered effectively and completely, resulting in a high risk for lowered productivity in strategic planning by the council, and ultimately a decreased support to their advisory role of being a public voice for positive change for the early intervention (EI) services system, which includes vulnerable families and children. While there are many dedicated, hard working programs and individuals making strides in the system, the ICC as an advisory board is absolutely essential in advising, advocating for, and supporting the ongoing and complex EI system work of improving results for infants and young children with disabilities and their families.

- Explain how the program/bureau will prevent future retroactive requests:
  - The IDEA Part C Office will ensure that the next service agreement request will be submitted well ahead of time and work closely with fiscal to ensure all questions are answered and complete information is provided by the vendor. We will request to Director's Office Fiscal and Audit teams to meet or review via email for feedback on each step of the process, including service agreement drafts. We will keep good communication with both the vendor and our Fiscal team for exact dates of projected work and challenges during the completion of the service agreement.

If you have any questions, please contact Jasen Stoffer at [j.stoffer@dhhs.nv.gov](mailto:j.stoffer@dhhs.nv.gov)

cc:     Audit Unit  
        Director's Office

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: 29721

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: Trane U.S. Inc.

Contractor Name: Trane U.S. Inc.

Address: 3930 W. Windmill Lane Suite 170

City/State/Zip: Las Vegas, NV 89139

Contact/Phone: Christopher Nguyen 702-538-4395

Vendor No.: PUR0001609

NV Business ID: NV20201848976

To what State Fiscal Year(s) will the contract be charged? 2025-2029

What is the source of funds that 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 45.00 %

X Federal Funds 53.00 %

Highway Funds 0.00 %

Fees 0.00 %

Bonds 0.00 %

X Other funding 2.00 % Client Payments

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 09/25/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/30/2028

Contract term: 3 years and 340 days

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: \$79,008.92

Payment for services will be made at the rate of \$19,752.23 per Yearly

Other basis for payment: As Invoice by the Vendor and Approved by the State

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):

Super Service Cooling & Heating  
Fast Affordable Air  
ET&M Refrigeration  
Carrier Commercial Service  
Sunrise Services  
Trane U.S. Inc.

b. Solicitation Waiver: **Not Applicable**

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

This vendor provided the best priced bid for the services we need.

d. Last bid date: 07/15/2024 Anticipated re-bid date: 01/03/2028

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:

Per DAWN with different agencies from 2005 through 2024.

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

**No** If "Yes", please provide details of the litigation 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   | gjorgens | 08/26/2024 12:05:16 PM |
| Division Approval         | tric1    | 08/27/2024 12:00:12 PM |
| Department Approval       | ecreceli | 09/11/2024 13:59:59 PM |
| Contract Manager Approval | maceved1 | 09/19/2024 15:07:29 PM |
| Budget Analyst Approval   | khal5    | 09/25/2024 14:35:25 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: **25712** Amendment Number: **1**

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH** Legal Entity Name: **MESA ENERGY SYSTEMS, INC.**

Agency Code: **406** Contractor Name: **MESA ENERGY SYSTEMS INC. DBA**

Appropriation Unit: **3162-07** Address: **EMCOR SERVICES MESA ENERGY INC**

Is budget authority available?: **Yes** City/State/Zip: **2 CROMWELL IRVINE, CA 92618**

If "No" please explain: Not Applicable Contact/Phone: **SCOTT COOPER 775-385-3773**

Vendor No.: **T27027115**

NV Business ID: **NV20071267110**

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.

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| <b>X</b> General Funds | <b>100.00 %</b> | 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 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Previously Approved 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 the first amendment to the original contract which provides ongoing HVAC equipment repair and maintenance for the Northern Nevada Adult Mental Health Services and Lakes Crossing Center. This amendment increases the maximum amount from \$45,000.00 to \$69,620.00 due to the need for required emergency repair services.**

## 6. CONTRACT AMENDMENT

|   | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|---|-------------|---------------|-----------------|------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00   | \$45,000.00     | Yes - Info |
| 2. Amount of current amendment (#1):        | \$24,620.00 | \$24,620.00   | \$69,620.00     | Yes - Info |
| 3. New maximum contract amount:             | \$69,620.00 |               |                 |            |

**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):

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:

MESA ENERGY SYSTEMS Inc 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?

No b. If "No", please explain:

**DAWN identifies the vendor with a DBA of EMCOR SERVICES MESA ENERGY INC where Silver Flume does not.**

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

Yes

18. 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 | msilzell | 07/27/2024 19:02:05 PM |
| Division Approval       | msilzell | 07/27/2024 19:02:13 PM |
| Department Approval     | ijanssen | 08/23/2024 12:02:17 PM |

Contract Manager Approval  
Budget Analyst Approval

ijanssen  
cdavis

10/07/2024 14:57:09 PM  
10/08/2024 16:01:22 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 28493

Amendment Number: 1

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH

Legal Entity Name: Social Entrepreneurs, Inc.

Agency Code: 406

Contractor Name: SOCIAL ENTREPRENEURS, INC.

Appropriation Unit: 3170-28

Address: 6548 S MCCARRAN BLVD STE B

Is budget authority available?: Yes

City/State/Zip: RENO, NV 89509-6150

If "No" please explain: Not Applicable

Contact/Phone: Kelly Marschall 775/324-4567

Vendor No.: T27004599

NV Business ID: NV19961250456

To what State Fiscal Year(s) will the contract be charged? 2024-2025

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 #: 18269

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/01/2024

Anticipated BOE meeting date 09/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 09/30/2024

Contract term: 272 days

4. Type of contract: Contract

Contract description: Consulting Services

5. Purpose of contract:

This is the first amendment to the original contract that provides consulting and training services to address treatment gaps in continuum care. This amendment increases the maximum amount from \$52,159.60 to \$77,998.60 due to the addition of support hours to complete the 4 phases of this project.

| 6. CONTRACT AMENDMENT |  | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|-----------------------|--|-------------|---------------|-----------------|------------|
| 1.                    | The max amount of the original contract: | \$52,159.60 | \$52,159.60   | \$52,159.60     | Yes - Info |
| 2.                    | Amount of current amendment (#1):        | \$25,839.00 | \$25,839.00   | \$77,998.60     | Yes - Info |
| 3.                    | New maximum contract amount:             | \$77,998.60 |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

To address treatment gaps in continuum care. Services will include strategic planning addressing implementation barriers, decrease gaps in continuum care, resource development and linkage, improve implementation of Comprehensive Addiction and Recovery Act (CARA) Plans to develop a network of trained peer recovery support specialist.

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

Lack of manpower and technical expertise.

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?

MSA vendor 99SWC-NV23-17884

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:

MSA 99SWC-NV23-17884

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

**No** If "Yes", please provide details of the litigation 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:

punctuation

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

Yes

18. 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   | dcastro  | 08/06/2024 12:41:41 PM |
| Division Approval         | dcastro  | 08/06/2024 12:41:48 PM |
| Department Approval       | ijanssen | 08/06/2024 12:44:59 PM |
| Contract Manager Approval | dcastro  | 09/04/2024 08:05:59 AM |
| Budget Analyst Approval   | cdavis   | 09/19/2024 09:11:02 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: **29499**

|                                 |  |                    |                                    |
|---------------------------------|--|--------------------|------------------------------------|
| Agency Name:                    | <b>DHHS - PUBLIC AND BEHAVIORAL HEALTH</b> | Legal Entity Name: | <b>WESTERN MICHIGAN UNIVERSITY</b> |
| Agency Code:                    | <b>406</b>                                 | Contractor Name:   | <b>WESTERN MICHIGAN UNIVERSITY</b> |
| Appropriation Unit:             | <b>3214-04</b>                             | Address:           | <b>1903 W MICHIGAN AVE</b>         |
| Is budget authority available?: | <b>Yes</b>                                 | City/State/Zip     | <b>KALAMAZOO, MI 49008-5200</b>    |
| If "No" please explain:         | Not Applicable                             | Contact/Phone:     | Dr. Robert Bensley 269-387-3081    |
|                                 |  | Vendor No.:        | T27023477                          |
|                                 |  | NV Business ID:    | Government Agency                  |

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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 %          | Fees          | 0.00 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: C18428

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/15/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2026**Contract term: **1 year and 350 days**4. Type of contract: **Interlocal Agreement**Contract description: **Nutrition Education**

5. Purpose of contract:

**This is a new interlocal agreement to provide ongoing services for nutrition education modules to educate participants regarding the benefits of utilizing supplemental food, and purchasing healthy nutritious food.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$42,418.00**

Other basis for payment: Per Attachment A: Scope of Work and Deliverables

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**The Division of Public and Behavioral Health is required to meet grant deliverables defined in scope of work.**

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 available resources or infrastructure to meet these federal grant deliverables.**9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

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

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

NRS 277.180 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; and WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of 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:

Western Michigan University has been used by the division with satisfactory results.

14. Is the contractor currently involved in litigation with the State 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   | msilzell | 07/27/2024 16:17:06 PM |
| Division Approval         | msilzell | 07/27/2024 16:17:09 PM |
| Department Approval       | ijanssen | 09/05/2024 11:35:16 AM |
| Contract Manager Approval | ijanssen | 09/05/2024 11:35:20 AM |
| Budget Analyst Approval   | cdavis   | 10/15/2024 07:52:18 AM |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Blanca Ayala, Health Program Manager II, DPBH, DHHS  
Kareen Filippi, Management Analyst III, DPBH, DHHS  
Matthew Gress, IT Technician VI, DPBH, DHHS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DPBH – TIN 1010 – *Western Michigan University (wichealth.org)* – BA 3214

**DATE:** July 26, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health’s (DPBH) – *Western Michigan University (wichealth.org)* – TIN 1010.

The submitted TIN, for an estimated value of \$42,418.00 in the FY24/FY25 biennium (100% Federal Grant funding), is to continue the existing online nutrition training module to Nevada WIC participants.

The contract includes the following:

1. Provide access to Nevada WIC participants to all existing lessons associated with wichealth.org and owned by WMU, an Internet-based nutrition education and stages of change based behavioral counseling system.

2. Provide access by Nevada WIC personnel to Nevada usage data associated with client access to wichealth.org.
3. Provide Nevada WIC personnel with access to all wichealth.org support resource websites owned by WMU.
4. Provide access to WMU owned all lessons that have been or will be translated into Spanish.
5. Maintain Quick Connect feature.

The agency considers the investment and final implementation to have an ongoing low security risk; however, personal identification information is transported, stored and/or processed using the solution and it is subject to federal 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 OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: **29469**

|                                 |  |                    |   |
|---------------------------------|--|--------------------|---|
| Agency Name:                    | <b>DHHS - PUBLIC AND BEHAVIORAL HEALTH</b> | Legal Entity Name: | <b>BOARD OF REGENTS-UNR University of Nevada Reno</b> |
| Agency Code:                    | <b>406</b>                                 | Contractor Name:   | <b>BOARD OF REGENTS-UNR University of Nevada Reno</b> |
| Appropriation Unit:             | <b>3648-08</b>                             | Address:           | <b>UNR CONTROLLERS OFFICE MAIL STOP 0124</b>          |
| Is budget authority available?: | <b>Yes</b>                                 | City/State/Zip     | <b>RENO, NV 89557-0124</b>                            |
| If "No" please explain:         | Not Applicable                             | Contact/Phone:     | <b>775/784-1233</b>                                   |
|                                 |  | Vendor No.:        | <b>D35000816</b>                                      |
|                                 |  | NV Business ID:    | <b>NV20161295653</b>                                  |

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

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| <b>X</b> General Funds | <b>100.00 %</b> | Fees          | 0.00 % |
| Federal Funds          | 0.00 %          | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

Agency Reference #: C 18403

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2024**

Anticipated BOE meeting date 08/2024

Retroactive? **Yes**

If "Yes", please explain

**Delay in receiving the Scope of Work for UNR.**3. Termination Date: **06/30/2025**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Patient Services**

5. Purpose of contract:

**This is a new interlocal agreement to provide an educational setting and payment for services to 3rd-year medical students majoring in Psychiatry to allow the student to fulfill required externship licensure hours.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,031.27**

Payment for services will be made at the rate of \$30,031.27 per year

**II. JUSTIFICATION**

7. What conditions require that this work be done?

To provide psychiatric services to Rural Nevada.

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

Rural Clinics has difficulty finding and hiring qualified psychologists. By partnering with UNR, Rural Clinics can collaborate with graduate medical and psychiatric resident education while providing services to rural Nevada.

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

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

Not Applicable

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

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

Provide Services to Rural Clinics by using an educational setting for continued graduate medical and psychiatric residents.  
Professional Service (As defined in NAC 333.150)

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   | ttilto1  | 07/09/2024 10:26:52 AM |
| Division Approval         | ijanssen | 08/26/2024 12:46:12 PM |
| Department Approval       | ijanssen | 08/26/2024 12:46:15 PM |
| Contract Manager Approval | ijanssen | 09/20/2024 15:50:48 PM |
| Budget Analyst Approval   | cdavis   | 10/08/2024 16:04:13 PM |

Joe Lombardo  
Governor

Richard Whitley, MS  
Director



**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



Cody Phinney  
Administrator

Ihsan Azzam,  
Ph.D., M.D.  
Chief Medical Officer

## MEMORANDUM

DATE: July 3, 2024

TO: Crystal Novotny, Executive Branch Budget Officer I  
Governor's Finance Office, Budget Division

THROUGH: Ellen Richardson-Adams, Agency Manager  
Division of Public and Behavioral Health, Rural Clinics

FROM: Briana Craig, Management Analyst II *BC*  
Division of Public and Behavioral Health, Rural Clinics

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL Board of Regents – UNR Med C 18403

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

The following information is required:

- Name of Provider: Board of Regents, UNR, University of Nevada – Reno, School of Medicine
- Services to be provided: An educational setting for continued graduate medical and psychiatric resident education. As a result of this educational program there will be continued assistance given in providing an adequate supply of adult psychiatrists for the people of the State of Nevada. In addition, it will enhance the ability of Rural Clinics to attract and retain better qualified psychiatrists to provide high quality health care to the people of Rural Nevada.
- Funding source and expenditure category: BA#3648 - CAT 08
- Requested start date of work: July 1, 2024
- Expected execution date of agreement: August 13, 2024
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - Reason(s) why the agreement was not submitted timely:
    - Delay in receiving the Scope of Work for UNR.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:
    - The Division of Public and Behavioral Health, Rural Clinics will not be able to provide psychiatric training opportunities to medical students, which in turn creates a shortfall of providers to service Nevada's population in need of services.
  - Explain how the program/bureau will prevent future retroactive requests:
    - DPBH – Rural Clinics will begin the contract process 6-7 months in advance and ensure more consistent communication and follow-up.

If you have any questions, please contact Briana Craig at (775) 684-5019 or [blcraig@health.nv.gov](mailto:blcraig@health.nv.gov).

cc: Contract Unit  
Division of Public and Behavioral Health

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29573

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES

Agency Code: 409

Appropriation Unit: 3148-95

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Metro Awnings & Iron, Inc.

Contractor Name: Metro Awnings & Iron, Inc.

Address: 4525 W. Hacienda Ave. Unit 2

City/State/Zip: Las Vegas, NV 89118

Contact/Phone: Paul Buskirk 702-300-1964

Vendor No.: T29045882

NV Business ID: NV20061311541

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

Federal Funds

0.00 %

Highway Funds

0.00 %

Fees

0.00 %

Bonds

0.00 %

Other funding

0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/12/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 291 days

4. Type of contract: Contract

Contract description: Shade Canopy Install

5. Purpose of contract:

This is a new contract to provide labor and materials to fabricate and install a custom shade sail canopy.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$86,100.00

Payment for services will be made at the rate of \$75,600.00 per Labor and Materials

Other basis for payment: \$7,500 for Turnkey Permit Package and \$3,000 for Equipment Rental.

II. JUSTIFICATION

7. What conditions require that this work be done?

The courtyard requires shade from the sun.

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 expertise required to install a shade sail canopy.

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):

Sylas Group LLC  
Open Air Cinema LLC  
Metro Awnings & Iron Inc.

b. Solicitation Waiver: Not Applicable

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

Pursuant to RFP #40DHHS-S2817, and in accordance with NRS 333, the selected vendor was the only vendor to respond.

d. Last bid date: 05/31/2024 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:

Vendor was under contract with the Office of the Military. 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:

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Corrina Church, Admin Services Officer I Ph: 702-668-5757

Van Dishong, Facility Supervisor II Ph: 702-668-4752

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | dander16 | 08/01/2024 09:52:50 AM |
| Division Approval         | dfrohlic | 09/03/2024 14:14:22 PM |
| Department Approval       | tgreenam | 09/05/2024 10:08:51 AM |
| Contract Manager Approval | sknigge  | 09/06/2024 10:20:47 AM |
| Budget Analyst Approval   | pokeefe  | 09/12/2024 14:28:54 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:   | 28362  | Amendment Number:          | 1                                |
| Agency Name:  | DHHS - DIVISION OF CHILD AND FAMILY SERVICES | Legal Entity Name:         | Rite of Passage, Inc.            |
| Agency Code:  | 409  | Contractor Name:           | Rite of Passage, Inc.            |
| Appropriation Unit:   | 3229-16                                      | Address:                   | 2560 Business Pkwy, Ste. A       |
| Is budget authority available?:   | Yes  | City/State/Zip             | Minden, NV 89423                 |
| If "No" please explain:   | Not Applicable                               | Contact/Phone:             | Elizabeth Seminario 480-987-2026 |
|   |  | Vendor No.:                | T29045679                        |
|   |  | NV Business ID:            | NV19861019226                    |
| To what State Fiscal Year(s) will the contract be charged?  | 2024-2025                                    |                            |                                  |
| 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 | 09/28/2023                       |
| Anticipated BOE meeting date  | 11/2024                                      |                            |                                  |
| Retroactive?  | No   |                            |                                  |
| If "Yes", please explain  |  |                            |                                  |
| Not Applicable  |  |                            |                                  |
| 3. Previously Approved Termination Date:  | 09/30/2024                                   |                            |                                  |
| Contract term:  | 1 year and 184 days                          |                            |                                  |
| 4. Type of contract:  | Contract                                     |                            |                                  |
| Contract description:   | Residential Treatmnt                         |                            |                                  |
| 5. Purpose of contract:   |  |                            |                                  |
| This is the first amendment to the original contract which provides youth residential treatment services. This amendment extends the termination date from September 30, 2024, to March 30, 2025, and increases the maximum amount from \$138,000 to \$206,250 to provide continued residential treatment services for a youth currently receiving treatment. |  |                            |                                  |

6. CONTRACT AMENDMENT

|  | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|--|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract:                          | \$138,000.00 | \$138,000.00  | \$138,000.00    | Yes - Action |
| 2. Amount of current amendment (#1):                                 | \$68,250.00  | \$68,250.00   | \$68,250.00     | Yes - Info   |
| 3. New maximum contract amount:                                      | \$206,250.00 |               |                 |              |
| and/or the termination date of the original contract has changed to: | 03/30/2025   |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

All facilities accepting Medicaid have denied this placement. Rite of Passage's Desert Lily Academy can provide the residential, therapeutic and psychiatric services necessary to stabilize a youth's behavior.

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

DCFS Child Welfare employees do not have the expertise to provide the appropriate treatment to this youth.

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?

Desert Lily Academy was the only vendor willing to provide services for this youth.

- 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 agency has contracted with this vendor multiple times for many years. 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:

20. Contract Status:

Contract Approvals:

| Approval Level          | User     | Signature Date         |
|-------------------------|----------|------------------------|
| Budget Account Approval | prassie1 | 09/12/2024 14:04:41 PM |
| Division Approval       | prassie1 | 09/12/2024 14:04:48 PM |
| Department Approval     | tgreenam | 09/16/2024 16:45:56 PM |

Contract Manager Approval  
Budget Analyst Approval

dfrohlic  
pokeefe

09/19/2024 13:28:09 PM  
09/24/2024 12:52:58 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: **29736**

|                                 |   |                    |  |
|---------------------------------|---|--------------------|--|
| Agency Name:                    | <b>DHHS - DIVISION OF CHILD AND FAMILY SERVICES</b> | Legal Entity Name: | Board of Regents, Nevada System of Higher Education, on Behalf the University of Nevada, Las Vegas, Kirk Kerkorian School of Medicine        |
| Agency Code:                    | <b>409</b>  | Contractor Name:   | <b>Board of Regents, Nevada System of Higher Education, on Behalf the University of Nevada, Las Vegas, Kirk Kerkorian School of Medicine</b> |
| Appropriation Unit:             | <b>3646-04</b>                                      | Address:           | <b>625 Shadow Lane</b>   |
| Is budget authority available?: | <b>Yes</b>  | City/State/Zip     | <b>Las Vegas, NV 89106</b>   |
| If "No" please explain:         | Not Applicable                                      | Contact/Phone:     | Amanda Herman 702-823-3789   |
|                                 |   | Vendor No.:        |  |
|                                 |   | NV Business ID:    | Governmental Entity  |

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

|          |               |                |               |        |
|----------|---------------|----------------|---------------|--------|
| <b>X</b> | General Funds | <b>55.00 %</b> | Fees          | 0.00 % |
| <b>X</b> | Federal Funds | <b>45.00 %</b> | 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 **07/01/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **Yes**

If "Yes", please explain

**A retroactive request is necessary due to this fellowship agreement mirroring the state fiscal year. The University of Nevada, Las Vegas, is unable to provide updated salary schedules months or years in advance of the prior agreement's termination date to enable a timely renewal. The University of Nevada, Las Vegas, was unable to obtain salary schedules until 6/27/24. Rate structure was not confirmed until 8/27/24.**

3. Termination Date: **06/30/2025**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Psychiatric Fellows**

5. Purpose of contract:

**This is a new interlocal agreement to provide ongoing fellowship programs for individuals to learn how to evaluate and treat adolescent psychiatric patients.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$41,407.00**

Other basis for payment: \$66,314 (current salaries) + \$13,727 (fringe pool rates) + \$2,773 (average SOM malpractice rate) = \$82,814 \* .05 (FTE) = \$41,407.00 / 12 = \$3,450.59 per month for months 1-4 and \$3,450.58 for months 5-12

**II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Pediatric Psychiatry Solutions project will provide the fellow an opportunity to practice consultation to a community system of care program, both practicing leadership and clinical skills imperative to success post-graduation at the same time assisting in the development of our statewide child psychiatry consultation program.

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

The state agency does not have an internal fellowship program or equivalent program that can 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: **Exempt (Per statute)**

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

Pursuant to NRS 277.180 one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking 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

UNLV School of Medicine is part of the Nevada System of Higher Education.

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 since 2018. Services have been satisfactory.

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

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

Not Applicable

15. The contractor is 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:

Rick Rassier, null Ph: 702-486-4335

Candy Bradley, null Ph: 702-486-8064

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | prassie1 | 09/06/2024 16:26:30 PM |
| Division Approval         | prassie1 | 09/06/2024 16:26:36 PM |
| Department Approval       | mwillia9 | 09/26/2024 09:49:04 AM |
| Contract Manager Approval | dfrohlic | 10/04/2024 09:57:49 AM |
| Budget Analyst Approval   | pokeefe  | 10/04/2024 10:33:12 AM |

Joe Lombardo  
Governor

Richard Whitley, MS  
Director



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES  
*Helping people. It's who we are and what we do.*



Marla McDade  
Williams, MPA  
Administrator

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**DATE:** September 26, 2024

**TO:** Philene O'Keefe, Executive Branch Budget Officer I  
Governor's Finance Office, Budget Division

**THROUGH:** Kelsey McCann-Navarro, Administrative Services Officer IV *Kelsey McCann-Navarro*  
Division of Child and Family Services

**FROM:** Rick Rassier, Administrative Services Officer III *Rick Rassier*  
Division of Child and Family Services

**RE:** Retroactive Interlocal Contract Request - Board of Regents, Nevada System of Higher Education, on Behalf of the University of Nevada Las Vegas School of Medicine

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A retroactive effective date of July 1, 2024 is requested for an Interlocal Agreement between the Division of Child and Family Services (DCFS) and the Board of Regents, Nevada System of Higher Education, on Behalf of the University of Nevada Las Vegas (UNLV) School of Medicine to continue to provide a fellowship program, which allows fellows to learn how to evaluate and treat adolescent psychiatric patients in an inpatient and primary care setting.

The timing of this Fellowship agreement mirrors the State Fiscal Year, which terminates on June 30<sup>th</sup>. Due to this timing, UNLV is unable to obtain updated salary schedules months in advance of the agreement termination date. The agency was able to receive updated financials and the scope of work on May 1<sup>st</sup>, but there were further revisions that were received by the agency on June 27<sup>th</sup> for a pricing decrease. Also, the math was unexplained on the financial documents and DCFS was able to get confirmation for the breakdown of the costs on August 27<sup>th</sup>. The contract was sent for approvals and signatures through September and submitted on September 26<sup>th</sup>.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4462.

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: 29741

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 LAWN AND LANDSCAPING LLC

Contractor Name: AMERICAN LAWN AND LANDSCAPING LLC

Address: 3810 FAIRVIEW RD

City/State/Zip: RENO, NV 89511-1832

Contact/Phone: DAVID HARGROVE JR 775-443-8989

Vendor No.: T32015096

NV Business ID: NV20201869846

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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.

X

General Funds50.00 %

X

Federal Funds50.00 %

Highway Funds0.00 %

Fees0.00 %

Bonds0.00 %

Other funding0.00 %

Agency Reference #: 431

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 10/08/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 10/01/2026

Contract term: 1 year and 358 days

4. Type of contract: Contract

Contract description: Landscaping Service

5. Purpose of contract:

This is a new contract to provide removal, installation, repair, or maintenance for the landscaping and irrigation at the Fairview Drive location in Carson City.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$18,300.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Provide installation, repair, or maintenance on the landscaping and irrigation in Carson City.

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 skill nor the tools for the work needed.

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):

American Lawn and Landscaping  
Green Diamond Landscaping  
DRC Landscaping

b. Solicitation Waiver: Not Applicable

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

Vendor was selected as they submitted the lowest bid for the work needed.

d. Last bid date: 08/12/2024 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 only work the vendor has done has been through Public Works.

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

No If "Yes", please provide details of the litigation 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   | csnido1  | 08/30/2024 09:34:09 AM |
| Division Approval         | csnido1  | 08/30/2024 09:34:12 AM |
| Department Approval       | ctyle1   | 09/06/2024 10:42:53 AM |
| Contract Manager Approval | csnido1  | 09/24/2024 11:51:31 AM |
| Budget Analyst Approval   | Iramire7 | 10/08/2024 08:18:55 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: **29786**

|                                 |  |                    |                                     |
|---------------------------------|--|--------------------|-------------------------------------|
| Agency Name:                    | <b>ADJUTANT GENERAL &amp; NATIONAL GUARD</b> | Legal Entity Name: | <b>ARTISTIC FENCE COMPANY, INC.</b> |
| Agency Code:                    | <b>431</b>                                   | Contractor Name:   | <b>ARTISTIC FENCE COMPANY, INC.</b> |
| Appropriation Unit:             | <b>3650-07</b>                               | Address:           | <b>5740 HIGHWAY 50 E</b>            |
| Is budget authority available?: | <b>Yes</b>                                   | City/State/Zip     | <b>CARSON CITY, NV 89701</b>        |
| If "No" please explain:         | Not Applicable                               | Contact/Phone:     | <b>KEN DIETRICH 775-882-4665</b>    |
|                                 |  | Vendor No.:        | <b>PUR0000883B</b>                  |
|                                 |  | NV Business ID:    | <b>NV19711002179</b>                |

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|          |               |                |               |        |
|----------|---------------|----------------|---------------|--------|
| <b>X</b> | General Funds | <b>50.00 %</b> | Fees          | 0.00 % |
| <b>X</b> | Federal Funds | <b>50.00 %</b> | 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 **10/15/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **10/01/2028**Contract term: **3 years and 352 days**4. Type of contract: **Contract**Contract description: **Repair Fence**

5. Purpose of contract:

**This is a new contract to install, repair, or maintain fencing for all facilities in northern Nevada.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,060.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**Install, repair, or maintain fencing for all facilities in northern 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 tools, nor the skill set for the job.**9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

**Tholl Fence  
Vortex  
Artistic Fence**b. Solicitation Waiver: **Not Applicable**

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

Artistic Fence submitted with the lowest bid for the work needed.

d. Last bid date: 09/06/2024 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 agency has had one contract with the vendor, 29588. The vendor's work was satisfactory.  
The vendor has had contracts with the state.

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

No If "Yes", please provide details of the litigation 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  | 09/12/2024 13:17:35 PM |
| Division Approval         | csnido1  | 09/12/2024 13:17:40 PM |
| Department Approval       | ctyle1   | 09/12/2024 16:12:04 PM |
| Contract Manager Approval | csnido1  | 09/23/2024 11:41:30 AM |
| Budget Analyst Approval   | Iramire7 | 10/15/2024 11:25:41 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: **29784**

|                                 |  |                    |                                      |
|---------------------------------|--|--------------------|--------------------------------------|
| Agency Name:                    | <b>ADJUTANT GENERAL &amp; NATIONAL GUARD</b> | Legal Entity Name: | <b>ENGIN8 LLC</b>                    |
| Agency Code:                    | <b>431</b>                                   | Contractor Name:   | <b>ENGIN8 LLC</b>                    |
| Appropriation Unit:             | <b>3650-10</b>                               | Address:           | <b>701 BRIDGER AVENUE, SUITE 520</b> |
| Is budget authority available?: | <b>Yes</b>                                   | City/State/Zip     | <b>LAS VEGAS, NV 89101</b>           |
| If "No" please explain:         | Not Applicable                               | Contact/Phone:     | <b>SOREN PETERSON 702-823-8682</b>   |
|                                 |  | Vendor No.:        | <b>T29045881</b>                     |
|                                 |  | NV Business ID:    | <b>NV20191128377</b>                 |

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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 %          | Fees          | 0.00 % |
| <b>X</b> Federal Funds | <b>100.00 %</b> | 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 **10/11/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2026**Contract term: **1 year and 354 days**4. Type of contract: **Contract**Contract description: **Engineering Services**

5. Purpose of contract:

**This is a new contract to provide professional architectural/engineering services for heating, ventilation, and air conditioning (HVAC) feasibility study for the Anthony Cometa Complex, Las Vegas Readiness Center.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,700.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**HVAC feasibility study at the Las Readiness Center at Anthony Cometa Complex.**

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

**Lack of skills and qualifications.**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: 08/24/2024 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 agency has had a couple of contracts with the vendor before, (26765 and 26766) which they have provided excellent 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:

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   | csnido1  | 09/12/2024 13:08:21 PM |
| Division Approval         | csnido1  | 09/12/2024 13:08:26 PM |
| Department Approval       | ctyle1   | 09/12/2024 16:11:40 PM |
| Contract Manager Approval | csnido1  | 09/25/2024 17:23:34 PM |
| Budget Analyst Approval   | Iramire7 | 10/11/2024 12:47:59 PM |

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**1. Contract Number: **29743**

|                                 |  |                    |                              |
|---------------------------------|--|--------------------|------------------------------|
| Agency Name:                    | <b>ADJUTANT GENERAL &amp; NATIONAL GUARD</b> | Legal Entity Name: | NDI PLUMBING, INC.           |
| Agency Code:                    | <b>431</b>                                   | Contractor Name:   | <b>NDI PLUMBING, INC.</b>    |
| Appropriation Unit:             | <b>3650-07</b>                               | Address:           | <b>39 GLEN CARRAN CIR</b>    |
| Is budget authority available?: | <b>Yes</b>                                   | City/State/Zip     | <b>SPARKS, NV 89431-5826</b> |
| If "No" please explain:         | Not Applicable                               | Contact/Phone:     | WYATT SHIELDS 775-745-8791   |
|                                 |  | Vendor No.:        | T32001385                    |
|                                 |  | NV Business ID:    | NV20041568607                |

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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.

|          |               |                |               |        |
|----------|---------------|----------------|---------------|--------|
| <b>X</b> | General Funds | <b>50.00 %</b> | Fees          | 0.00 % |
| <b>X</b> | Federal Funds | <b>50.00 %</b> | 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 **09/26/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **07/31/2026**Contract term: **1 year and 308 days**4. Type of contract: **Contract**Contract description: **Seismic Gas Shutoff**

5. Purpose of contract:

**This is a new contract to provide installation, repair, or maintenance services on seismic gas shut-off valves in Reno.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,687.40****II. JUSTIFICATION**

7. What conditions require that this work be done?

**Provide installation, repair, or maintenance services on seismic gas shut-off valves in Reno.**

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 skill nor the tools to be able to do 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):

**D&D Plumbing  
Jet Plumbing  
NDI Plumbing**b. Solicitation Waiver: **Not Applicable**

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

Vendor was selected as the other companies did not attend the bid walk.

d. Last bid date: 05/22/2024 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 agency has had a number of contracts with the vendor, (14387, 14816, 15892, 16258, 18108), and have done excellent work in the past.

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

No If "Yes", please provide details of the litigation 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 | 08/30/2024 16:03:35 PM |
| Division Approval         | csnido1 | 08/30/2024 16:03:39 PM |
| Department Approval       | ctyle1  | 09/06/2024 10:42:36 AM |
| Contract Manager Approval | csnido1 | 09/18/2024 16:15:59 PM |
| Budget Analyst Approval   | mranki1 | 09/26/2024 08:49:43 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: **29643**Agency Name: **DEPARTMENT OF AGRICULTURE**Agency Code: **550**Appropriation Unit: **4545-27**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Western Biological LLC

Contractor Name: **Western Biological LLC**Address: **PO Box 634**City/State/Zip: **Elko, NV 89801**

Contact/Phone: Margaret Walch 775-385-6594

Vendor No.: T29049383

NV Business ID: NV20161072446

To what State Fiscal Year(s) will the contract be charged? **2025-2028**

What is the source of funds that will be used to pay the contractor? 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 #: 25-02

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/19/2024**

Anticipated BOE meeting date 09/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2027**Contract term: **3 years and 11 days**4. Type of contract: **Contract**Contract description: **Native Seed Growing**

5. Purpose of contract:

**This is a new contract to provide native-seed-growing services to grow 11.75 acres of Bluebunch Wheatgrass.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$47,000.00**

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?

This project is a subset of a larger, partnership-driven project that aims to target 4 main objectives: 1) native seed collection; 2) native seed cleaning and storage; 3) native seed production; and 4) creation of a native seed equipment network. This projects aims to enhance the availability of genetically diverse, locally sourced seed for large-scale, post-wildfire rehabilitation and restoration. It will provide a wide variety of benefits across the entire Great Basin Desert, including enhancing Greater sage-grouse habitat, providing valuable forage for all wildlife, improving pollinator habitat, restoring fire-damaged landscapes, and contributing to long-term landscape health and resilience in the face of climate change.

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

The purpose of the federal funding provided for this project is to create a base of local landowners and agricultural producers who have the technical knowledge and experience needed to grow native species. The Department of Agriculture will achieve this by providing a diverse cache of native species to Nevada-based producers and growers. Working within state agencies to grow this seed would not fulfill this purpose of the funding.

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):

Walker Basin Conservancy  
Liquid Catalyst Technology  
LK Farms  
Western Biological

b. Solicitation Waiver: **Not Applicable**

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

This vendor was chosen along with two others because of their comparable experience demonstrated in their solicitation response and their availability of acreage.

d. Last bid date: 07/15/2024 Anticipated re-bid date: 07/15/2027

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:

Russell Wilhelm, Seed Program Manager Ph: 775-353-3711

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | jwilkin3 | 08/15/2024 07:29:42 AM |
| Division Approval         | cbalcon  | 08/25/2024 15:21:45 PM |
| Department Approval       | cbalcon  | 08/25/2024 15:21:50 PM |
| Contract Manager Approval | cprasa1  | 09/12/2024 16:51:42 PM |
| Budget Analyst Approval   | dspeed1  | 09/19/2024 10:06:34 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: **24433** Amendment Number: **3**

Agency Name: **DEPARTMENT OF AGRICULTURE** Legal Entity Name: **RAY HEATING PRODUCTS, INC., DBA RHP MECHANICAL SYSTEMS**

Agency Code: **550** Contractor Name: **RAY HEATING PRODUCTS, INC., DBA RHP MECHANICAL SYSTEMS**

Appropriation Unit: **4554-07** Address: **1008 East 4th Street**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89512**

If "No" please explain: Not Applicable Contact/Phone: **Michael Scolari 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.

|               |        |                        |                                 |
|---------------|--------|------------------------|---------------------------------|
| General Funds | 0.00 % | Fees                   | 0.00 %                          |
| Federal Funds | 0.00 % | Bonds                  | 0.00 %                          |
| Highway Funds | 0.00 % | <b>X</b> Other funding | <b>100.00 % Cost Allocation</b> |

Agency Reference #: **RFP # 55AGR-S1521**

## 2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/13/2021**

Anticipated BOE meeting date **11/2024**

Retroactive? **No**

If "Yes", please explain

**Not Applicable**

3. Previously Approved Termination Date: **07/12/2025**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **HVAC PM SPARKS**

## 5. Purpose of contract:

**This is the third amendment to the original contract which provides preventative maintenance and repair services to the heating, ventilation, and air conditioning systems at the Sparks location. This amendment increases the maximum amount from \$314,173 to \$330,337 due to the unexpected failure of an exhaust fan.**

**6. CONTRACT AMENDMENT**

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$138,250.00 | \$138,250.00  | \$138,250.00    | Yes - Action |
| a. Amendment 1:                             | \$83,353.00  | \$83,353.00   | \$83,353.00     | Yes - Info   |
| b. Amendment 2:                             | \$92,570.00  | \$92,570.00   | \$175,923.00    | Yes - Action |
| 2. Amount of current amendment (#3):        | \$16,164.00  | \$16,164.00   | \$16,164.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$330,337.00 |               |                 |              |

**II. JUSTIFICATION**

## 7. What conditions require that this work be done?

Periodic preventative maintenance is performed to assure the buildings heating and air conditioning systems continue to operate and avoid any sudden major malfunctions.

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 complete maintenance on this wide range of systems.

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):

Mesa Energy Systems dba Emcor  
Nevada Chiller and Boiler  
RHP Mechanical Systems

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #55AGR-S1521, 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: 04/02/2021 Anticipated re-bid date: 04/02/2025

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:

Department of Forestry, 2018-2022  
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

jwilkin3

08/27/2024 13:23:27 PM

Division Approval

cbalcon

08/27/2024 13:25:06 PM

|                           |         |                        |
|---------------------------|---------|------------------------|
| Department Approval       | cbalcon | 08/27/2024 13:25:15 PM |
| Contract Manager Approval | cprasa1 | 09/03/2024 13:24:12 PM |
| Budget Analyst Approval   | dspeed1 | 10/14/2024 17:21:12 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: **29778**

|                                 |                                   |                    |  |
|---------------------------------|-----------------------------------|--------------------|--|
| Agency Name:                    | <b>GCB - GAMING CONTROL BOARD</b> | Legal Entity Name: | <b>ASSURED DOCUMENT DESTRUCTION, Inc.</b>  |
| Agency Code:                    | <b>611</b>                        | Contractor Name:   | <b>ASSURED DOCUMENT DESTRUCTION, Inc.</b>  |
| Appropriation Unit:             | <b>4061-04</b>                    | Address:           | <b>INC/ASSURED DOCUMENT MGMT<br/>145 E WARM SPRINGS RD<br/>LAS VEGAS, NV 89119</b> |
| Is budget authority available?: | <b>Yes</b>                        | City/State/Zip     | <b>LAS VEGAS, NV 89119</b>   |
| If "No" please explain:         | Not Applicable                    | Contact/Phone:     | Justin Smith 702-614-0001  |
|                                 |                                   | Vendor No.:        | T81096369  |
|                                 |                                   | NV Business ID:    | NV20001415539  |

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|                        |                 |               |        |
|------------------------|-----------------|---------------|--------|
| <b>X</b> General Funds | <b>100.00 %</b> | Fees          | 0.00 % |
| Federal Funds          | 0.00 %          | Bonds         | 0.00 % |
| Highway Funds          | 0.00 %          | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2028**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Document Storage**

5. Purpose of contract:

**This is a new contract to provide ongoing off-site records storage services.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Other basis for payment: According to the fees described in Attachment BB to the contract, upon receipt of state approved invoices.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**Offsite backup records storage is mandated by the Board's disaster recovery plan. Also, insufficient storage space exists to store all records at the Board's Las Vegas office.**

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

**Currently there is no State Records Center in the Clark County area.**

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):

**Vital Records  
Iron Mountain  
Assured Document Destruction, Inc.**

b. Solicitation Waiver: **Not Applicable**

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

Assured was the highest scoring proposal.

d. Last bid date: 08/01/2024 Anticipated re-bid date: 08/01/2028

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 is currently engaged under contract with the state of Nevada. 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:

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   | tfrank  | 09/12/2024 08:15:09 AM |
| Division Approval         | tfrank  | 09/12/2024 08:15:12 AM |
| Department Approval       | tfrank  | 09/12/2024 08:15:17 AM |
| Contract Manager Approval | tfrank  | 09/12/2024 08:15:37 AM |
| Budget Analyst Approval   | bmacke1 | 09/27/2024 16:32:29 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: **29580**Agency Name: **DPS-DIRECTOR'S OFFICE**Agency Code: **650**Appropriation Unit: **4701-19**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **FILEONQ, INC.**Contractor Name: **FILEONQ, INC.**Address: **832 INDUSTRY DR**City/State/Zip: **TUKWILA, WA 98188**Contact/Phone: **STEVE PAXTON 425-343-4201**Vendor No.: **PUR0004315**NV Business ID: **NV20181131193**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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 %         | Fees                   | 0.00 %                                    |
| <b>X</b> Federal Funds | <b>80.00 %</b> | Bonds                  | 0.00 %                                    |
| Highway Funds          | 0.00 %         | <b>X</b> Other funding | <b>20.00 % DPS Cost Allocated Funding</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/02/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2026**Contract term: **1 year and 363 days**4. Type of contract: **Contract**Contract description: **Digital Evidence**

5. Purpose of contract:

**This is a new contract to provide a Digital Evidence Management System. The system will manage digital evidence submitted by Nevada State Police agencies and allow the Nevada State Police to access digital evidence from various sources, including computers, mobile devices, and the cloud.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$88,086.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**The current method of storing digital evidence requires external storage such as thumb drives or DVDs which is time consuming, expensive, and exposes the Nevada State Police to additional risks. Physical devices have a higher risk of data corruption or loss. Digital evidence has increased exponentially over the last few years.****Digital evidence is equally important to physical evidence and should be maintained in a manner to ensure the integrity of the digital evidence and chain of custody. Digital evidence should be handled in accordance with Criminal Justice Information Services storage guidelines and adhere to Scientific Working Group on Digital Evidence standards. The data needs to be stored in a secure manner with a sufficient back-up process. Access to digital evidence should be limited to authorized users and tracked. Digital evidence should be handled in a consistent manner for all divisions to include dissemination, retention schedules, chain of custody, confidentiality, and purging processes.**

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

**There are no State employees who can provide this service.**

9. Were quotes or proposals solicited?

**Yes**

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

No

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

LemsLock  
FileOnQ  
Axon

b. Solicitation Waiver: **Not Applicable**

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

The solicitation request for proposal was done by the agency. Only two of the three vendors submitted bids. The chosen vendor scored the highest with the evaluation committee.

d. Last bid date: 04/12/2024 Anticipated re-bid date: 03/30/2026

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?

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 Department of Public Safety, Director's Office, Evidence Vault currently uses FileOnQ for their evidence management software system. The 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:

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 | 09/17/2024 16:54:43 PM |
| Division Approval         | cjackson | 09/17/2024 16:54:48 PM |
| Department Approval       | kdefe1   | 09/19/2024 10:38:53 AM |
| Contract Manager Approval | mcosenti | 09/19/2024 17:21:34 PM |
| EITS Approval             | ljea     | 09/20/2024 11:56:11 AM |
| Budget Analyst Approval   | khawkin1 | 10/02/2024 14:20:41 PM |



**STATE OF NEVADA  
GOVERNOR’S OFFICE**  
*Office of the Chief Information Officer*  
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701  
Phone: (775) 684-5800 | [www.it.nv.gov](http://www.it.nv.gov) | Fax: (775) 687-9097

**M E M O R A N D U M**

**TO:** Melissa Sabatini, Administrative Services Officer I, DPS  
Lori Renfroe, Program Officer II, DPS  
Christina Jackson, Budget Analyst III, DPS  
Kaylie Rooker, Business Process Analyst III, DPS

**CC:** Tim Galluzi, State Chief Information Officer, OCIO  
Robert Dehnhardt, State Chief Information Security Officer, OCIO  
Sean Montierth, Computing Services Unit, OCIO  
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM:** Lisa Jean, TIN Administrator, OCIO

**SUBJECT:** TIN Completion Memo – DPS – TIN 1017 – *DigitalOnQ Evidence Management Program* – BA 4701

**DATE:** September 11, 2024

We have completed our review for the Department of Public Safety (DPS) – *DigitalOnQ Evidence Management Program* – TIN 1017.

The submitted TIN, for an estimated value of \$77,575.00 in the FY24/FY25 biennium and \$20,210.00 in the FY26/FY27 biennium (80% ARPA Grant and 20% Cost Allocation funding), is to support a contract with FileOnQ for their DigitalOnQ product.

This investment is to manage digital evidence collected by the agencies of DPS. Due to the widespread

use of body cameras and the growing digital nature of public safety operations, the Evidence Vault requires an updated system for storing and cataloging digital evidence. Currently, this evidence is stored on physical CDs, which complicates the search and retrieval process. A digital evidence storage system will offer the same level of searchability that is available for physical evidence.

Investment in the DigitalOnQ system will enable secure storage, auditing, and management of digital evidence, allowing for direct import from various sources, including cameras, CDs, flash drives, cell phones, CCTV footage, and hard drives. Additionally, the system will facilitate secure dissemination of evidence to district attorneys, courts, and other relevant entities.

FileOnQ is a well-established and reliable company that DPS has been working with since 2008. DigitalOnQ, introduced in 2018, is a cutting-edge, criminal justice system-compliant solution. The risk associated with this project is minimal as it is primarily a software solution requiring minimal project management services.

Historical data will not be converted by the vendor as part of this investment. It is anticipated that OCIO-supported VM Server and Mainframe Hosting will experience an increase as a result of the new system, with server equipment physically residing at the OCIO data center. The use of a secure server solution, whether cloud-based or on-site, should be guided by OCIO to ensure compliance with state cybersecurity policies and best practices, minimizing vulnerabilities and enhancing overall data security.

This implementation introduces critical cybersecurity considerations regarding secure storage, access, and dissemination of sensitive data collected by the Department of Public Safety. This system is designed to comply with criminal justice system standards, providing robust protection for digital evidence through encryption, access controls, and auditing features. By centralizing digital evidence from multiple sources, the system reduces the risks associated with outdated physical storage methods. Additionally, secure transfer mechanisms must be in place for sharing evidence with authorized parties, such as district attorneys and courts, safeguarding the integrity of the data.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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: **29458**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4460-09**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **REBECCA ANNE MOSSOW & JAMES G MOSSOW**Contractor Name: **REBECCA ANNE MOSSOW & JAMES G MOSSOW**Address: **HULINGS ENTERPRISES  
PO BOX 544**City/State/Zip: **MCGILL, NV 89318-0544**Contact/Phone: **REBECCA MOSSOW 775/296-3577**Vendor No.: **T27040430**NV Business ID: **NV20151244533**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|               |        |          |               |                                   |
|---------------|--------|----------|---------------|-----------------------------------|
| General Funds | 0.00 % | <b>X</b> | Fees          | <b>100.00 % Sportsmen Revenue</b> |
| Federal Funds | 0.00 % |          | Bonds         | 0.00 %                            |
| Highway Funds | 0.00 % |          | Other funding | 0.00 %                            |

Agency Reference #: **25-02**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2024**Anticipated BOE meeting date **10/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2028**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Janitorial Services**

5. Purpose of contract:

**This is a new contract to provide janitorial services at the department's Ely office.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,600.00**

Payment for services will be made at the rate of \$450.00 per Month

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**Ongoing janitorial services are needed to keep the departments Ely office a clean and sanitary work environment.**

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

**Buildings & Grounds does not provide janitorial services in this area.**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):

**Squeaky Clean  
Hulings Enterprises  
Sarah B's Property Care LLC**b. Solicitation Waiver: **Not Applicable**

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

Contractor has provided service in the past and has proved exemplary service.

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 - current, work has always been satisfactory.

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

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

Not Applicable

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

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Natalie Pannunzio, Administrative Assistant IV Ph: (775) 777-2318

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | nroble1  | 07/09/2024 08:39:40 AM |
| Division Approval         | nroble1  | 07/09/2024 08:39:43 AM |
| Department Approval       | jneubau2 | 07/31/2024 09:58:03 AM |
| Contract Manager Approval | abarredo | 07/31/2024 10:35:59 AM |
| Budget Analyst Approval   | dspeed1  | 09/19/2024 10:34:38 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: **29804**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4462-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Epic Outdoors, LLC**Contractor Name: **Epic Outdoors, LLC**Address: **2142 W 850 N Ste 101**City/State/Zip: **Cedar City, UT 84721**Contact/Phone: **Jason Carter 435-263-0777**Vendor No.: **T32010970**NV Business ID: **NV20212073637**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

General Funds 0.00 % **X** Fees **100.00 % Sportsmen Revenue**

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 25-23

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/14/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2028**Contract term: **3 years and 352 days**4. Type of contract: **Contract**Contract description: **Hunting Advertising**

5. Purpose of contract:

**This is a new contract to provide; marketing for hunting through television, podcast, and social media presence; Content creation, and promotion strategies for interviews and advertisements.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Promotion and marketing that the department can't provide through digital marketing.

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

Department employees can't market to this audience on their own.

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):

Epic Outdoors LLC  
Swanson Russell  
Southwick Associatesb. Solicitation Waiver: **Not Applicable**

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

Vendor provided lowest 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:

Yes, NDOW, FY21-2024, work is satisfactory.

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

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

Not Applicable

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

Chris Vasey, ConEd Division Administrator Ph: 775-688-1553

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | abarredo | 09/23/2024 09:03:05 AM |
| Division Approval         | abarredo | 09/23/2024 09:03:08 AM |
| Department Approval       | jneubau2 | 10/09/2024 08:42:56 AM |
| Contract Manager Approval | abarredo | 10/09/2024 09:04:53 AM |
| Budget Analyst Approval   | dspeed1  | 10/14/2024 18:20:31 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: **29651**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4464-22**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE**Contractor Name: **CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE**Address: **1416 9TH ST**City/State/Zip: **SACRAMENTO, CA 95814**Contact/Phone: **Anthony Poindexter 916/247-7766**Vendor No.: **T32011532**NV Business ID: **GOVERNMENTAL ENTITY**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

|          |               |                |          |               |                |  |
|----------|---------------|----------------|----------|---------------|----------------|--|
| <b>X</b> | General Funds | <b>52.00 %</b> | <b>X</b> | Fees          | <b>48.00 %</b> | <b>Law Enforcement Sportsmen Revenue</b> |
|          | Federal Funds | 0.00 %         |          | Bonds         | 0.00 %         |  |
|          | Highway Funds | 0.00 %         |          | Other funding | 0.00 %         |  |

Agency Reference #: **25-06**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2024**Anticipated BOE meeting date **10/2024**Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2028**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Forensic Services**

5. Purpose of contract:

**This is a new contract to provide scientific and forensic support services for conservation law enforcement and wildlife management.**

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 California Department of Fish and Wildlife has expertise and laboratories to provide scientific and forensic support services that the Nevada Department of Wildlife currently does not.**

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

**The Nevada Department of Wildlife does not have a dedicated laboratory or existing, experienced staff to perform the types of analysis that is being requested.**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:

Yes, FY22-current with the Nevada Department of Wildlife. 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:

Shawn Espinosa, Division Administrator Game Management Ph: 775/688-1520

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | abarredo | 08/19/2024 15:24:04 PM |
| Division Approval         | abarredo | 08/19/2024 15:25:18 PM |
| Department Approval       | jneubau2 | 09/13/2024 09:17:38 AM |
| Contract Manager Approval | amedin4  | 09/13/2024 13:27:27 PM |
| Budget Analyst Approval   | dspeed1  | 10/01/2024 17:07:12 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: 27049

Amendment Number: 1

Agency Name: DEPARTMENT OF WILDLIFE

Legal Entity Name: BOARD OF REGENTS-WESTERN NEVADA COLLEGE

Agency Code: 702

Contractor Name: BOARD OF REGENTS-WESTERN NEVADA COLLEGE

Appropriation Unit: 4465-44

Address: WNC CONTROLLERS OFFICE  
2201 WEST COLLEGE PARKWAY

Is budget authority available?: Yes

City/State/Zip: CARSON CITY, NV 89703-7316

If "No" please explain: Not Applicable

Contact/Phone: Lauren Slemenda 775/445-4210

Vendor No.: D35000822

NV Business ID: GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? 2024-2026

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           | 60.00 % | Bonds           | 0.00 %              |
| Highway Funds             | 0.00 %  | X Other funding | 40.00 % Trout Stamp |
| Agency Reference #: 24-01 |         |                 |                     |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 08/23/2023

Anticipated BOE meeting date 09/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/31/2024

Contract term: 2 years and 131 days

4. Type of contract: Interlocal Agreement

Contract description: CDL Certification

5. Purpose of contract:

This is the first amendment to the original contract which provides commercial driver's license (CDL) training for new employees that are required to obtain a CDL license. This amendment extends the termination date from December 31, 2024, to December 31, 2025, and increases the maximum amount from \$30,400 to \$55,200 due to the continued need for this training.

6. CONTRACT AMENDMENT

|  | Trans \$    | Info Accum \$ | Action Accum \$ | Agenda     |
|--|-------------|---------------|-----------------|------------|
| 1. The max amount of the original contract:                          | \$30,400.00 | \$30,400.00   | \$30,400.00     | Yes - Info |
| 2. Amount of current amendment (#1):                                 | \$24,800.00 | \$24,800.00   | \$55,200.00     | Yes - Info |
| 3. New maximum contract amount:                                      | \$55,200.00 |               |                 |            |
| and/or the termination date of the original contract has changed to: | 12/31/2025  |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

The United States Federal Government and the State of Nevada require that all new commercial driver's license (CDL) holders must complete an entry-level driver training course.

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

Staff at the Nevada Department of Wildlife are not certified to provide training in CDL certification.

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:

Yes, FY24-Current with the Nevada Department of Wildlife. 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   | abarredo | 08/27/2024 14:21:13 PM |
| Division Approval         | abarredo | 08/27/2024 14:22:09 PM |
| Department Approval       | jneubau2 | 08/27/2024 15:13:10 PM |
| Contract Manager Approval | amedin4  | 08/28/2024 06:41:23 AM |
| Budget Analyst Approval   | dspeed1  | 09/19/2024 13:48:37 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: 29270

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: BOISE STATE UNIVERSITY  
Contractor Name: BOISE STATE UNIVERSITY  
Address: BOOKSTORE  
1910 UNIVERSITY DR  
City/State/Zip: BOISE, ID 83725-1225  
Contact/Phone: ROBERT MILLER 208/4860-494  
Vendor No.: T81014931  
NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? 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 % | NDOW Habitat Conservation Fees |
| Federal Funds | 0.00 % |   | Bonds         | 0.00 %   |                                |
| Highway Funds | 0.00 % |   | Other funding | 0.00 %   |                                |

Agency Reference #: 24-89

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

b. other effective date 09/21/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 282 days

4. Type of contract: Interlocal Agreement

Contract description: Analysis Services

5. Purpose of contract:

This is a new contract to provide assistance in conducting an in-depth analysis of the Nevada Winter Raptor Survey dataset. Every January, data is collected in the form of raptor observations along established driving routes throughout the state. This dataset includes every route where data was collected over the last five years, as well as raptors observed, their behavior, activity, environmental and weather conditions, etc.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$10,186.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This analysis is required every 5 years as identified as an agency need through the Nevada Wildlife Action Plan.

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

This data set analysis requires a team of biologists with a strong background in wildlife statistics and raptor survey data analysis as well as a familiarity with the species observed within the dataset and familiarity with the general Nevada landscape. State employees are also not available to do this work because this dataset analysis is in addition to the workload that staff already have in the field to conduct surveys, sampling, and field monitoring and does not have the time to perform all duties the analysis requires.

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?

Vendor can provide the services & duties needed. Familiarity with the Survey effort as well as the dataset.

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:

Yes, NDOW, 2017-2018, work has always 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:

Jessica Brooks, Diversity Staff Specialist Ph: (775) 688-1445

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | nroble1  | 05/24/2024 11:17:54 AM |
| Division Approval         | nroble1  | 05/24/2024 11:17:57 AM |
| Department Approval       | jneubau2 | 08/07/2024 17:05:11 PM |
| Contract Manager Approval | abarredo | 08/08/2024 13:42:00 PM |
| Budget Analyst Approval   | dspeed1  | 09/20/2024 15:48:52 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: 29209

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: Matrix Sciences International, Inc.  
Contractor Name: Matrix Sciences International, Inc.  
Address: 1061 FEEHANVILLE DRIVE  
City/State/Zip: MOUNT PROSPECT, IL 60056  
Contact/Phone: Rick Jordan 530-626-7943  
Vendor No.: T32015518  
NV Business ID: NV20243027566

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 % | Habitat Conservation Fee; Upland Game Stamp Fee |
| X Federal Funds | 10.00 % |   | Bonds         | 0.00 %  |   |
| Highway Funds   | 0.00 %  |   | Other funding | 0.00 %  |   |

Agency Reference #: 24-44

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 09/30/2024

Anticipated BOE meeting date 06/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2026

Contract term: 1 year and 273 days

4. Type of contract: Contract

Contract description: Soil Analysis

5. Purpose of contract:

This is a new contract to provide laboratory analysis of herbicide residues in soil and plant samples.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Herbicides are used as a tool for habitat restoration yet limited testing has been done to analyze how long the chemicals reside in soil and plant materials outside of the agriculture industry, especially in Nevada, and how that may impact subsequent restoration. The costly nature of these analyses requires a contract with a laboratory to be able to test enough samples relevant to work in Nevada.

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

Specialized equipment and experience is required that does not exist in Nevada.

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?

To ensure comparability of future analyses with past analyses performed prior to 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?

**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:

BRITTANY ALLEN, HABITAT BIOLOGIST III Ph: 775/777-2393

null, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | nrob1    | 05/10/2024 13:32:39 PM |
| Division Approval         | nrob1    | 05/10/2024 13:32:41 PM |
| Department Approval       | jneubau2 | 09/20/2024 15:28:05 PM |
| Contract Manager Approval | amedin4  | 09/23/2024 07:03:35 AM |
| Budget Analyst Approval   | dspeed1  | 09/30/2024 15:42:33 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: 29166

Amendment Number: 1

Legal Entity Name: AZTECH MATERIALS TESTING, INC.

Agency Name: DCNR - PARKS DIVISION

Agency Code: 704

Contractor Name: AZTECH MATERIALS TESTING, INC.

Appropriation Unit: 4162-16

Address: 4700 COPPER SAGE ST

Is budget authority available?: Yes

City/State/Zip: LAS VEGAS, NV 89115-0906

If "No" please explain: Not Applicable

Contact/Phone: 702/334-6115

Vendor No.: T29021678

NV Business ID: NV19991253304

To what State Fiscal Year(s) will the contract be charged? 2024-2026

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 % HELMSLEY GRANT VALLEY OF FIRE & DEFERRED MAINT |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 06/11/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/31/2025

Contract term: 1 year and 203 days

4. Type of contract: Contract

Contract description: VOF AZTech

5. Purpose of contract:

This is the first amendment to the original contract to provide inspection and testing services for the new visitor center at Valley of Fire State Park. This amendment increases the maximum amount from \$159,552 to \$172,609 due to additional third party inspections for restroom replacement at the West Entrance at Valley of Fire State Park.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$159,552.00 | \$159,552.00  | \$159,552.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$13,057.00  | \$13,057.00   | \$13,057.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$172,609.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

As required by the State Public Works Division (SPWD), this contract proposes to hire Aztech for 3rd party inspections for the New Visitor Center project at Valley of Fire State Park.

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

Services are required to be performed by third party qualified engineering firm for materials testing and special inspections.

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?

NAC 333.150 Professional Services

(b)Professional services, including, without limitation, a contract for the services of: (2) A professional engineer.

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   | ethick1 | 08/30/2024 11:14:47 AM |
| Division Approval         | ethick1 | 08/30/2024 11:14:53 AM |
| Department Approval       | ethick1 | 08/30/2024 11:14:59 AM |
| Contract Manager Approval | ethick1 | 08/30/2024 11:15:07 AM |
| Budget Analyst Approval   | rjacob3 | 09/05/2024 14:00:27 PM |

**CONTRACT SUMMARY**

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

**I. DESCRIPTION OF CONTRACT**1. Contract Number: **29770**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: The Chapel LLC

Contractor Name: **The Chapel LLC**Address: **DBA Chapel of the Flowers  
1717 South Las Vegas Boulevard  
Las Vegas, NV 89104**City/State/Zip: **Las Vegas, NV 89104**

Contact/Phone: Casie Meyers 702-735-4331

Vendor No.:

NV Business ID: NV20141506408

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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 % | Fees                   | 0.00 %                  |
| Federal Funds | 0.00 % | Bonds                  | 0.00 %                  |
| Highway Funds | 0.00 % | <b>X Other funding</b> | <b>100.00 % REVENUE</b> |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/30/2024**

Anticipated BOE meeting date 11/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **09/30/2026**Contract term: **2 years**4. Type of contract: **Revenue Contract**Contract description: **SCUP VOF Weddings**

5. Purpose of contract:

**This is a new revenue contract to provide wedding ceremonies at designated locations within Valley of Fire State Park.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,500.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

**SPECIAL COMMERCIAL USE PERMIT**

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

**SPECIAL COMMERCIAL USE PERMIT**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:  
 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   | ethick1 | 09/10/2024 07:45:18 AM |
| Division Approval         | ethick1 | 09/10/2024 07:51:04 AM |
| Department Approval       | ethick1 | 09/10/2024 07:51:07 AM |
| Contract Manager Approval | ethick1 | 09/25/2024 07:29:25 AM |
| Budget Analyst Approval   | rjacob3 | 09/30/2024 10:59:35 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: 27666

Amendment Number: 1

Agency Name: DCNR - DIVISION OF WATER RESOURCES

Legal Entity Name: U.S. DEPARTMENT OF INTERIOR

Agency Code: 705

Contractor Name: U.S. DEPARTMENT OF INTERIOR

Appropriation Unit: 4157-10

Address: U.S. GEOLOGICAL SURVEY  
2730 N Deer Run Rd., Suite 3

Is budget authority available?: Yes

City/State/Zip: Carson City, NV 89701

If "No" please explain: Not Applicable

Contact/Phone: Megan Rogers 702-294-6043

Vendor No.: PUR0000332D

NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? 2024-2025

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 | 35.00 % | Bonds           | 0.00 %               |
| Highway Funds   | 0.00 %  | X Other funding | 65.00 % Pass-Through |

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 07/01/2023

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2025

Contract term: 2 years

4. Type of contract: Interlocal Agreement

Contract description: Carlin Trend

5. Purpose of contract:

This is the first amendment to the original joint-funding agreement which provides ongoing cooperative water data-monitoring in the Carlin Trend area. This amendment increases the maximum amount from \$354,458 to \$387,858 due to the installation and monitoring by U.S. Geological Survey of one stream gauge at Indian Creek in Crescent Valley at Nevada Gold Mine's request.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$354,458.00 | \$354,458.00  | \$354,458.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$33,400.00  | \$33,400.00   | \$33,400.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$387,858.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

The data collection and monitoring are necessary to document hydrologic conditions and the effects of activities of the major water users in the study area.

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

The U.S. Geological Survey has the scientists, equipment and expertise to provide the products and services.

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

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

Not Applicable

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

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

The U.S. Geological Survey has the necessary equipment in place and experience in delivering the desired product. 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 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   | nwoo4   | 09/17/2024 11:21:16 AM |
| Division Approval         | nwoo4   | 09/17/2024 11:21:28 AM |
| Department Approval       | hbugg   | 10/01/2024 11:49:30 AM |
| Contract Manager Approval | nwoo4   | 10/01/2024 16:08:47 PM |
| Budget Analyst Approval   | rjacob3 | 10/02/2024 10:56:46 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: **29758**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: All-American Fence Co. Inc

Contractor Name: **All-American Fence Co. Inc**Address: **All Star Fence Co.****4845 W. Reno Ave**City/State/Zip: **Las Vegas, NV 89118**

Contact/Phone: Lisa Lundstrom 702-454-4279

Vendor No.: T29045864

NV Business ID: NV20021424491

To what State Fiscal Year(s) will the contract be charged? **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 #: 3899-25-OM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/07/2024**

Anticipated BOE meeting date 10/2024

Retroactive? **No**

If "Yes", please explain

**Not Applicable**3. Termination Date: **06/30/2025**Contract term: **266 days**4. Type of contract: **Contract**Contract description: **All Star Fence**

5. Purpose of contract:

**This is a new contract to provide chain-link fence/gate installation and repair services at the Department of Employment, Training and Rehabilitation's East Saint Louis Avenue building in Las Vegas.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,540.00**

Other basis for payment: 58 foot Fence Installation w/ Gate: \$4,200; Chain-link hole repair: \$650; 120 foot Fence w/ Post and Gate Installation: \$5,600. Reserve for unexpected repair expenses: \$2,090. Invoices payable upon review and approval by the State. Contract not to exceed: \$12,540.00.

**II. JUSTIFICATION**

7. What conditions require that this work be done?

**The department must maintain a safe and secure environment for its clients, staff, and 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 skills, training, or supplies 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):

Budget Fence  
American Fence  
A1 Fence  
All Star Fence

b. Solicitation Waiver: **Not Applicable**

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

Only submitted proposal

d. Last bid date: 08/13/2024 Anticipated re-bid date: 08/01/2025

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:

This vendor provided satisfactory services to Public Works and Transportation in 2022.

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

**No** If "Yes", please provide details of the litigation 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   | eparra   | 09/23/2024 13:16:56 PM |
| Division Approval         | athomps8 | 09/24/2024 14:58:02 PM |
| Department Approval       | cjacob   | 09/24/2024 15:20:09 PM |
| Contract Manager Approval | wcune1   | 09/25/2024 11:40:35 AM |
| Budget Analyst Approval   | Iramire7 | 10/07/2024 16:22:21 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: 29686

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B002 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Aaron Tveter, Ltd.

Contractor Name: Aaron Tveter, Ltd.

Address: 3041 W. Horizon Ridge Pkwy Ste. 170

City/State/Zip: Las Vegas, NV 89052

Contact/Phone: Aaron Tveter, CPA 702-648-7900

Vendor No.:

NV Business ID: NV20071566754

To what State Fiscal Year(s) will the contract be charged? 2025-2029

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

|               |        |   |               |          |                              |
|---------------|--------|---|---------------|----------|------------------------------|
| General Funds | 0.00 % | X | Fees          | 100.00 % | Application and Registration |
| Federal Funds | 0.00 % |   | Bonds         | 0.00 %   |                              |
| Highway Funds | 0.00 % |   | Other funding | 0.00 %   |                              |

Agency Reference #: #22868

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/01/2025

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2028

Contract term: 4 years

4. Type of contract: Contract

Contract description: Financial Services

5. Purpose of contract:

This is a new contract to provide financial services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$38,400.00

Payment for services will be made at the rate of \$800.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The board has the statutory authority under NRS 623.135 to employ professional consultants. In this case, a certified public accountant to accurately review and maintain the ledger of the Board's financial records, provide consultation and assistance with the financial review to the agency, and any other financial-related matters.

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

The Board needs the expertise of a certified public accountant to provide financial services and recommendations as mandated by the state of Nevada. Current Board staff does not have the professional qualifications 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):

Las Vegas Bookkeeping  
Arlint CPA  
1800 Accountant

b. Solicitation Waiver: **Not Applicable**

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

Mr. Tveter has been the Board's certified public accountant for more than 15 years. His extensive knowledge of our agency's procedures, operations, and finances has helped the agency identify areas of improvement to align with the State of NV's financial requirements.

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   | cmonica | 08/26/2024 12:31:21 PM |
| Division Approval         | cmonica | 08/26/2024 12:31:24 PM |
| Department Approval       | cmonica | 08/26/2024 12:33:24 PM |
| Contract Manager Approval | cmonica | 08/27/2024 12:13:27 PM |
| Budget Analyst Approval   | stilley | 09/24/2024 15:41:43 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: 29280

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B003 - 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 7777422962

Vendor No.:

NV Business ID: NV20031345377

To what State Fiscal Year(s) will the contract be charged? 2025-2028

What is the source of funds that will be used to 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 %   |

Agency Reference #: B003

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 07/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? Yes

If "Yes", please explain

I am requesting retroactive approval as the contract was initially submitted in early May 2024, but needed correction, and I believe the email sent to me from GFO went to a state-issued email address associated with my CETS account that I have never accessed. Consequently, I was unaware that the contract was rejected until I received the hard copy by mail on July 31, 2024 and have made the necessary corrections to resubmit.

3. Termination Date: 06/30/2028

Contract term: 4 years

4. Type of contract: Contract

Contract description: Bookkeeping/Payroll

5. Purpose of contract:

This in a new contract to provide ongoing bookkeeping and payroll services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,400.00

Payment for services will be made at the rate of \$900.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required to maintain their own financial reporting system and payroll systems. The Board is funded entirely by licensing fees and is not part of the State financial or payroll systems.

NRS 637B.130 provides authority for the Board to hire staff and services

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):

Admin Plus Bookkeeping  
Ledgerz Bookkeeping  
Numbers Inc.

b. Solicitation Waiver: **Not Applicable**

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

This vendor has provided services to the Board for many years and the services have been excellent. Other estimates received were higher than this vendor's rate and would not justify the time and expense of starting over when the current vendor is exceptional.

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:

NV Speech-Language Pathology, Audiology and Hearing Aid Dispensing Board 2018 - 2022  
NV Occupational Therapy Board - Current  
NV Applied Behavioral Analysis Board - Current  
NV Funeral Board - Current

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

**No** If "Yes", please provide details of the litigation 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   | percej2  | 09/05/2024 07:28:30 AM |
| Division Approval         | percej2  | 09/05/2024 07:28:33 AM |
| Department Approval       | percej2  | 09/05/2024 07:28:37 AM |
| Contract Manager Approval | percej2  | 09/05/2024 07:28:42 AM |
| Budget Analyst Approval   | stillley | 09/05/2024 08:30:59 AM |



State of Nevada

**Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board**

6170 Mae Anne Avenue, Suite 1, Reno, NV 89523

(775) 787-3421 / Fax (775) 746-4105

[www.nvspeechhearing.org](http://www.nvspeechhearing.org) Email [board@nvspeechhearing.org](mailto:board@nvspeechhearing.org)

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**MEMO**

Date: August 8, 2024

To: Board of Examiners

Through: Nevada Governor's Finance Office, Budget Division

From: Jennifer R. Pierce, Executive Director *JRP*  
Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board  
[execdirector@nvspeechhearing.org](mailto:execdirector@nvspeechhearing.org)

RE: Contract for Bookkeeping & Payroll Services: Retroactive Approval Requested

The enclosed contract is for the procurement of professional bookkeeping and payroll services to support the Board's ongoing operations.

I am requesting retroactive approval as the contract was initially submitted in early May 2024, but needed correction, and I believe the email sent to me from GFO went to a state-issued email address associated with my CETS account that I have never accessed. Consequently, I was unaware that the contract was rejected until I received the hard copy by mail on July 31, 2024 and have made the necessary corrections to resubmit.

Thank you in advance for your consideration and please let me know if you have any questions.

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: 29618

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B014 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: CASEY NEILON, INC.

Contractor Name: CASEY NEILON, INC.

Address: 503 N DIVISION ST

City/State/Zip: CARSON CITY, NV 89703-4104

Contact/Phone: Nichola Neilon 775-283-5555

Vendor No.: T29010569

NV Business ID: NV20061293367

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 % |
| 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

b. other effective date 10/04/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2025

Contract term: 1 year and 88 days

4. Type of contract: Contract

Contract description: Audit Services

5. Purpose of contract:

This is a new contract to provide annual financial statement audits for the periods ending June 30, 2024 and June 30, 2025.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$36,600.00

Other basis for payment: FY 2024 \$ 17,850; FY 2025 \$ 18,750 - upon completion, invoice and approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 218G.400 requires an audit of the financial statements.

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

The audit must be conducted by an outside certified public accountant.

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?



Experience auditing State Boards and Costs.

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:

Previous auditor for the Board, 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:  
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 | 08/05/2024 13:59:49 PM |
| Division Approval         | lp310000 | 08/05/2024 13:59:53 PM |
| Department Approval       | lp310000 | 08/05/2024 13:59:57 PM |
| Contract Manager Approval | lp310000 | 08/05/2024 14:01:35 PM |
| Budget Analyst Approval   | stilley  | 10/04/2024 14:14:13 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 29644

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B015 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Charles Burcham, Professional Corporation

Contractor Name: Charles Burcham, Professional Corporation

Address: 4255 Ross Dr.

City/State/Zip: Reno, NV 89519

Contact/Phone: charlie@northernnevadaadr.com 775-570-2998

Vendor No.:

NV Business ID: NV20232972470

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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          | 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

b. other effective date 09/11/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/31/2026

Contract term: 1 year and 354 days

4. Type of contract: Contract

Contract description: Burcham 2024

5. Purpose of contract:

This is a new contract to provide hearing officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$45,000.00

Payment for services will be made at the rate of \$200.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 630.106 and NAC 630-470 authorize the Board to hire and utilize hearing officers to hold hearings regarding complaints filed pursuant to NRS 630.311. The purpose of this contract is to retain a hearing officer to the Board's list of available hearing officers.

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

Hearing officers need to be independent from the Board staff in order to ensure due process for the respondents in the hearing.

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   | 5522     | 08/13/2024 11:52:28 AM |
| Division Approval         | 5522     | 08/13/2024 11:52:31 AM |
| Department Approval       | 5522     | 08/13/2024 11:52:34 AM |
| Contract Manager Approval | 5522     | 08/13/2024 11:52:37 AM |
| Budget Analyst Approval   | stillley | 09/11/2024 10:26:53 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: 28359

Amendment Number: 1

Legal Entity Name: FM MARKETING, LLC

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Contractor Name: FM MARKETING, LLC

Agency Code: BDC

Address: 7473 W LAKE MEAD BLVD STE 100

Appropriation Unit: B015 - All Categories

City/State/Zip: LAS VEGAS, NV 89128-0265

Is budget authority available?: Yes

Contact/Phone: Susan Somers 702/249-9900

If "No" please explain: Not Applicable

Vendor No.: T29040933

NV Business ID: NV20041045342

To what State Fiscal Year(s) will the contract be charged? 2024-2026

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 11/14/2023

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 10/31/2024

Contract term: 1 year and 351 days

4. Type of contract: Contract

Contract description: FM Marketing 23/24

5. Purpose of contract:

This is the first amendment to the original contract which provides public relations and information consulting. This amendment extends the termination date from October 31, 2024 to October 31, 2025 and increases the maximum amount from \$30,000.00 to \$47,452.50 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):                                 | \$17,452.50 | \$17,452.50   | \$47,452.50     | Yes - Info |
| 3. New maximum contract amount:                                      | \$47,452.50 |               |                 |            |
| and/or the termination date of the original contract has changed to: | 10/31/2025  |               |                 |            |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is interested in improving its communication with the public and gaining assistance with its quarterly newsletter and other public outreach. Many state agencies utilize a full time public information officer, and the Board believes it is more economical to contract for these services on a project basis.

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

Board employees are not experienced and knowledgeable in this specialized area of marketing and the Boards need is not for a full time employee 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):

Arc Dome Strategies

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

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

Higher score from evaluation committee.

d. Last bid date: 09/14/2023 Anticipated re-bid date: 09/13/2024

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:

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 | 5522 | 09/11/2024 10:44:32 AM |
| Division Approval       | 5522 | 09/11/2024 10:44:39 AM |

|                           |         |                        |
|---------------------------|---------|------------------------|
| Department Approval       | 5522    | 09/11/2024 10:44:46 AM |
| Contract Manager Approval | 5522    | 09/11/2024 10:44:54 AM |
| Budget Analyst Approval   | stilley | 09/11/2024 11:11:29 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: 29672

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B015 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Gina Coulter Session

Contractor Name: Gina Coulter Session

Address: 1717 Pinoak Lane

City/State/Zip: Carson City, NV 89703

Contact/Phone: Gina Session 7757415911

Vendor No.:

NV Business ID: NV20243109554

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 09/11/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2026

Contract term: 1 year and 292 days

4. Type of contract: Contract

Contract description: Gina Session 2024

5. Purpose of contract:

This is a new contract to provide ongoing hearing officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$45,000.00

Payment for services will be made at the rate of \$200.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 630.106 and NAC 630.470 authorize the Board to hire and utilize hearing officers to hold hearings regarding complaints filed pursuant to NRS 630.311. The purpose of this contract is to retain a hearing officer to the Board's list of available hearing officers.

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

Hearing officers need to be independent from the Board staff in order to ensure due process for the respondents in the hearing.

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:  
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   | 5522    | 08/27/2024 09:39:38 AM |
| Division Approval         | 5522    | 08/27/2024 09:39:41 AM |
| Department Approval       | 5522    | 08/27/2024 09:39:44 AM |
| Contract Manager Approval | 5522    | 08/27/2024 09:39:47 AM |
| Budget Analyst Approval   | stilley | 09/11/2024 13:10:02 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: 29568

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B015 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Robison, Sharp, Sullivan & Brust, LTD.

Contractor Name: Robison, Sharp, Sullivan & Brust, LTD.

Address: 71 Washington Street

City/State/Zip: Reno, NV 89503

Contact/Phone: Michael E. Sullivan, Esq. 775-329-3151

Vendor No.:

NV Business ID: NV19811008051

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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          | 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 10/14/2024

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 08/31/2026

Contract term: 1 year and 321 days

4. Type of contract: Contract

Contract description: Sullivan 2024-2026

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: \$25,000.00

Payment for services will be made at the rate of \$400.00 per hour

Other basis for payment: Invoiced Monthly

II. JUSTIFICATION

7. What conditions require that this work be done?

In certain situations it is necessary to engage independent legal counsel to represent the Board.

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

The contractor is a subject matter expert in complex civil 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:  
Nevada Corporation
16. a. Is the Contractor Name the same as the legal Entity Name?  
Yes
17. a. Does the contractor have a current Nevada State Business License (SBL)?  
Yes
18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?  
Yes
19. Agency Field Contract Monitor:
20. Contract Status:  
Contract Approvals:
- | Approval Level            | User    | Signature Date         |
|---------------------------|---------|------------------------|
| Budget Account Approval   | 5522    | 10/02/2024 11:29:41 AM |
| Division Approval         | 5522    | 10/02/2024 11:29:44 AM |
| Department Approval       | 5522    | 10/02/2024 11:29:47 AM |
| Contract Manager Approval | 5522    | 10/02/2024 11:29:50 AM |
| Budget Analyst Approval   | stilley | 10/14/2024 15:47:55 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: 29529

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B017 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: CASEY NEILON, INC.

Contractor Name: CASEY NEILON, INC.

Address: 503 N DIVISION ST

City/State/Zip: CARSON CITY, NV 89703-4104

Contact/Phone: Suzanne Olsen 775/283-5555

Vendor No.: T29010569

NV Business ID: NV20061293367

To what State Fiscal Year(s) will the contract be charged? 2025-2027

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          | 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 07/01/2024

Anticipated BOE meeting date 10/2024

Retroactive? Yes

If "Yes", please explain

The board requests retroactive approval of this contract to July 1, 2024. It was delayed due to internal reassignment of contract duties.

3. Termination Date: 09/01/2026

Contract term: 2 years and 62 days

4. Type of contract: Contract

Contract description: Independent Auditor

5. Purpose of contract:

This is a new contract to provide ongoing independent audit services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$41,000.00

Other basis for payment: \$20,000 for 2024 Audit and \$21,000 for 2025 Audit

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada State Law and good business practices require the Nevada State Board of Nursing to obtain an independent audit of all financial records ever year. for fiscal years 23-24 and 24-25

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

Nevada State law requires and independent audit.

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):

Coulson & Associates  
Casey Neilon  
Albright & Associates

b. Solicitation Waiver: **Not Applicable**

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

Casey Neilon, Inc. has performed the last two audits and no other vendor submitted proposals.

d. Last bid date: 05/01/2024 Anticipated re-bid date: 05/01/2026

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:

various boards; 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:

null, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level            | User     | Signature Date         |
|---------------------------|----------|------------------------|
| Budget Account Approval   | kneuhaus | 07/23/2024 15:37:53 PM |
| Division Approval         | kneuhaus | 07/23/2024 15:38:00 PM |
| Department Approval       | kneuhaus | 07/23/2024 15:38:26 PM |
| Contract Manager Approval | kneuhaus | 08/01/2024 15:38:20 PM |
| Budget Analyst Approval   | stilley  | 09/24/2024 15:23:42 PM |

# Nevada State Board of NURSING

September 12, 2024

Shauna Tilley  
NV Governor's Finance Office  
Budget Division  
209 East Musser Street, Room 200  
Carson City, Nevada 89701-4298  
[sstilley@finance.nv.gov](mailto:sstilley@finance.nv.gov)

Dear Ms. Tilley,

The Nevada State Board of Nursing respectfully requests that the contract with Casey Neilon, Inc. for audit services reflects a retro start date of July 1, 2024. This is due to an internal reassignment of contract duties at our agency. We appreciate the consideration of our request and apologize for the inconvenience.

Sincerely,

Nevada State Board of Nursing



Cathy Dinauer, MSN, RN  
Executive Director

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: 29682

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B019 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: BDG Web Design, LLC

Contractor Name: BDG Web Design, LLC

Address: 243 Stewart Street

City/State/Zip: Reno, NV 89501

Contact/Phone: Brandon Gottier 775-843-7256

Vendor No.:

NV Business ID: NV20101067113

To what State Fiscal Year(s) will the contract be charged? 2025-2026

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 & Application |
| 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 09/24/2024

Anticipated BOE meeting date 10/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2026

Contract term: 1 year and 279 days

4. Type of contract: Contract

Contract description: Database Support

5. Purpose of contract:

This is a new contract to provide design and maintenance services for the online user database.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$43,200.00

Other basis for payment: Payment upoin invoice, consistent with hourly rates in tenth of hour increments

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Board of Dispensing Opticians has authority under NRS 637.050(3) to contract with professional consultants and service providers as the Board deems necessary to carry out the provisions of NRS Chapter 637. The Board is responsible for providing an online license application platform and maintaining a user database, both of which require ongoing IT support.

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

Board employees are not qualified to provide the level of IT support required by the Board.

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):

NV IT Solutions  
Reno Techs  
BDG Web Design

b. Solicitation Waiver: **Not Applicable**

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

Overall knowledge of the platform used for hosting the current database and positive recommendations.

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:

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   | vwind1  | 08/22/2024 15:17:18 PM |
| Division Approval         | vwind1  | 08/22/2024 15:17:21 PM |
| Department Approval       | vwind1  | 08/22/2024 15:17:24 PM |
| Contract Manager Approval | vwind1  | 08/22/2024 15:17:27 PM |
| EITS Approval             | ljea    | 08/29/2024 11:51:19 AM |
| Budget Analyst Approval   | stilley | 09/24/2024 15:32:38 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: 29839

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Agency Code: BDC

Appropriation Unit: B021 - All Categories

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: The Griffin Company LLC

Contractor Name: The Griffin Company LLC

Address: 401 S. Curry Street

City/State/Zip: Carson City, NV 89703

Contact/Phone: Chelsea Capurro 775-882-4002

Vendor No.:

NV Business ID: NV20151044504

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

Federal Funds 0.00 %

Highway Funds 0.00 %

Fees 0.00 %

Bonds 0.00 %

Other funding 0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 01/01/2025

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2025

Contract term: 179 days

4. Type of contract: Contract

Contract description: Lobbyist contract

5. Purpose of contract:

This a new contract to provide professional lobbying 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 \$2,000.00 per month

**II. JUSTIFICATION**

7. What conditions require that this work be done?

Our Board needs lobbyist representation to assist in passing changes to our practice act (Nevada Revised Statutes 634A) and to track and advise on Bill Draft Requests that affect our Board.

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

Our Board members and staff do not have any expertise in lobbying.

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):

Flynn Giudiciga  
Reisman Sorokac Law  
Eddie Ableser

b. Solicitation Waiver: Not Applicable



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

The Griffin Company represented our Board in the past and is familiar with the Board's issues.

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 Griffin Company represented the Board previously and is familiar with the Board's issues.

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

No If "Yes", please provide details of the litigation 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   | mlok    | 10/01/2024 14:15:29 PM |
| Division Approval         | mlok    | 10/01/2024 14:15:37 PM |
| Department Approval       | mlok    | 10/01/2024 14:15:45 PM |
| Contract Manager Approval | mlok    | 10/01/2024 14:15:51 PM |
| Budget Analyst Approval   | stilley | 10/15/2024 12:49:19 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: 23763

Amendment Number: 1

Legal Entity Name: Appriss LLC

Agency Name: BDC LICENSING BOARDS & COMMISSIONS

Contractor Name: Appriss LLC

Agency Code: BDC

Address: 9901 Linn Station Road Suite 500

Appropriation Unit: B022 - All Categories

City/State/Zip: Louisville, KY 40223

Is budget authority available?: Yes

Contact/Phone: Sara White 5028153861

If "No" please explain: Not Applicable

Vendor No.: T29045626

NV Business ID: NV20232950002

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          | 87.00 % | Licensure |
| X Federal Funds | 13.00 % |   | 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 12/03/2020

Anticipated BOE meeting date 11/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 12/02/2024

Contract term: 4 years

4. Type of contract: Contract

Contract description: PDMP License

5. Purpose of contract:

This is the first amendment to the original contract which provides licensing for the Prescription Drug Monitoring Program required by NRS 453.362. This amendment assigns the contract due to a change in business structure from Appriss Inc. to Appriss LLC and increases the maximum amount from \$364,000 to \$412,000 due to the addition of a module to identify providers that are writing prescriptions for controlled substances in Nevada without the appropriate license.

6. CONTRACT AMENDMENT

|   | Trans \$     | Info Accum \$ | Action Accum \$ | Agenda       |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$364,000.00 | \$364,000.00  | \$364,000.00    | Yes - Action |
| 2. Amount of current amendment (#1):        | \$48,000.00  | \$48,000.00   | \$48,000.00     | Yes - Info   |
| 3. New maximum contract amount:             | \$412,000.00 |               |                 |              |

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 453.162 requires: "The Board and the Division shall cooperatively develop a computerized program to track each prescription for a controlled substance listed in schedule II, III, IV or V that is filled by a pharmacy that is registered with the Board or that is dispensed by a practitioner who is registered with the Board."

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

The Prescription Drug Monitoring Program (PDMP) is a complex software system that must interface with several external platforms including but not limited to; healthcare provider electronic records, treatment facility availability, and a federal data exchange. Due to the complexity of data exchange and rapidly evolving state and federal requirements an enterprise system is not practical.

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 #: 201209**

**Approval Date: 12/22/2020**

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

This is the only vendor with a commercially available off the shelf product that will fulfill all state and federal requirements, as well as the only platform that will integrate will all platforms desired by the state related to the PDMP.

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?

**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 provides the statewide VINE platform to the Board of Pharmacy and provides exceptional services and products.

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

**No** If "Yes", please provide details of the litigation 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

kbains40

09/11/2024 08:28:28 AM

|                           |          |                        |
|---------------------------|----------|------------------------|
| Division Approval         | kbains40 | 09/13/2024 10:16:33 AM |
| Department Approval       | kbains40 | 09/13/2024 10:16:45 AM |
| Contract Manager Approval | kbains40 | 09/25/2024 09:40:35 AM |
| EITS Approval             | ljean    | 09/25/2024 09:42:28 AM |
| Budget Analyst Approval   | stilley  | 09/25/2024 15:13:29 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](http://www.it.nv.gov) | Fax: (775) 687-9097

**MEMORANDUM**

**TO:** David Wuest, Pharmacy Board  
Kiran Bains, Pharmacy Board  
Kristopher Mangosing, Pharmacy Board

**CC:** Tim Galluzi, State Chief Information Officer/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 – Pharmacy – TIN 670 – *PMP AWARe*

**DATE:** February 16, 2023

We have completed our review for the Nevada Board of Pharmacy's – *PMP AWARe* – TIN 670.

The submitted TIN, for an estimated value of \$45,000 in the FY22/FY23 biennium, \$30,000 in the FY24/FY25 biennium, and \$15,000 in FY26 (Harold Rogers PDMP Grant funding), is to implement a cloud-based, proprietary Mandatory Use Compliance Module by Appriss.

The solution will allow Prescription Drug Monitoring Program (PDMP) administrators to monitor a prescriber's compliance with state requirements and to query patient prescription histories prior to writing certain prescriptions.

*PMP AWARe* provides many unique and proprietary features and functions not found with any other PDMP software solution. The Mandatory Use Compliance Module is only available with *PMP AWARe* and is a fully configurable report in Tableau. Additionally, the training module for Nevada Board of Pharmacy will be included in the Nevada PDMP *AWARe* registration process.

The agency considers the investment and final implementation to have an ongoing low security risk; however, personal identification information will be transported, stored, and/or processed using this solution and it is subject to federal 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 follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

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**  
*Purchasing Division*

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

|                             |         |
|-----------------------------|---------|
| <b>Purchasing Use Only:</b> |         |
| Approval#:                  | 2012090 |

**SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM**

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

|    |   |                                |                            |
|----|---|--------------------------------|----------------------------|
| 1a | <b>Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:</b> |                                |                            |
|    | State Agency Name:  | Nevada State Board of Pharmacy |                            |
|    | Contact Name and Title  | Phone Number                   | Email Address              |
|    | Christian Schonlau, Chief Financial Officer   | 775-850-1440                   | C.Schonlau@pharmacy.nv.gov |

|                |                            |  |
|----------------|----------------------------|--|
| 1b             | <b>Vendor Information:</b> |  |
|                | Identify Vendor:           | Appriss Health                             |
|                | Contact Name:              | Blake McGowan                              |
|                | Complete Address:          | 9901 Linn Station Rd. Louisville, KY 40223 |
|                | Telephone Number:          | 1-502-815-0891                             |
| Email Address: | smcgowan@apprisshealth.com |  |

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

|       |                              |     |   |    |
|-------|------------------------------|-----|---|----|
| 1d    | <b>Contract Information:</b> |     |   |    |
|       | Is this a new Contract?      | Yes | X | No |
|       | Amendment:                   | #   |   |    |
| CETS: | #23763                       |     |   |    |

|    |                        |             |                             |           |           |
|----|------------------------|-------------|-----------------------------|-----------|-----------|
| 1e | <b>Term:</b>           |             |                             |           |           |
|    | One (1) Time Purchase: |             |                             |           |           |
|    | Contract:              | Start Date: | Retroactive to<br>12/3/2020 | End Date: | 12/2/2024 |

|              |                     |  |
|--------------|---------------------|--|
| 1f           | <b>Funding:</b>     |  |
|              | State Appropriated: |  |
|              | Federal Funds:      |  |
| Grant Funds: |                     |  |

|                  |                       |
|------------------|-----------------------|
| Other (Explain): | <i>Licensing Fees</i> |
|------------------|-----------------------|

Purchasing Use Only:

Approval #:

201209 @

|    |   |
|----|---|
| 1g | Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: |
|    | \$364,000   |

|   |  |
|---|--|
| 2 | Provide a description of work/services to be performed or commodity/good to be purchased:<br><i>Appriss will provide continued licensing to their commercially available off the shelf software for a prescription drug monitoring program, PMP AWARe.</i> |
|---|--|

|   |   |
|---|---|
| 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>PMP AWARe provides many unique and proprietary features and functions not found with any other PDMP software solution. Below are some of the features available to the Nevada PDMP that can only be found within PMP AWARe:</i></p> <ol style="list-style-type: none"> <li><i>1. Out-of-the-box connectivity to PMP InterConnect (PMPi) – PMP AWARe maintains existing PMPi connectivity as a COTS feature.</i></li> <li><i>2. Real-time PMPi system updates to new state access – PMP AWARe provides automated state data sharing control changes whenever a new state is added to PMPi. No other PDMP solution has this functionality.</i></li> <li><i>3. PMP AWARe is the only Prescription Monitoring Program solution that has the ability to incorporate authorized user activity such as queries from Electronic Health Record and Pharmacy Management System integrations into the PDMP portal.</i></li> <li><i>4. PMP AWARe's data collection is the only solution that supports large, multi-state dispensing organizations by providing the organizations with a single account to comply with data submission requirements to all the states that utilize the PMP AWARe software. The resulting benefit for the Nevada Board of Pharmacy is that many of the dispensers operating in Nevada have existing accounts with PMP AWARe therefore can dispense in Nevada through a "one stop shop" approach.</i></li> <li><i>5. Ability to begin processing pharmacy claim records once received during data collection – Unlike other solutions, PMP AWARe begins processing incoming pharmacy claims data in near real-time vs. the typical batching process.</i></li> <li><i>6. PMP AWARe is the only solution that supports the validation of queries from Electronic Health Records and Pharmacy Management Systems to ensure that that all Nevada users have an active account with the PMP.</i></li> <li><i>7. Pre-packaged business intelligence tools – PMP AWARe maintains two pre-packaged BI tools as a COTS feature.</i></li> </ol> |
|---|---|



|  |  |
|--|--|
|  | 8. <i>Administrative and requestor dashboards – PMP AWAxE provides administrative and requestor dashboards for easy access to system statistical data.</i> |
|  | 9. <i>Pharmacy compliance module – Allows PDMP administrators to track pharmacy submissions and pharmacies that are out of data submission compliance.</i> |

|   |   |
|---|---|
|   | Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:   |
| 4 | <i>There are no other vendors offering an off the shelf solution for PDMP that encompasses all the integration and reporting requirements of NRS, federal funding sources, and Board.</i> |

|   |  |      |  |     |   |
|---|--|------|--|-----|---|
|   | 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>                 |      |  |     |   |
| 5 |  |      |  |     |   |
|   | b. <i>If not, why were alternatives not evaluated?</i>   |      |  |     |   |
|   | <i>No other providers were able to integrate with all components required by NRS, Federal Funders, and board. See section 3 for specific capabilities only offered by Appriss.</i> |      |  |     |   |

|   |  |           |          |                   |   |   |     |  |
|---|--|-----------|----------|-------------------|---|---|-----|--|
| 6 | Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request. |           |          |                   | Yes:  | X | No: |  |
|   | a. If yes, starting with the most recent contract and working backward, for the <b>entire</b> relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:              |           |          |                   |   |   |     |  |
|   | Term<br>Start and End Dates  |           | Value    | Short Description | Type of Procurement<br>(RFP#, RFQ#, Waiver #) |   |     |  |
|   | 12/3/16  | 12/2/17   | \$91,000 | PMP AWAxE License |   |   |     |  |
|   | 12/3/17  | 12/2/18   | \$91,000 | PMP AWAxE License |   |   |     |  |
|   | 12/3/18  | 12/2/19   | \$91,000 | PMP AWAxE License |   |   |     |  |
|   | 12/3/19  | 12/2/2020 | \$91,000 | PMP AWAxE License |   |   |     |  |

|   |   |
|---|---|
|   | What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?  |
| 7 | <i>The agency has expended significant resources and time which would not be recoverable to implement the system currently in place. No other vendor offers a software program that meets the statutory, federal, and functional requirements for Nevada.</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? |
|---|---|

Purchasing Use Only:

Approval #:

201209 @

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

12-1-20

Christian Schonlau

Print Name of Agency Representative Initiating Request

12/1/2020

Date

  
Signature of Agency Head Authorizing Request

12/1/20

J. David Wuest

Print Name of Agency Head Authorizing Request

12/1/2020

Date

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

Name of agency or entity who provided information or review:

Representative Providing Review

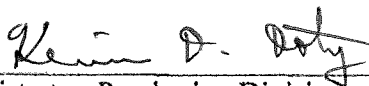
Print Name of Representative Providing Review

Date

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

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

Approved by:

  
Administrator, Purchasing Division or Designee

12/22/2020  
Date

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 14, 2024  
To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office  
From: Shayne Powell, Budget Division  
Governor's Finance Office  
Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

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

**GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION**

Agenda Item Write-up:

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of October 14, 2024, for State Fiscal Year 2025. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

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, and the IFC Contingency Fund supplement funding for eligible agencies within statutory authority. The Extradition Coordinator budget account is the responsibility of the Office of the Attorney General.

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

|   |                   |
|---|-------------------|
| Tort Claim Fund                             | \$ 4,479,122.98   |
| Statutory Contingency Account               | \$ 2,533,938.71   |
| Stale Claims Account                        | \$ 2,826,082.96   |
| Emergency Account                           | \$ 500,000.00     |
| Disaster Relief Account                     | \$ 13,043,674.00  |
| IFC Contingency Unrestricted General Fund   | \$ 15,307,566.78  |
| IFC Contingency Unrestricted Highway Fund   | \$ 1,638,068.35   |
| IFC Contingency Restricted General Fund     | \$ 119,302,525.00 |
| IFC Contingency Restricted Highway Fund     | \$ 19,142,217.00  |
| Extradition Coordinator Budget Account 1002 | \$ 167,140.91     |

Please see attached reconciliations with projected outstanding claims and balances.

Statutory Authority:

NRS 331.187, 353.097, 353.263, 353.264, 353.266,  
353.268, 353.2735, 179.225 and AB469, SB453, SB504  
of the 2023 Legislative Session.

REVIEWED: RA

INFORMATION ITEM: \_\_\_\_\_

|   |                        |   |                        |
|---|------------------------|---|------------------------|
| Fiscal Year: 2025<br>Fund: 715<br>Agency: 030<br>Budget Account: 1348<br>Statutory Authority NRS: 331.187 |                        | <b>Tort Claim Fund</b><br><b>Balance Sheet</b><br><b>October 14, 2024</b> |                        |
| <b>Receipts/Funding</b>   |                        |   | <b>Balance</b>         |
| Beginning Cash  | \$ 2,639.00            |   |                        |
| Revenue from Boards   | \$ 148,572.74          |   |                        |
| Cost Allocation   | \$ 5,943,260.48        |   |                        |
| <b>Total Receipts/Funding</b>   | <b>\$ 6,094,472.22</b> | <b>\$</b>   | <b>6,094,472.22</b>    |
| <b>Tort Operating Expenditures - Non Claims</b>   | <b>\$ 82,028.71</b>    |   |                        |
| <b>Total Operating Expenditures</b>   | <b>\$ 82,028.71</b>    | <b>\$</b>   | <b>6,012,443.51</b>    |
| <b>Tort Claims</b>  |                        |   |                        |
| Tort Claims - AG Approved   | \$ 450,850.53          |   |                        |
| Tort Claims - Board of Examiners Approved   | \$ 1,082,470.00        |   |                        |
| <b>Total Tort Claims</b>  | <b>\$ 1,533,320.53</b> | <b>\$</b>   | <b>4,479,122.98</b>    |
| <b>Realized Funding Available as of 10/14/2024</b>  |                        |   | <b>\$ 4,479,122.98</b> |
| <b>November BOE Pending Claims</b>  |                        |   |                        |
| Tort: Claimant Tallman  | \$ 200,000.00          |   |                        |
| Tort: Claimant Smith  | \$ 200,000.00          |   |                        |
| <b>Total Pending Claims</b>   | <b>\$ 400,000.00</b>   | <b>\$</b>   | <b>4,079,122.98</b>    |
| <b>Reserves</b>   |                        |   |                        |
| Unobligated Reserves  | \$ 782,463.00          |   |                        |
| <b>Balance Including Reserves</b>   |                        | <b>\$</b>   | <b>4,861,585.98</b>    |

|   |                        |  |                       |
|---|------------------------|--|-----------------------|
| Fiscal Year:  | 2025                   | <b>Statutory Contingency Fund</b><br><br><b>Balance Sheet</b><br><br><b>October 14, 2024</b> |                       |
| Fund:   | 101                    |  |                       |
| Agency:   | 930                    |  |                       |
| Budget Account:   | 4892                   |  |                       |
| Statutory Authority NRS:  | 353.264                |  |                       |
| <b>Receipts/Funding</b>   |                        | <b>Balance</b>   |                       |
| Beginning Cash  | \$ 2,563,339.00        |  |                       |
| <b>Total Receipts/Funding</b>   | <b>\$ 2,563,339.00</b> | <b>\$</b>  | <b>2,563,339.00</b>   |
| <b>Claims</b>   |                        |  |                       |
| Claims - Clerk Approved   | \$ 29,400.29           |  |                       |
| Claims - Board of Examiners Approved  | \$ -                   |  |                       |
| <b>Total Claims</b>   | <b>\$ 29,400.29</b>    | <b>\$</b>  | <b>2,533,938.71</b>   |
| <b>Realized Funding Available</b>   |                        | <b>\$</b>  | <b>2,533,938.71</b>   |
| <b>December/January Projected Claims</b>  |                        |  |                       |
| Wrongful Conviction: Lobato   | \$ 900,000.00          |  |                       |
| <b>Total Pending Claims</b>   | <b>\$ 900,000.00</b>   | <b>\$</b>  | <b>1,633,938.71</b>   |
| <b>Projected Extradition Expenditures</b>   |                        |  |                       |
| Extraditions (based on FY 2024 actuals)   | \$ 3,314,748.00        |  |                       |
| <b>Total Projected Expenditures</b>   | <b>\$ 3,314,748.00</b> | <b>\$</b>  | <b>(1,680,809.29)</b> |
| <b>Balance Including Projected Claims</b>   |                        | <b>\$</b>  | <b>(1,680,809.29)</b> |
| <b>Notes</b>  |                        |  |                       |
| FY 2025 Post-Conviction Relief State Claims will be paid from Department of Indigent Defense - Public Defender, Budget Account 1499 |                        |  |                       |

|  |         |  |                        |
|--|---------|--|------------------------|
| Fiscal Year:                                   | 2025    | <b>Stale Claims</b><br><br><b>Balance Sheet</b><br><br><b>October 14, 2024</b> |                        |
| Fund:  | 101     |  |                        |
| Agency:  | 930     |  |                        |
| Budget Account:                                | 4888    |  |                        |
| Statutory Authority NRS:                       | 353.097 |  |                        |
| <b>Receipts/Funding</b>                        |         | <b>Balance</b>   |                        |
| Beginning Cash                                 |         | \$ 3,347,421.00  |                        |
| <b>Total Receipts/Funding</b>                  |         | <b>\$ 3,347,421.00</b>   | <b>\$ 3,347,421.00</b> |
| <b>Stale Claims</b>                            |         |  |                        |
| Nuclear Projects (Return of duplicate payment) |         | \$ (4,028.81)  |                        |
| Public Defender                                |         | \$ 6,432.37  |                        |
| Corrections                                    |         | \$ 518,934.48  |                        |
| Total Tort Claims                              |         | <b>\$ 521,338.04</b>   | <b>\$ 2,826,082.96</b> |
| <b>Realized Funding Available</b>              |         |  | <b>\$ 2,826,082.96</b> |

|                                      |                      |  |                   |
|--------------------------------------|----------------------|--|-------------------|
| Fiscal Year:                         | 2025                 | <b>Emergency Fund</b><br><b>Balance Sheet</b><br><b>October 14, 2024</b> |                   |
| Fund:                                | 101                  |  |                   |
| Agency:                              | 930                  |  |                   |
| Budget Account:                      | 4889                 |  |                   |
| Statutory Authority NRS:             | 353.263              |  |                   |
| <b>Receipts/Funding</b>              |                      | <b>Balance</b>   |                   |
| Beginning Cash                       | \$ 500,000.00        |  |                   |
| <b>Total Receipts/Funding</b>        | <b>\$ 500,000.00</b> | <b>\$</b>  | <b>500,000.00</b> |
| <b>Emergency Fund Expenses</b>       |                      |  |                   |
|                                      | \$ -                 |  |                   |
| <b>Total Emergency Fund Expenses</b> | <b>\$ -</b>          | <b>\$</b>  | <b>500,000.00</b> |
| <b>Realized Funding Available</b>    |                      | <b>\$</b>  | <b>500,000.00</b> |



|                                      |          |  |                         |
|--------------------------------------|----------|--|-------------------------|
| Fiscal Year:                         | 2025     | <b>Disaster Relief Fund</b><br><br><b>Balance Sheet</b><br><br><b>October 14, 2024</b> |                         |
| Fund:                                | 101      |  |                         |
| Agency:                              | 170      |  |                         |
| Budget Account:                      | 1335     |  |                         |
| Statutory Authority NRS:             | 353.2735 |  |                         |
| <b>Receipts/Funding</b>              |          |  | <b>Balance</b>          |
| Beginning Cash                       |          | \$ 12,543,674.00   |                         |
| Transfer From General Fund           |          | \$ 500,000.00  |                         |
| <b>Total Receipts/Funding</b>        |          | <b>\$ 13,043,674.00</b>  | <b>\$ 13,043,674.00</b> |
| <b>Emergency Fund Expenses</b>       |          |  |                         |
|                                      |          | \$ -   |                         |
| <b>Total Emergency Fund Expenses</b> |          | <b>\$ -</b>  | <b>\$ 13,043,674.00</b> |
| <b>Realized Funding Available</b>    |          |  | <b>\$ 13,043,674.00</b> |

|   |         |   |                         |
|---|---------|---|-------------------------|
| Fiscal Year:  | 2025    | <b>IFC Contingency Fund (Unrestricted)</b><br><br><b>Balance Sheet</b><br><br><b>October 14, 2024</b> |                         |
| Fund:   | 101     |   |                         |
| Agency:   | 170     |   |                         |
| Budget Account:                                     | 2630    |   |                         |
| Statutory Authority NRS:                            | 353.266 |   |                         |
| <b>General Fund Receipts</b>                        |         |   | <b>Balance</b>          |
| Beginning Cash                                      |         | \$ 13,174,826.04  |                         |
| Reversions  |         | \$ 3,183,936.17   |                         |
| <b>Total General Fund Receipts</b>                  |         | <b>\$ 16,358,762.21</b>   | <b>\$ 16,358,762.21</b> |
| <b>Highway Fund Receipts</b>                        |         |   |                         |
| Beginning Cash                                      |         | \$ 1,184,685.35   |                         |
| Reversions  |         | \$ 453,383.00   |                         |
| <b>Total Highway Fund Receipts</b>                  |         | <b>\$ 1,638,068.35</b>  | <b>\$ 1,638,068.35</b>  |
| <b>Realized Funding Available</b>                   |         |   | <b>\$ 17,996,830.56</b> |
| <b>Unrestricted General Fund Expenditures</b>       |         |   |                         |
| Meeting Costs                                       |         | \$ 21,885.43  |                         |
| Business & Industry (6/13/24)                       |         | \$ 218,889.00   |                         |
| Division of Emergency Management (10/02/24)         |         | \$ 306,483.00   |                         |
| Veterans Services (10/02/2024)                      |         | \$ 503,938.00   |                         |
| <b>Total Unrestricted General Fund Expenditures</b> |         | <b>\$ 1,051,195.43</b>  | <b>\$ 15,307,566.78</b> |
| <b>Unrestricted Highway Fund Expenditures</b>       |         |   |                         |
|   |         | \$ -  |                         |
| <b>Total Unrestricted Fund Expenditures</b>         |         | <b>\$ -</b>   | <b>\$ 1,638,068.35</b>  |

|                                      |         |   |                   |                  |                   |
|--------------------------------------|---------|---|-------------------|------------------|-------------------|
| Fiscal Year:                         | 2025    | <div>IFC Contingency Fund (Restricted)</div> <div>Balance Sheet</div> <div>October 14, 2024</div> |                   |                  |                   |
| Fund:                                | 101     |   |                   |                  |                   |
| Agency:                              | 170     |   |                   |                  |                   |
| Budget Account:                      | 2630    |   |                   |                  |                   |
| Statutory Authority NRS:             | 353.268 |   |                   |                  |                   |
| Restricted General Fund Expenditures |         |   |                   |                  |                   |
| Bill                                 | Sec     | Short Desc  | Allotted          | Expended         | Balance           |
| AB 468                               | 4.3     | Core.NV   | \$ 81,606,294.00  | \$ -             | \$ 81,606,294.00  |
| AB 480                               | 1       | Language Access Plan  | \$ 25,000,000.00  | \$ 1,847,173.00  | \$ 23,152,827.00  |
| SB 231                               | 1       | School District Salaries  | \$ 354,583.00     | \$ 237,369.00    | \$ 117,214.00     |
| SB 342                               | 2       | WICHE Veterinary Coop   | \$ 8,000,000.00   | \$ 8,000,000.00  | \$ -              |
| SB 490                               | 1.5     | GCB IT Equipment  | \$ 5,500,000.00   | \$ 5,500,000.00  | \$ -              |
| AB 518                               | 7       | Indigent Defense  | \$ 2,714,295.00   | \$ 778,103.00    | \$ 1,936,192.00   |
| AB 518                               | 7.3     | Indigent Defense  | \$ 6,613,033.00   |                  | \$ 6,613,033.00   |
| SB 342                               | 3       | WICHE Veterinary Coop   | \$ 76,132.00      | \$ 76,132.00     | \$ -              |
| SB 503                               | 14      | K-12 Funding  | \$ 3,208,023.00   |                  | \$ 3,208,023.00   |
| SB 511                               | 74      | State Financial Admin   | \$ 2,352,270.00   | \$ 2,283,978.00  | \$ 68,292.00      |
| SB 511                               | 75      | State Financial Admin   | \$ 2,418,818.00   | \$ 2,128,964.00  | \$ 289,854.00     |
| SB 511                               | 76      | State Financial Admin   | \$ 1,468,609.00   | \$ 1,468,609.00  | \$ -              |
| SB 511                               | 77      | State Financial Admin   | \$ 586,956.00     |                  | \$ 586,956.00     |
| SB 511                               | 78      | State Financial Admin   | \$ 1,723,840.00   |                  | \$ 1,723,840.00   |
| Total Restricted General Fund        |         |   | \$ 141,622,853.00 | \$ 22,320,328.00 | \$ 119,302,525.00 |
| Restricted Highway Fund Expenditures |         |   |                   |                  |                   |
| AB 468                               | 4.7     | Core.NV   | \$ 19,142,217.00  | \$ -             | \$ 19,142,217.00  |
| Total Restricted Highway Fund        |         |   | \$ 19,142,217.00  | \$ -             | \$ 19,142,217.00  |
| Total Restricted Fund                |         |   | \$ 160,765,070.00 | \$ 22,320,328.00 | \$ 138,444,742.00 |

|  |                      |   |                   |
|--|----------------------|---|-------------------|
| Fiscal Year:   | 2025                 | <b>Extradition Coordinator</b><br><br><b>Balance Sheet</b><br><br><b>October 14, 2024</b> |                   |
| Fund:  | 101                  |   |                   |
| Agency:  | 030                  |   |                   |
| Budget Account:  | 1002                 |   |                   |
| Statutory Authority NRS:   | 179.225              |   |                   |
| <b>Receipts/Funding</b>  |                      |   | <b>Balance</b>    |
| Appropriations   | \$ 215,370.00        |   |                   |
| Recoveries   | \$ 9,086.31          |   |                   |
| <b>Total Receipts/Funding</b>  | <b>\$ 224,456.31</b> | <b>\$</b>   | <b>224,456.31</b> |
| <b>Extradition Coordinator Operating Expenses - Non claims</b>           | <b>\$ 57,315.40</b>  |   |                   |
| <b>Total Extradition Coordinator Expenses</b>                            | <b>\$ 57,315.40</b>  | <b>\$</b>   | <b>167,140.91</b> |
| <b>Realized Funding Available</b>  |                      | <b>\$</b>   | <b>167,140.91</b> |
| <b>Notes</b>   |                      |   |                   |
| FY25 Extradition Claims will be paid from the Statutory Contingency Fund |                      |   |                   |

Joe Lombardo  
Governor



Amy Stephenson  
Director

David Johnson  
Deputy Director

Curtis Palmer  
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](http://www.budget.nv.gov) | Fax: (775) 684-0260

Date: October 17, 2024

To: Amy Stephenson, Clerk of the Board  
Governor's Finance Office

From: Vince Young-Brown, Executive Branch Budget Officer  
Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM *VJB*

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

**DEPARTMENT OF MOTOR VEHICLES – COMPLETE STREETS PROGRAM**

Agenda Item Write-up:

Pursuant to NRS 482.1825, subsection 2, the department shall certify to the 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 submittal reports program activities by month for the first quarter of fiscal year 2025 for the period beginning July 1, 2024 and ending September 30, 2024.

Additional Information:

Complete Streets is a federal initiative designed to encourage varying approaches to planning, designing, and operating roadways and rights of way to make the transportation network safer and more efficient. Complete Street policies are set at the state, regional, and local levels and vary based on community context. The authority for Nevada counties to adopt a Complete Streets Program was approved via Assembly Bill 145 of the 2013 Legislative Session.

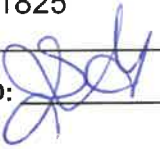
Nevada's Complete Streets program is supported through a voluntary \$2 contribution included with vehicle registrations. Voluntary contributions collected under the program, minus 1% to DMV to cover the cost of collecting and distributing the contributions, is

distributed monthly to each county based on the county of registration of the vehicle for which the contribution was made.

This submittal includes reports by month for the first quarter of fiscal year 2025 for the period beginning July 1, 2024 and ending September 30, 2024 from the counties of the funds distributed by the department and how these funds are being used.

Statutory Authority:

NRS 482.1825

|            |   |
|------------|---|
| REVIEWED:  |  |
| INFO ITEM: | _____   |

**Joe Lombardo**  
Governor



**Tonya Laney**  
Director

**Angela Smith-Lamb**  
Deputy Director

555 Wright Way  
Carson City, Nevada 89711  
Telephone (775) 684-4368  
dmv.nv.gov

October 17, 2024

Board of Examiners

Re: Complete Streets

Attached, as required by subsection 2 of NRS 482.1825, please find the monthly report for the voluntary Complete Streets contributions collected pursuant to subsection 11 of NRS 482.480 for each participating county by the Department for the period beginning July 1<sup>st</sup>, 2024, and ending September 30<sup>th</sup>, 2024.

Sincerely,

Bethany Musselman

Administrator  
Department of Motor Vehicles  
BMusselman@dmv.nv.gov  
775-684-4627

Department of Motor Vehicles  
Complete Streets Report: Donations  
FY25

| County               | July   | August | September | October | November | December | January | February | March   | April   | May     | June    | Year To Date |
|----------------------|--------|--------|-----------|---------|----------|----------|---------|----------|---------|---------|---------|---------|--------------|
| <b>Carson City</b>   |        |        |           |         |          |          |         |          |         |         |         |         |              |
| Donations            | 620    | 629    | 604       |         |          |          |         |          |         |         |         |         |              |
| Registrations        | 4,629  | 4,589  | 4,282     |         |          |          |         |          |         |         |         |         |              |
| Percent that Donated | 13.39% | 13.71% | 14.11%    | #DIV/0! | #DIV/0!  | #DIV/0!  | #DIV/0! | #DIV/0!  | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0!      |
| <b>Clark</b>         |        |        |           |         |          |          |         |          |         |         |         |         |              |
| Donations            | 12,573 | 12,796 | 12,630    |         |          |          |         |          |         |         |         |         |              |
| Registrations        | 81,077 | 81,706 | 79,026    |         |          |          |         |          |         |         |         |         |              |
| Percent that Donated | 15.51% | 15.66% | 15.98%    | #DIV/0! | #DIV/0!  | #DIV/0!  | #DIV/0! | #DIV/0!  | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0!      |
| <b>Douglas</b>       |        |        |           |         |          |          |         |          |         |         |         |         |              |
| Donations            | 608    | 598    | 614       |         |          |          |         |          |         |         |         |         |              |
| Registrations        | 5,228  | 5,167  | 5,018     |         |          |          |         |          |         |         |         |         |              |
| Percent that Donated | 11.63% | 11.57% | 12.24%    | #DIV/0! | #DIV/0!  | #DIV/0!  | #DIV/0! | #DIV/0!  | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0!      |
| <b>Washoe</b>        |        |        |           |         |          |          |         |          |         |         |         |         |              |
| Donations            | 2,783  | 2,671  | 2,762     |         |          |          |         |          |         |         |         |         |              |
| Registrations        | 24,081 | 23,535 | 22,249    |         |          |          |         |          |         |         |         |         |              |
| Percent that Donated | 11.56% | 11.35% | 12.41%    | #DIV/0! | #DIV/0!  | #DIV/0!  | #DIV/0! | #DIV/0!  | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0! | #DIV/0!      |

Notes

1. Registration transaction counts come from: G:\Crystal Report\VR\Registrations\New and Renewal Registrations
2. Registration transactions include new registrations and registration renewals completed on the Kiosk, Web and MyDMV Portal only.
3. DMV began accepting Douglas County contributions on 5/9/16.



**Department of Motor Vehicles**  
**Complete Streets: Monthly Report FY25**  
**Report Date: 10/9/2024**  
Reporting Period: September 2024

| Contributions |                    |                |                    |                |                    |                |                     |             |
|---------------|--------------------|----------------|--------------------|----------------|--------------------|----------------|---------------------|-------------|
| County        | July               |                | August             |                | September          |                | Year to Date        |             |
|               | Amount             | % of Total     | Amount             | % of Total     | Amount             | % of Total     | Amount              | % of Total  |
| Carson City   | \$ 1,240.00        | 3.74%          | \$ 1,258.00        | 3.77%          | \$ 1,208.00        | 3.64%          | \$3,706.00          | 3.71%       |
| Clark         | \$ 25,146.00       | 75.81%         | \$ 25,592.00       | 76.65%         | \$ 25,260.00       | 76.04%         | \$75,998.00         | 76.17%      |
| Douglas       | \$ 1,216.00        | 3.67%          | \$ 1,196.00        | 3.58%          | \$ 1,228.00        | 3.70%          | \$3,640.00          | 3.65%       |
| Washoe        | \$ 5,566.00        | 16.78%         | \$ 5,342.00        | 16.00%         | \$ 5,524.00        | 16.63%         | \$16,432.00         | 16.47%      |
| <b>Total</b>  | <b>\$33,168.00</b> | <b>100.00%</b> | <b>\$33,388.00</b> | <b>100.00%</b> | <b>\$33,220.00</b> | <b>100.00%</b> | <b>\$ 99,776.00</b> | <b>100%</b> |

| DMV Commission (1%) |                 |                |                 |                |                 |                |                 |             |
|---------------------|-----------------|----------------|-----------------|----------------|-----------------|----------------|-----------------|-------------|
| County              | July            |                | August          |                | September       |                | Year to Date    |             |
|                     | Amount          | % of Total     | Amount          | % of Total     | Amount          | % of Total     | Amount          | % of Total  |
| Carson City         | \$12.40         | 3.74%          | \$12.58         | 3.77%          | \$12.08         | 3.64%          | \$37.06         | 3.71%       |
| Clark               | \$251.46        | 75.81%         | \$255.92        | 76.65%         | \$252.60        | 76.04%         | \$759.98        | 76.17%      |
| Douglas             | \$12.16         | 3.67%          | \$11.96         | 3.58%          | \$12.28         | 3.70%          | \$36.40         | 3.65%       |
| Washoe              | \$55.66         | 16.78%         | \$53.42         | 16.00%         | \$55.24         | 16.63%         | \$164.32        | 16.47%      |
| <b>Total</b>        | <b>\$331.68</b> | <b>100.00%</b> | <b>\$333.88</b> | <b>100.00%</b> | <b>\$332.20</b> | <b>100.00%</b> | <b>\$997.76</b> | <b>100%</b> |

| Distributions |                    |                |                    |                |                    |                |                    |                |
|---------------|--------------------|----------------|--------------------|----------------|--------------------|----------------|--------------------|----------------|
| County        | July               |                | August             |                | September          |                | Year to Date       |                |
|               | Amount             | % of Total     | Amount             | % of Total     | Amount             | % of Total     | Amount             | % of Total     |
| Carson City   | \$1,227.60         | 3.74%          | \$1,245.42         | 3.77%          | \$1,195.92         | 3.64%          | \$3,668.94         | 3.71%          |
| Clark         | \$24,894.54        | 75.81%         | \$25,336.08        | 76.65%         | \$25,007.40        | 76.04%         | \$75,238.02        | 76.17%         |
| Douglas       | \$1,203.84         | 3.67%          | \$1,184.04         | 3.58%          | \$1,215.72         | 3.70%          | \$3,603.60         | 3.65%          |
| Washoe        | \$5,510.34         | 16.78%         | \$5,288.58         | 16.00%         | \$5,468.76         | 16.63%         | \$16,267.68        | 16.47%         |
| <b>Total</b>  | <b>\$32,836.32</b> | <b>100.00%</b> | <b>\$33,054.12</b> | <b>100.00%</b> | <b>\$32,887.80</b> | <b>100.00%</b> | <b>\$98,778.24</b> | <b>100.00%</b> |

Note:

1. DMV began accepting contributions on 12/15/14.
2. DMV began accepting Douglas County contributions on 5/9/16.

Kathy Lewis  
Chief Financial Officer

www.douglascountynv.gov  
775-782-6202



1594 Esmeralda Avenue  
Minden, Nevada 89423

PO Box 218  
Minden, NV 89423

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## FINANCE DEPARTMENT

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October 11, 2024

Vince Young-Brown  
Executive Branch Budget Officer I  
Governor's Finance Office  
209 E. Musser St. Suite 200  
Carson City, NV 89701

Dear Mr. Young-Brown,

Douglas County has received \$2,388 in Complete Streets Program funds for the fiscal year 2025. Life to date we have accumulated \$67,682 for future projects, most likely the Kahle street project at Stateline or towards a multi-use path on the Muller Parkway extension which is planned to be built by 2025.

Please let me know if you have any questions.

Thank you,

Caroline Chieffo  
Senior Accountant  
Douglas County Finance Division  
Ph: 775-783-6451 Fax: 775-782-6271

Via Email Only, No Hard Copy Will Be Mailed



600 S. Grand Central Pkwy., Suite 350, Las Vegas, NV 89106-4512

September 30, 2024

Vince Young-Brown, Executive Branch Budget Officer I  
State of Nevada – Governor’s Finance Office  
209 E. Musser Street, Room 200  
Carson City, NV 89701-4298  
[vbBrown@finance.nv.gov](mailto:vbBrown@finance.nv.gov)

**COMPLETE STREETS FUND -Fiscal Year 2025 -1<sup>st</sup> Quarter Update**

Dear Vince Young-Brown,

I am writing to provide a quarterly update to the Regional Transportation Commission of Southern Nevada (RTC) projects funded with the Complete Streets Program (CSP) funds.

During quarter 1 of RTC Fiscal Year 2025, the RTC received a total of \$74,533.14 in CSP funds from the DMV as follows:

| Date           | Collections         |
|----------------|---------------------|
| FY25-Quarter 1 | \$ 74,533.14        |
| FY25-Quarter 2 |                     |
| FY25-Quarter 3 |                     |
| FY25-Quarter 4 |                     |
| <b>Total</b>   | <b>\$ 74,533.14</b> |

The attached spreadsheet will provide details of encumbrances and expenditures from January 2015 through September 30, 2024. Below is a summary of the projects and their status:

1. Project Number 191L-CSF – This project was awarded to the City of Henderson at our December 14, 2023, RTC Board Meeting. This project includes complete streets elements by installing buffered bicycle lanes, on-street parking, and other traffic calming improvements.

| Contract Date   | December 14, 2023 |
|-----------------|-------------------|
| Contract Amount | \$ 325,000.00     |
| Amount Spent    | \$ 1,354.69       |
| Balance         | \$ 323,645.31     |
| Contract Closed | TBD               |

2. RTC Project Number 191K-CSF – This project was awarded to the City of Las Vegas at our October 13, 2022, RTC Board Meeting. This project includes complete streets elements by installing safe route to school improvements including, bicycle lanes, new pathways, and traffic calming treatments. This project is complete.

| Contract Date   | October 13, 2022 |
|-----------------|------------------|
| Contract Amount | \$ 300,000.00    |
| Amount Spent    | \$ 300,000.00    |
| Balance         | \$ 0.00          |
| Contract Closed | June 13, 2024    |

3. RTC Project Number 191J-CSF – This project was awarded to Boulder City at our November 18, 2021, RTC Board Meeting. This project included complete streets elements by installing shade structures at bus stops and trails heads along Veterans Memorial Drive and Veterans Drive. This project is complete.

| Contract Date   | November 18, 2021 |
|-----------------|-------------------|
| Contract Amount | \$ 350,000.00     |
| Amount Spent    | \$ 350,000.00     |
| Contract Closed | November 16, 2023 |

4. RTC Project Number 191H-CSF – This project was awarded to the City of Mesquite at our October 8, 2020, RTC Board Meeting. This project included complete streets elements by installing and refurbishing bus shelters along with adding concrete pads and lighting. This project is completed.

| Contract Date   | October 8, 2020  |
|-----------------|------------------|
| Contract Amount | \$ 284,897.44    |
| Amount Spent    | \$ 284,897.44    |
| Contract Closed | October 14, 2021 |

5. RTC Project Number 191G-CSF – This project was awarded to Boulder City at our September 10, 2020, RTC Board Meeting. This project included complete streets elements along Boulder City Parkway (US-95) from Veterans Memorial Drive to Buchanan Boulevard. This project is completed.

| Contract Date   | August 27, 2020 |
|-----------------|-----------------|
| Contract Amount | \$ 95,000.00    |
| Amount Spent    | \$ 95,000.00    |
| Contract Closed | June 10, 2021   |

6. RTC Project Number 191F-CSF - This project was awarded to Clark County at our May 23, 2019, RTC Board Meeting. The project included complete streets elements along Hollywood Boulevard from Charleston Boulevard to Lake Mead Boulevard. This project is completed.

| Contract Date   | May 23, 2019      |
|-----------------|-------------------|
| Contract Amount | \$ 259,247.34     |
| Amount Spent    | \$ 259,247.34     |
| Contract Closed | November 12, 2020 |

7. RTC Project Number 191E-CSF – This project was awarded to the City of North Las Vegas at our May 24, 2018, RTC Board Meeting. The project included traffic calming improvements, pavement striping, street parking, buffered bike lanes, and other improvements as feasible. The project encompassed White Street from Lake Mead Boulevard to Williams Avenue, Williams Avenue from White Street to Las Vegas Boulevard, and Glider Street from Lake Mead Boulevard to Oxford Avenue. This project is completed.

| Contract Date   | May 24, 2018  |
|-----------------|---------------|
| Contract Amount | \$ 252,987.10 |
| Amount Spent    | \$ 252,987.10 |
| Contract Closed | June 10, 2021 |

8. RTC Project Number 191D-CSF – This project was awarded to the City of Mesquite at our February 9, 2017, RTC Board Meeting. The project included the installation of rectangular rapid flashing beacons at various crosswalk locations within the City of Mesquite. This project is completed.

| Contract Date   | February 9, 2017 |
|-----------------|------------------|
| Contract Amount | \$ 40,984.71     |
| Amount Spent    | \$ 40,984.71     |
| Contract Closed | January 10, 2019 |

9. RTC Project Number 191C-CSF – This project was awarded to the City of Henderson at our February 9, 2017, RTC Board Meeting. The project included complete streets elements and traffic calming improvements, pavement striping, street parking, buffered bike lanes, and other improvements as feasible. The roadways included in the project were Montelago Boulevard, Cassia Way, Stephanie Street, Greenway Road, Coronado Center, and Patrick Road. This project is completed.

| Contract Date   | February 9, 2017 |
|-----------------|------------------|
| Contract Amount | \$ 200,429.38    |
| Amount Spent    | \$ 200,429.38    |
| Contract Closed | May 23, 2019     |

10. RTC Project Number 191B-CSF – This project was awarded to the City of Mesquite at our February 11, 2016, Board Meeting. The project included the installation of “Share the Road” signs throughout the City of Mesquite. This project is completed.

| Contract Date   | February 11, 2016 |
|-----------------|-------------------|
| Contract Amount | \$ 12,000.00      |
| Amount Spent    | \$ 12,000.00      |
| Contract Closed | October 13, 2016  |

11. RTC Project Number 191A-CSF – This project was awarded to the City of Las Vegas at our February 11, 2016, RTC Board Meeting. The project included retro-fitting of roads for bicycle lanes, pedestrian signals, crosswalks, refuge islands, pathways, and lighting. The roadways included were Fort Apache Road, Hualapai Way, Grand Teton Drive, Lake Mead Boulevard, El Camino Avenue, D Street, Odette Lane, Vegas Drive, Rock Springs Road, Mojave Road, Harris Avenue, Cimarron Road, Ranch Drive, Tonopah Drive, and Goldring Avenue. This project is completed.

|                 |                   |
|-----------------|-------------------|
| Contract Date   | February 11, 2016 |
| Contract Amount | \$ 118,119.66     |
| Amount Spent    | \$ 118,119.66     |
| Contract Closed | February 9, 2017  |

Should you have any questions or require any additional information, please do not hesitate to contact me at (702) 676-1632 or by email at [kendallg@rtcsonv.com](mailto:kendallg@rtcsonv.com).

Sincerely,

*Gena Kendall*

Gena Kendall, P.E., PTOE  
Manager of Engineering Services – Streets & Highways

GK/sf  
Enclosure

cc: (via e-mail)

M.J. Maynard, Chief Executive Officer  
David Swallow, Deputy Chief Executive Officer  
Andrew Kjellman, Senior Director  
Lance Olsen, Director of Public Works, City of Henderson  
Travis Anderson, Director of Public Works, City of Mesquite  
Mike Hudgeons, Public Works Director, City of North Las Vegas  
Denis Cederburg, Director of Engineering, Clark County  
Joey Paskey, Director of Public Works, City of Las Vegas  
Gary Poindexter, Director of Public Works, City of Boulder City

**COMPLETE STREETS FUND - Summary**

| COLLECTIONS              |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
|--------------------------|-----------------------------|-------------------------------------|-------------------------------------|---------------------------------------|---|---|--|--|--------------------------------------|--------------------------------------|--------------------------------------|------------------------|-----------|
| Month                    | Annual 2015<br>1/15 to 6/15 | Fiscal Year 16<br>7/1/15 to 6/30/16 | Fiscal Year 17<br>7/1/16 to 6/30/17 | Fiscal Year 18<br>07/01/17 - 06/30/18 | Fiscal Year 2019<br>07/01/18 - 06/30/19 | Fiscal Year 2020<br>7/1/2019 - 06/30/20 | Fiscal Year 2021<br>7/1/2020 - 6/30/21 | Fiscal Year 2022<br>7/1/2021 - 6/30/22 | Fiscal Year 2023<br>7/1/22 - 6/30/23 | Fiscal Year 2024<br>7/1/23 - 6/30/24 | Fiscal Year 2025<br>7/1/24 - 6/30/25 |                        |           |
| July                     |                             | \$ 5,528.16                         | \$ 20,358.36                        | \$ 22,055.22                          | \$ 22,615.56                            | \$ 22,249.26                            | \$ 32,093.82                           | \$ 27,308.16                           | \$ 26,646.84                         | \$ 26,084.52                         | \$ 24,302.52                         | July                   |           |
| August                   |                             | \$ 20,974.14                        | \$ 21,574.08                        | \$ 22,106.70                          | \$ 23,061.06                            | \$ 22,997.70                            | \$ 31,060.26                           | \$ 27,442.80                           | \$ 26,298.36                         | \$ 25,417.26                         | \$ 24,894.54                         | August                 |           |
| September                |                             | \$ 20,344.50                        | \$ 21,869.10                        | \$ 22,370.04                          | \$ 23,549.14                            | \$ 24,193.62                            | \$ 27,474.48                           | \$ 27,747.72                           | \$ 28,763.46                         | \$ 26,429.04                         | \$ 25,336.08                         | September              |           |
| October                  |                             | \$ 19,972.26                        | \$ 20,855.34                        | \$ 21,110.76                          | \$ 22,336.38                            | \$ 21,948.30                            | \$ 29,133.72                           | \$ 27,512.10                           | \$ 26,815.14                         | \$ 25,357.86                         |                                      | October                |           |
| November                 |                             | \$ 19,089.18                        | \$ 19,223.82                        | \$ 20,132.64                          | \$ 21,845.34                            | \$ 20,932.56                            | \$ 25,850.88                           | \$ 26,355.78                           | \$ 25,458.84                         | \$ 24,120.36                         |                                      | November               |           |
| December                 |                             | \$ 16,400.34                        | \$ 17,742.78                        | \$ 18,122.94                          | \$ 19,643.58                            | \$ 19,425.78                            | \$ 23,736.24                           | \$ 24,785.64                           | \$ 23,930.28                         | \$ 22,964.04                         |                                      | December               |           |
| January                  | \$ 2,090.88                 | \$ 16,934.94                        | \$ 17,560.62                        | \$ 18,241.74                          | \$ 19,744.56                            | \$ 20,623.68                            | \$ 24,094.62                           | \$ 24,413.40                           | \$ 24,787.62                         | \$ 22,964.04                         |                                      | January                |           |
| February                 | \$ 5,128.70                 | \$ 18,532.80                        | \$ 19,619.82                        | \$ 21,627.54                          | \$ 22,894.74                            | \$ 23,373.90                            | \$ 28,620.90                           | \$ 27,921.96                           | \$ 27,605.16                         | \$ 26,040.96                         |                                      | February               |           |
| March                    | \$ 4,623.30                 | \$ 19,590.12                        | \$ 19,772.28                        | \$ 20,459.34                          | \$ 19,944.54                            | \$ 20,429.64                            | \$ 24,629.22                           | \$ 24,148.08                           | \$ 23,696.64                         | \$ 22,928.40                         |                                      | March                  |           |
| April                    | \$ 5,547.96                 | \$ 23,409.54                        | \$ 25,304.40                        | \$ 26,219.16                          | \$ 26,755.74                            | \$ 23,224.41                            | \$ 29,351.52                           | \$ 28,557.54                           | \$ 28,098.18                         | \$ 25,623.18                         |                                      | April                  |           |
| May                      | \$ 5,231.16                 | \$ 21,504.78                        | \$ 22,292.82                        | \$ 23,326.38                          | \$ 25,132.14                            | \$ 16,065.72                            | \$ 23,894.64                           | \$ 24,633.18                           | \$ 24,429.24                         | \$ 24,718.32                         |                                      | May                    |           |
| June                     | \$ 5,189.58                 | \$ 21,352.32                        | \$ 23,126.40                        | \$ 23,474.88                          | \$ 23,546.16                            | \$ 28,706.04                            | \$ 25,140.06                           | \$ 25,183.62                           | \$ 25,431.12                         | \$ 24,680.70                         |                                      | June                   |           |
| <b>TOTAL COLLECTIONS</b> | <b>\$ 27,811.08</b>         | <b>\$ 223,633.08</b>                | <b>\$ 249,299.82</b>                | <b>\$ 259,247.34</b>                  | <b>\$ 271,058.94</b>                    | <b>\$ 264,170.61</b>                    | <b>\$ 325,080.36</b>                   | <b>\$ 316,009.98</b>                   | <b>\$ 311,960.88</b>                 | <b>\$ 296,671.32</b>                 | <b>\$ 74,533.14</b>                  | <b>\$ 2,619,486.55</b> |           |
| PROJECT ALLOCATIONS      |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| PROJECT NUMBER           | Annual 2015                 | Fiscal Year 2016                    | Fiscal Year 2017                    | Fiscal Year 2018                      | Fiscal Year 2019                        | Fiscal Year 2020                        | Fiscal Year 2021                       | Fiscal Year 2022                       | Fiscal Year 2023                     | Fiscal Year 2024                     | Fiscal Year 2025                     |                        |           |
| 191A-CSF (LV)            |                             | \$ 118,119.66                       |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191B-CSF (MES)           |                             | \$ 12,000.00                        |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191C-CSF (COH)           |                             |                                     | \$ 200,429.38                       |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191D-CSF (MES)           |                             |                                     | \$ 40,984.71                        |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191E-CSF (NLV)           |                             |                                     |                                     | \$ 252,987.10                         | \$ 259,247.23                           |   |  |  |                                      |                                      |                                      |                        |           |
| 191F-CSF (CC)            |                             |                                     |                                     |                                       |   |   | \$ 95,000.00                           |  |                                      |                                      |                                      |                        |           |
| 191G-CSF (BC)            |                             |                                     |                                     |                                       |   |   | \$ 284,897.44                          |  |                                      |                                      |                                      |                        |           |
| 191H-CSF (MES)           |                             |                                     |                                     |                                       |   |   |  | \$ 350,000.00                          |                                      | \$ 325,000.00                        |                                      |                        |           |
| 191I-CSF (BC)            |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191K-CSF (LV)            |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| 191L-CSF (COH)           |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| NLV up next              |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| Total Encumbered         | \$ -                        | \$ 130,119.66                       | \$ 241,414.09                       | \$ 252,987.10                         | \$ 259,247.23                           | \$ -                                    | \$ 379,897.44                          | \$ 350,000.00                          | \$ 300,000.00                        | \$ 325,000.00                        | \$ -                                 | \$ 2,238,665.52        |           |
| Unencumbered Balance     | \$ 27,811.08                | \$ 121,324.50                       | \$ 129,210.23                       | \$ 135,470.47                         | \$ 147,292.18                           | \$ 411,462.79                           | \$ 356,645.71                          | \$ 322,655.69                          | \$ 334,616.57                        | \$ 306,287.89                        | \$ 380,821.03                        | \$ 380,821.03          | Available |
| PROJECT EXPENDITURES     |                             |                                     |                                     |                                       |   |   |  |  |                                      |                                      |                                      |                        |           |
| Amount Spent             | Annual 2015                 | Fiscal Year 2016                    | Fiscal Year 2017                    | Fiscal Year 2018                      | Fiscal Year 2019                        | Fiscal Year 2020                        | Fiscal Year 2021                       | Fiscal Year 2022                       | Fiscal Year 2023                     | Fiscal Year 2024                     | Fiscal Year 2025                     | Cumulative Total       |           |
|                          |                             | \$ 130,119.66                       | \$ 241,414.09                       | \$ 252,987.10                         | \$ 259,247.23                           | \$ 512,234.33                           | \$ 95,000.00                           | \$ 314,754.90                          | \$ 24,557.36                         | \$ 596,939.87                        |                                      | \$ 1,915,020.21        |           |

| Project Number | Agency                  | Contract Amount        | Status |
|----------------|-------------------------|------------------------|--------|
| 191A-CSF (LV)  | City of Las Vegas       | \$ 118,119.66          | Closed |
| 191B-CSF (MES) | Mesquite                | \$ 12,000.00           | Closed |
| 191C-CSF (COH) | Henderson               | \$ 200,429.38          | Closed |
| 191D-CSF (MES) | Mesquite                | \$ 40,984.71           | Closed |
| 191E-CSF (NLV) | City of North Las Vegas | \$ 252,987.10          | Closed |
| 191F-CSF (CC)  | Clark County            | \$ 259,247.23          | Closed |
| 191G-CSF (BC)  | Boulder City            | \$ 95,000.00           | Closed |
| 191H-CSF (MES) | Mesquite                | \$ 284,897.44          | Closed |
| 191I-CSF (BC)  | Boulder City            | \$ 350,000.00          | Closed |
| 191K-CSF (LV)  | City of Las Vegas       | \$ 300,000.00          | Closed |
| 191L-CSF (COH) | Henderson               | \$ 325,000.00          | Open   |
| <b>TOTAL</b>   |                         | <b>\$ 2,238,665.52</b> |        |







**CARSON CITY NEVADA**  
**Consolidated Municipality and State Capital**  
**PUBLIC WORKS**

October 14, 2024

Governor's Finance Office  
209 East Musser Street, Room 200  
Carson City, Nevada 89701

Re: Carson City Complete Streets Funding as requested by the Governor and the Board of Examiners.

To Vince Young-Brown,

The Carson City Complete Streets Account has obligated \$8,280 during FY25 Q1 July - September 2024.

The Complete Streets Account is not a large account for Carson City. As described in the past, to use it effectively, the City allows funds to build up before initiating a project. While there are no expenses this quarter, the Complete Streets fund is an important funding source for transportation projects, especially those that choose to use multi-modal transportation. The City completed an agreement with the Nevada Department of Transportation using complete street funding as match for federal funds to complete a multi-modal study.

Respectfully,

Chris Martinovich, PE  
Transportation Manger  
Carson City Public Works