

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: February 13, 2024, 10:00 AM

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

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

This meeting may be viewed on YouTube.
The video live stream begins at 10:00 am.
<https://www.youtube.com/watch?v=DjDwl8ay4rA>

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 727 299 298#. 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 January 9, 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 – Division of Measurement Standards	6	\$328,197
Department of Agriculture – Division of Measurement Standards	1	\$68,308
Department of Conservation and Natural Resources – Division of Environmental Protection	1	\$45,452
Department of Conservation and Natural Resources – Division of State Parks	2	\$82,477
Department of Veterans Services	1	\$33,394

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

A. Department of Administration – Hearings Division

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Hearings Division requests authority to contract with current employee Carolyn Broussard through a gubernatorial appointment pursuant to NRS 616C.340, subsection 4 as a special appeals officer.

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 authority to contract with former employee Susan Brown to assist in the oversight of the Vegas Strong Resiliency capital improvement project for the Statewide Victim Resource Center for the Department of Health and Human Services, Division of Child and Family Services, through Master Service Agreement #23928 with HAT Limited Partnership dba Manpower.

C. Department of Transportation

Pursuant to NRS 333.705, subsection 1, the department requests authority to contract with former employee Leah Atkinson to provide construction management services with Diversified Consulting Services.

6. Request for the Allocation and Disbursement of Funds for Salary Adjustments (For possible action)

The 2023 Legislature, through Assembly Bill 522, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State’s respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor’s Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2980	University of Nevada, Reno	\$12,127,761
2987	University of Nevada, Las Vegas	\$18,241,221
3011	College of Southern Nevada	\$8,598,882
	Total	\$38,967,864

7. Travel Policy Change Request (For possible action)

A. Gaming Control Board

Pursuant to State Administrative Manual 0006, the board requests an exception to SAM 210 for the reimbursement rate for specified lodging by employees of the board.

B. Gaming Control Board – Nevada Gaming Commission

Pursuant to NRS 281.160, the board requests approval of an agency specific travel policy regarding the amount of reimbursement allowed for travel.

8. Approval of Proposed Leases (For possible action)

9. Approval of Proposed Contracts (For possible action)

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

11. 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 December 13, 2023 through January 16, 2024.

12. Information Item Reports

A. Department of Motor Vehicles – Complete Streets Program

Pursuant to NRS 482.1825, subsection 2, the department shall certify monthly 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 second quarter of fiscal year 2024 for the period beginning October 1, 2023 and ending December 31, 2023.

B. Statewide Quarterly Overtime Report – Fiscal Year 2024, 1st 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 July 1, 2023 through September 30, 2023.

13. 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 727 299 298#. 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.

14. 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. 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. 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.

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/

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MEETING MINUTES

Date and Time: January 9, 2024, 10:00 AM

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

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

MEMBERS PRESENT:

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

STAFF PRESENT:

Amy Stephenson, Clerk of the Board

OTHERS PRESENT:

Felicia Denney, Assistant Director, Department of Transportation

1. Call to Order / Roll Call

Governor: We will call to order the State of Nevada Board of Examiners meeting scheduled for today, January 9, 2024 at 10:00 a.m. Can I have the Clerk please call the roll?

Clerk of the Board: Governor Lombardo.

Governor: Present.

Clerk of the Board: Secretary of State Aguilar.

Secretary of State: Here.

Clerk of the Board: Attorney General Ford.

Attorney General: I'm here.

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

Governor: Thank you. We will close the 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 228 553 855#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

Governor: Moving on to agenda item number 2, *Public Comment*. This first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under the public comment period unless the matter itself has been specifically included on the agenda as an action item. We will limit your comments to three minutes and if you wish to call in via phone, please utilize the phone number 775-321-6111 or 702-329-3435 and the meeting ID number is 228 553 855#.

Do we have any public comment there in Carson City?

Clerk of the Board: No, sir.

Governor: Do we have any public comment here in Las Vegas? Seeing none.

Do we have anyone for public comment on the phone?

Clerk of the Board: No, sir.

Governor: We will close this first item for public comment.

3. Approval of the December 12, 2023 Meeting Minutes (For possible action)

Governor: Agenda item number 3, *Approval of the December 12, 2023 Meeting Minutes*. Do we have any questions of any Board Members? Hearing none.

Secretary of State: Motion to approve the minutes.

Governor: We have a motion. 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 Administration – Fleet Services Division	7	\$367,678
Department of Corrections – Southern Desert Correctional Facility	4	\$247,984
Department of Public Safety – Nevada Highway Patrol Division	2	\$112,253

Governor: Agenda item number 4, *State Vehicle Purchases*.

Clerk of the Board: Thank you, sir. There are three requests under agenda item number 4. The first request is from the Department of Administration, Fleet Services Division. The division requests approval to purchase seven new vehicles for a total amount not to exceed \$367,678.

The second request is from the Department of Corrections, Southern Desert Correctional Facility. The department requests approval to purchase 4 new vehicles for a total amount not to exceed \$247,984.

The last request is from the Department of Public Safety, Nevada Highway Patrol Division. The division requests approval to purchase two replacement vehicles for a total amount not to exceed \$112,253. Are there any questions on any of these items?

Governor: Do we have any questions?

Attorney General: None here. 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 Jason Marty to provide maintenance management activities through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Governor: Agenda item number 5, 5. *Authorization for an Emergency Contract with a Current and/or Former State Employee.*

Clerk of the Board: Pursuant to NRS 333.705, subsection 4, the Department of Transportation seeks a favorable recommendation regarding its determination to use the emergency provision to contract with a former employee to provide maintenance management activities from January 2, 2024 to April 30, 2024 on a full-time basis through Manpower.

Governor: Do we have any questions?

Secretary of State: No questions, motion to approve.

Governor: We have a motion to approve. All those in favor, signify by saying aye. The motion passes unanimously.

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

A. Department of Conservation and Natural Resources – Division of Environmental Protection

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Shane Martin to facilitate permitting actions for the Department of Conservation and Natural Resources, Division of Environmental Protection through statewide contract #99SWC-NV21-7576 with Marathon Staffing Group, Inc.

B. Department of Conservation and Natural Resources – Division of Environmental Protection

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Paige Menicucci to provide technical and administrative support to the Department of Conservation and Natural Resources, Division of Environmental Protection through statewide contract #99SWC- NV21-7576 with Marathon Staffing Group, Inc.

C. 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 assist in completing an independent hydrologic review for the Department of Conservation and Natural Resources, Division of Water Resources through statewide contract #99SWC-NV21-7576 with Marathon Staffing Group, Inc.

D. Department of Taxation

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Matthew Tomich to assist with finalizing the documentation on programming databases to encompass duties and accounting rules for the transition to the new Modernize Your Nevada Tax database system for the Department of Taxation through statewide contract #99SWC-NV19-2461 with Guidesoft, Inc. DBA Knowledge Services.

E. Department of Transportation – Maintenance and Asset Management Division

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division requests authority to contract with former employee Jason Marty in the Department of Transportation, Maintenance and Asset Management Division through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Governor: Agenda item number 6, *Authorization to Contract with a Current and/or Former State Employee.*

Clerk of the Board: There are five requests under this agenda item. The first request is from the Department of Conservation and Natural Resources, Division of Environmental Protection, through the Department of Administration, Purchasing Division. The division intends to contract with a former employee from January 9, 2024 through April 30, 2024 on a full-time basis through Marathon Staffing Group.

The second request is from the Department of Conservation and Natural Resources, Division of Environmental Protection through the Department of Administration, Purchasing Division. The division intends to contract with a former employee from January 9, 2024 through June 30, 2024 on a part-time basis through Marathon Staffing Group.

The third request is from the Department of Conservation and Natural Resources, Division of Water Resources through the Department of Administration, Purchasing Division. The division intends to contract with a former employee from January 9, 2024 through July 10, 2024 on a part-time basis through Marathon Staffing Group.

The fourth request is from the Department of Taxation through the Department of Administration, Purchasing Division. The department intends to contract with a former employee from January 9, 2024 through March 31, 2024 on a full-time basis through Knowledge Services.

The last request is from the Department of Transportation, Maintenance and Asset Management Division through the Department of Administration, Purchasing Division. The

division intends to contract with a former employee from May 1, 2024 through June 11, 2024 on a full-time basis through Manpower. Are there any questions on these items?

Governor: Do we have any questions?

Secretary of State: No questions.

Attorney General: None here. Move approval.

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

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

A. Department of Public Safety – Division of Dignitary Protection

Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$85,175 from the Interim Finance Committee Contingency Account to cover costs associated with providing dignitary protection to the Governor.

B. Governor’s Office for New Americans

Pursuant to NRS 353.268, the office requests a recommendation to the Interim Finance Committee for an allocation of \$21,880 from the Interim Finance Committee Contingency Account to cover a projected shortfall for the remainder of the fiscal year.

Governor: Agenda item number 7, *Request for a Recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account*. We will take these items separately.

There are 2 requests under this agenda item. The first request is from the Department of Public Safety, Division of Dignitary Protection. Pursuant to NRS 353.268, the department requests a recommendation to the Interim Finance Committee for an allocation of \$85,175 from the Interim Finance Committee Contingency Account to cover costs associated with providing dignitary protection.

The second request is from the Governor’s Office for New Americans. Pursuant to NRS 353.268, the office requests a recommendation to the Interim Finance Committee for an allocation of \$21,880 from the Interim Finance Committee Contingency Account to cover a projected shortfall for the remainder of the fiscal year. Are there any questions on these items?

Governor: Do Members have any questions?

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.

8. Request to Designate Positions in State Government as Critical Labor Shortages (For possible action)

Department of Transportation

Pursuant to NRS 286.523, the department requests approval of a critical labor shortage designation for Highway Maintenance Worker III positions.

Governor: Agenda item number 8, *Request to Designate Positions in State Government as Critical Labor Shortages*.

Clerk of the Board: Pursuant to NRS 286.523, the Department of Transportation requests the approval of a critical labor shortage designation for Highway Maintenance Worker III positions. Are there any questions on this item?

Governor: Yes, I have a question. Could we have a representative from the Department of Transportation?

Felicia Denney: Good morning, Governor. I'm Felicia Denney with the Nevada Department of Transportation. I'm here to answer any questions.

Governor: In reading through this item, I notice you have approximately 91 vacancies in this particular classification. What is the department going to do proactively to prevent us from having to do critical labor exceptions?

Felicia Denney: We have attended many job fairs and we've done a lot of outreach. Our problem that we've been experiencing has been that these positions require a commercial driver's license (CDL) and it takes some time for training of these positions and we've really been working hard to recruit for them. We also have a lot of positions posted on the State website and we're working very hard to train people and get them up to speed as fast as we can.

Governor: Do you have the ability to waive the CDL for hiring and do that training in-house?

Felicia Denney: We do do in-house training. I don't believe we can waive the CDL but I can find that out. These are large pieces of equipment and it's very important for safety that these workers are qualified.

Governor: I understand that you wouldn't waive the qualification, but I would just like you to take it for consideration to have the ability to hire them and then do in-house training for the CDL because that's an exorbitant amount of vacancies.

Additionally in the Governor's Executive Order, the suspension of qualifications, in order to enable hiring, is that helping at all?

Felicia Denney: It has been helping us to recruit, however, we are still struggling.

Governor: Thank you. We have another question.

Secretary of State: Have you reached out to organizations like Hope for Prisoners who are doing this kind of work for CDL training as part of their programming?

Felicia Denney: I do not know. We welcome the suggestion and I will reach out to see if that's something we're doing.

Secretary of State: Thank you.

Governor: Thank you. We have no further questions. I'll entertain a motion.

Secretary of State: Motion to approve.

Governor: We have a motion to approve. All those in favor, signify by saying aye. The motion passes unanimously.

9. Approval of Proposed Leases (For possible action)

Governor: Agenda item number 9, *Approval of Proposed Leases*.

Clerk of the Board: There are 5 leases under agenda item number 9 for approval by the Board today. Are there any questions on any of these items?

Attorney General: None here. Move approval.

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

10. Approval of Proposed Contracts (For possible action)

Governor: Agenda item number 10, *Approval of Proposed Contracts*.

Clerk of the Board: There are 53 contracts under this item for approval by the Board today. Are there any questions on any of these items?

Governor: Do we have any questions?

Secretary of State: No questions. Move approval.

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

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

Governor: Agenda item number 11. *Approval of Proposed Master Service Agreements.*

Clerk of the Board: Thank you, sir. There are 5 Master Service Agreements under agenda item number 11 for approval by the Board today. Are there any questions on these items?

Governor: Any questions?

Attorney General: None here. Move to approve.

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

12. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$100,000. Per direction from the September 14, 2021 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$99,999). Attached is a list of all applicable approvals for contracts and amendments approved from November 21, 2023 through December 12, 2023.

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

Clerk of the Board: There are 32 contracts over \$10,000 and under the \$100,000 threshold that were approved by the Clerk of the Board from November 21, 2023 through December 12, 2023. Are there any questions on these items?

Governor: No questions here. Hearing none. We will close this item.

13. Information Item Reports

Governor’s Finance Office – Budget Division

Pursuant to NRS Chapter 353, the Governor’s Finance Office, Budget Division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds, and the IFC Contingency Fund as of December 19, 2023.

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

Tort Claim Fund	\$ 3,465,635.28
Statutory Contingency Account	\$ 11,365,938.59

Stale Claims Account	\$ 5,011,129.33
Emergency Account	\$ 500,000.00
Disaster Relief Account	\$ 11,045,555.03
IFC Contingency Fund	\$ 467,062,576.93

Governor: Agenda item number 13, *Information Item Reports – Governor’s Finance Office – Budget Division.*

Clerk of the Board: Thank you, sir. Pursuant to NRS Chapter 353, the Governor’s Finance Office, Budget Division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds, and the IFC Contingency Fund as of December 19, 2023. The available balance is as follows: Tort Claim Fund, \$3,465,635.28; Statutory Contingency Account, \$11,365,938.59; Stale Claims Account, \$5,011,129.33; Emergency Account, \$500,000.00; Disaster Relief Account, \$11,045,555.03; and the IFC Contingency Fund, \$467,062,576.93. Are there any questions on this item?

Governor: None here.

Attorney General: None here.

Secretary of State: No questions.

Governor: We will close item number 13.

14. Public Comment

This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment 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 228 553 855#. 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: Agenda item number 14, *Public Comment.* This is the second opportunity for public comment. Please limit your comments to three minutes. As a matter of protocol, if you wish to call in via phone, please utilize the phone number 775-321-6111 or 702-329-3435 and the meeting ID number is 228 553 855#.

Do we have anybody for public comment in Carson City?

Clerk of the Board: We do not.

Governor: Do we have anybody here in Las Vegas? Seeing none. Do we have anybody on the phone?

Clerk of the Board: No, sir.

Governor: Hearing and seeing none, we will close public comment.

15. Adjournment (For possible action)

Governor: Agenda item number 15. I move for adjournment. All those in favor, signify by saying aye. The motion passes unanimously. Thank you everyone.

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 | Fax: (775) 684-0260

Date: January 16, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Dustin Speed, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

DEPARTMENT OF AGRICULTURE – DIVISION OF MEASUREMENT STANDARDS

Agenda Item Write-up:

Pursuant to NRS 334.010, the division requests approval to purchase six replacement vehicles for a total amount not to exceed \$328,197.

Additional Information:

The division is requesting to purchase six replacement specialty vehicles used for testing and certifying scales. Funding for this purchase is contingent upon IFC approval of work program #C67139.

Statutory Authority:

NRS 334.010

REVIEWED: <u> <i>DS</i> </u>
ACTION ITEM: _____

Department of Agriculture
Division of Measurement Standards



Memo

To: Dustin Speed, Executive Branch Budget Officer I
From: Amara Vigil, Administrator, Administrative Services Division
CC: Douglas Farris, Deputy Director
William Striejewske, Administrator, Division of Measurement Standards
Cynthia Prasad, Contracts Manager (MA II)
Date: January 4, 2024
Subject: New Vehicles Request for Budget Account 4551

Attached for your review and approval is a Board of Examiners Request for Approval to Purchase six new vehicles. These are new specialty vehicles that were approved by the IFC during the February 8, 2024, meeting.

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

- One (1) 2024 Ford F350 XL 4x2 SD Regular Cab with 142-inch wheelbase.
- One (1) 2024 Ford F250 XL 4x4 SD Super Cab, 148-inch wheelbase with service body and cover.
- Two (2) 2024 Ford F250 XL 4x2 SD Regular Cab with 142-inch wheelbase.
- Two (2) 2024 Ford F250 XL 4x4 SD Super Cab with 148-inch wheelbase with caravan camper shell.

The purchasing of the new specialty vehicles will ensure that the agency is able to successfully and timely complete all the necessary inspections as required by the Nevada Revised Statute.

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

Agency Name: Department of Agriculture	Budget Account #: 4551
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Contact Name: William S. Striejewske	Telephone Number: 775-353-3726
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Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:

Number of vehicles requested: 6 **Amount of the request:** \$328,196.42

Is the requested vehicle(s) new or used: New

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:
6 pickup trucks (Specialty Vehicles)

Mission of the requested vehicle(s):

These vehicles will support Measurement Standards Division Staff in performing necessary inspections throughout the state

Were funds legislatively approved for the request?

Yes No

If yes, please provide the decision unit number:

If no, please explain how the vehicles will be funded?
Reserve funds

Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):

Addition(s) 6 Replacement(s)

Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain.

yes

Please Complete for Replacement Vehicles Only:

(For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)

Current Vehicle Information:

Vehicle #1 Model Year: 2002
Odometer Reading: 129,410
Type of Vehicle: GMC Sierra Pickup Truck

Vehicle #2 Model Year: 2002
Odometer Reading: 101,133
Type of Vehicle: GMC Sierra Pickup Truck

Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced.

If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.

Vehicles are being replaces with comparable size and type of vehicle. All new vehicles will be Ford Brand.

Please attach an additional sheet if necessary

APPOINTING AUTHORITY APPROVAL:

Douglas Farris <small>Digitally signed by Douglas Farris DN: cn=Douglas Farris, o=Department of Agriculture, ou=State of Nevada, email=ld.farris@agri.nv.gov, c=US Date: 2024.01.09 11:48:32 -0800</small>	Deputy Director	01/09/2024
Agency Appointing Authority	Title	Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

Board of Examiners _____ Date _____

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

Agency Name: Department of Agriculture	Budget Account #: 4551
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Contact Name: William S. Striejewske	Telephone Number: 775-353-3726
--	--

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:
Number of vehicles requested: 6 **Amount of the request:** \$328,196.42
Is the requested vehicle(s) new or used: New

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:
6 pickup trucks (Specialty Vehicles)

Mission of the requested vehicle(s):
 These vehicles will support Measurement Standards Division Staff in performing necessary inspections throughout the state

Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? Using reserve funds
--	---

Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):
 Addition(s) 6 Replacement(s)

Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain.

 yes

<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: 2006 Odometer Reading: 124,044 Type of Vehicle: GMC Sierra Pickup Truck</p> <hr/> <p>Vehicle #2 Model Year: 2002 Odometer Reading: 105,880 Type of Vehicle: GMC Sierra Pickup Truck</p> <hr/> <p><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> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. Vehicles are being replaces with comparable size and type of vehicle. All new vehicles will be Ford Brand.</p>
--	--

APPOINTING AUTHORITY APPROVAL:

Digitally signed by Douglas Farris DN: cn=Douglas Farris, o=Department of Agriculture, ou=State of Nevada, email=d.farris@agr.nv.gov, c=US Date: 2024.01.09 11:49:10 -08'00' Douglas Farris	Deputy Director	01/09/2024
Agency Appointing Authority	Title	Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

Board of Examiners _____ Date _____

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

Agency Name: Department of Agriculture	Budget Account #: 4551
---	-------------------------------

Contact Name: William S. Striejewski	Telephone Number: 775-353-3726
---	---------------------------------------

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:
Number of vehicles requested: 6 **Amount of the request:** \$328,196.42
Is the requested vehicle(s) new or used: New
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:
6 pickup trucks (Specialty Vehicles)
Mission of the requested vehicle(s):
 These vehicles will support Measurement Standards Division Staff in performing necessary inspections throughout the state

Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? Using reserve funds
--	---

Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):
 ___ Addition(s) 6 Replacement(s)

Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain.

 yes

<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: 2006 Odometer Reading: 88,328 Type of Vehicle: GMC Sierra Pickup Truck</p> <hr/> <p>Vehicle #2 Model Year: 2006 Odometer Reading: 141,391 Type of Vehicle: GMC Sierra Pickup Truck</p> <hr/> <p><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> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. Vehicles are being replaces with comparable size and type of vehicle. All new vehicles will be Ford Brand.</p>
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APPOINTING AUTHORITY APPROVAL:

Douglas Farris <small>Digitally signed by Douglas Farris DN: cn=Douglas Farris, o=Department of Agriculture, ou=State of Nevada, email=d.farris@agrin.v.gov, c=US Date: 2024.01.09 11:49:46 -0800</small>	Deputy Director	01/09/2024
Agency Appointing Authority	Title	Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

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.

Vehicle Item No., Make, Model & No.:	2024 Ford F350 XL 4x2 SD Regular Cab 142-inch WB		
Dealer Name:	Gallagher Ford		
Delivery Location:	Dealership in Elko, NV		
Vehicle Colors:	Exterior: Iconic Silver	Interior: Medium Dark Slate	<input checked="" type="radio"/> Cloth <input type="radio"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 44,541.08	\$44,541.08
SPECIFY OPTIONS: (description)			\$524.90
2 extra keys/fobs	1	\$524.90	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
Document Fee	1	\$294.00	\$294.00
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$45,359.98
DMV Title and DRS Fee's	1	\$28.25	\$28.25
GRAND TOTAL:			\$45,388.23

Registered Owner:	Agency Name & Address: NV Department of Agriculture 405 S 21 st Street Sparks, NV 89431
Legal Owner:	Agency Name & Address: SAME
County Vehicle Based In:	Elko County
Name & Phone of Person to contact when vehicle is ready for delivery:	William S. Striejewski wstriejewski@agri.nv.gov 775-353-3726 or 775-846-1166



Date: 11/3/2023
Salesperson: Susan Grimes
Manager: Susan Grimes
Customer ID #: 388076

FOR INTERNAL USE ONLY

BUSINESS NAME CONTACT NEVADA DEPARTMENT OF AGRICULTURE Home Phone : (775) 738-8076
405 S 21ST ST
Address : SPARKS, NV 89431-5557 Work Phone :
WASHOE
E-Mail : Cell Phone : (775) 397-5557

VEHICLE
Stock # : order A010 New / Used : **New** VIN : Mileage: 0
Vehicle : 2024 Ford F-350 Color :
Type : XL 4x2 SD Regular Cab 8 ft. box 142
Body Size : Style : Weight : 0 Unit Class :

Market Value Selling Price	44,541.08
2 extra keys /fobs	524.90
Total Purchase	45,065.98
DealerDoc	294.00
Non Tax Fees	28.25
Cash Deposit	.00
Balance	45,388.23

Customer Approval: _____ Management Approval: _____
By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.

Vehicle Order Information Form

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

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2024 Ford F250 XL 4x4 SD Super Cab 148-inch WB with service body w/cover		
Dealer Name:	Gallagher Ford		
Delivery Location:	Dealership in Elko, NV		
Vehicle Colors:	Exterior: Iconic Silver	Interior: Medium Dark Slate	<div style="border: 1px solid black; border-radius: 50%; padding: 2px; display: inline-block;">Cloth</div> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 48,908.08	\$48,908.08
SPECIFY OPTIONS: (description)			\$14,230.90
2 extra keys/fobs	1	\$524.90	
Service Body w/cover	1	\$13,706.00	
		\$	
		\$	
		\$	
		\$	
Document Fee	1	\$294.00	\$294.00
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$63,432.98
DMV Title and DRS Fee's	1	\$28.25	\$28.25
GRAND TOTAL:			\$63,461.23

Registered Owner:	Agency Name & Address: NV Department of Agriculture 405 S 21 st Street Sparks, NV 89431
Legal Owner:	Agency Name & Address: SAME
County Vehicle Based In:	Washoe County
Name & Phone of Person to contact when vehicle is ready for delivery:	William S. Striejewski wstriejewske@agri.nv.gov 775-353-3726 or 775-846-1166



Date: 11/3/2023
 Salesperson: Susan Grimes
 Manager: Susan Grimes
 Customer ID #: 388076

FOR INTERNAL USE ONLY

BUSINESS NAME CONTACT NEVADA DEPARTMENT OF AGRICULTURE Home Phone : (775) 738-8076
405 S 21ST ST
 Address : SPARKS, NV 89431-5557 Work Phone :
WASHOE
 E-Mail : Cell Phone : (775) 397-5557

VEHICLE
 Stock # : order A009 New / Used : **New** VIN : Mileage: 0
 Vehicle : 2024 Ford F-250 Color : Iconic silver
 Type : XL 4x4 SD Super Cab 6.75 ft. box 14
 Body Size : Style : Weight : 0 Unit Class :

Market Value Selling Price	48,908.08
2 extra keys /fobs	524.90
Reading Service body w/cover	13,706.00
Total Purchase	63,138.98
DealerDoc	294.00
Non Tax Fees	28.25
Cash Deposit	.00
Balance	63,461.23

Customer Approval: _____ Management Approval: _____
 By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.

Vehicle Order Information Form

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

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2024 Ford F250 XL 4x2 SD Regular Cab 142-inch WB		
Dealer Name:	Gallagher Ford		
Delivery Location:	Dealership in Elko, NV		
Vehicle Colors:	Exterior: Iconic Silver	Interior: Medium Dark Slate	<input checked="" type="radio"/> Cloth <input type="radio"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	2	\$ 43,071.08	\$86,142.16
SPECIFY OPTIONS: (description)			\$1,049.80
2 extra keys/fobs	2	\$524.90	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
Document Fee	2	\$294.00	\$588.00
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$87,779.96
DMV Title and DRS Fee's	2	\$28.25	\$56.50
GRAND TOTAL:			\$87,836.46

Registered Owner:	Agency Name & Address: NV Department of Agriculture 405 S 21 st Street Sparks, NV 89431
Legal Owner:	Agency Name & Address: SAME
County Vehicle Based In:	Clark County
Name & Phone of Person to contact when vehicle is ready for delivery:	William S. Striejewski wstriejewski@agri.nv.gov 775-353-3726 or 775-846-1166



Date: 11/3/2023
 Salesperson: Susan Grimes
 Manager: Susan Grimes
 Customer ID #: 388076

FOR INTERNAL USE ONLY

BUSINESS NAME CONTACT NEVADA DEPARTMENT OF AGRICULTURE Home Phone : (775) 738-8076
405 S 21ST ST
 Address : SPARKS, NV 89431-5557 Work Phone :
WASHOE
 E-Mail : Cell Phone : (775) 397-5557

VEHICLE
 Stock # : order A008 New / Used : **New** VIN : Mileage: 0
 Vehicle : 2024 Ford F-250 Color : iconic silver
 Type : XL 4x2 SD Regular Cab 8 ft. box 142
 Body Size : Style : Weight : 0 Unit Class :

Market Value Selling Price	43,071.08
2 extra keys /fobs	524.90
Total Purchase	43,595.98
DealerDoc	294.00
Non Tax Fees	28.25
Cash Deposit	.00
Balance	43,918.23

Customer Approval: _____ Management Approval: _____
 By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.

Vehicle Order Information Form

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

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2024 Ford F250 XL 4x4 SD Super Cab 148-inch WB		
Dealer Name:	Gallagher Ford		
Delivery Location:	Dealership in Elko, NV		
Vehicle Colors:	Exterior: Iconic Silver	Interior: Medium Dark Slate	<div style="border: 1px solid black; border-radius: 50%; padding: 2px; display: inline-block;">Cloth</div> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	2	\$ 57,483.10	\$114,966.20
SPECIFY OPTIONS: (description)			\$15,899.80
2 extra keys/fobs	2	\$524.90	
Caravan Camper Shell	2	\$7,425.00	
		\$	
		\$	
		\$	
		\$	
		\$	
Document Fee	2	\$294.00	\$588.00
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$131,454.00
DMV Title and DRS Fee's	2	\$28.25	\$56.50
GRAND TOTAL:			\$131,510.50

Registered Owner:	Agency Name & Address: NV Department of Agriculture 405 S 21 st Street Sparks, NV 89431
Legal Owner:	Agency Name & Address: SAME
County Vehicle Based In:	1 in Washoe County, 1 in Elko County
Name & Phone of Person to contact when vehicle is ready for delivery:	William S. Striejewski wstrijewski@agri.nv.gov 775-353-3726 or 775-846-1166



Date: 11/3/2023
 Salesperson: Susan Grimes
 Manager: Susan Grimes
 Customer ID #: 388076

FOR INTERNAL USE ONLY

BUSINESS NAME CONTACT NEVADA DEPARTMENT OF AGRICULTURE Home Phone : (775) 738-8076

Address : 405 S 21ST ST
SPARKS, NV 89431-5557 Work Phone :
WASHOE

E-Mail : Cell Phone : (775) 397-5557

VEHICLE

Stock # : order A00 New / Used : New VIN : Mileage: 0

Vehicle : 2024 Ford F-250 Color :

Type : XL 4x4 SD Super Cab 6.75 ft. box 14

Body Size : Style : Weight : 0 Unit Class :

Market Value Selling Price	57,483.10
Caravan Camper Shell	7,425.00
2 extra keys /fobs	524.90
Total Purchase	65,433.00
DealerDoc	294.00
Non Tax Fees	28.25
Cash Deposit	.00
Balance	65,755.25

Customer Approval: _____ Management Approval: _____

By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.

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 | Fax: (775) 684-0260

Date: January 16, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Dustin Speed, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

DEPARTMENT OF AGRICULTURE – DIVISION OF MEASUREMENT STANDARDS

Agenda Item Write-up:


Pursuant to NRS 334.010, the division requests approval to purchase one replacement vehicle for a total amount not to exceed \$68,308.

Additional Information:

The division is requesting to purchase one replacement vehicle used for testing and certifying scales. Funding is available through decision unit E-712 in the agency's fiscal year 2024 budget and contingent upon IFC approval of work program #C67054.

Statutory Authority:

NRS 334.010

REVIEWED:  _____
ACTION ITEM: _____

Department of Agriculture
Division of Measurement Standards



Memo

To: Dustin Speed, Executive Branch Budget Officer I
From: Amara Vigil, Administrator, Administrative Services Division
CC: Douglas Farris, Deputy Director
William Striejewske, Administrator, Division of Measurement Standards
Cynthia Prasad, Contracts Manager (MA II)
Date: January 4, 2024
Subject: New Specialty Vehicle Request for Budget Account 4551

Attached for your review and approval is a Board of Examiners Request for Approval to Purchase a State Vehicle. This is a new specialty vehicle that is Legislatively approved in decision unit E712 for SFY24, however, due to inflation, the vehicle cannot be purchased for the budget approved amount. The Department has sufficient reserves to fund the purchase of (1) a new vehicle for the Division of Measurement Standards.

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

- - One (1) 2024 Ford F550 Chassis XL 4x4 SD Super Cab with 168-inch wheelbase.

The specialty vehicle is used for testing and certifying scales and performing necessary inspections throughout the State of Nevada. The purchasing of the new specialty vehicles will ensure that the agency is able to successfully and timely complete all the necessary inspections as required by the Nevada Revised Statute.

Vehicle Order Information Form

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

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2024 Ford F550 Chassis XL 4x4 SD Super Cab 168 inch WB DRW		
Dealer Name:	Gallagher Ford		
Delivery Location:	Dealership in Elko, NV		
Vehicle Colors:	Exterior: Iconic Silver	Interior: Medium Dark Slate	<input checked="" type="radio"/> Cloth <input type="radio"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 67,460.10	\$67,460.10
SPECIFY OPTIONS: (description)			\$524.90
2 extra keys/fobs	1	\$524.90	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
Document Fee	1	\$294.00	\$294.00
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$68,279.00
DMV Title and DRS Fee's	1	\$28.25	\$28.25
GRAND TOTAL:			\$68,307.25

Registered Owner:	Agency Name & Address: NV Department of Agriculture 405 S 21 st Street Sparks, NV 89431
Legal Owner:	Agency Name & Address: SAME
County Vehicle Based In:	Elko County
Name & Phone of Person to contact when vehicle is ready for delivery:	William S. Striejewske wstriejewske@agri.nv.gov 775-353-3726 or 775-846-1166



Date: 11/3/2023
Salesperson: Susan Grimes
Manager: Susan Grimes
Customer ID #: 388076

FOR INTERNAL USE ONLY

BUSINESS NAME CONTACT NEVADA DEPARTMENT OF AGRICULTURE Home Phone : (775) 738-8076
405 S 21ST ST
Address : SPARKS, NV 89431-5557 Work Phone :
WASHOE
E-Mail : Cell Phone : (775) 397-5557

VEHICLE
Stock # : order A011 New / Used : **New** VIN : Mileage: 0
Vehicle : 2024 Ford F-550 Chassis Color : Iconic silver
Type : XL 4x4 SD Super Cab 168 in. WB DRW
Body Size : Style : Weight : 0 Unit Class :

Market Value Selling Price	67,460.10
2 extra keys /fobs	524.90
Total Purchase	67,985.00
DealerDoc	294.00
Non Tax Fees	28.25
Cash Deposit	.00
Balance	68,307.25

Customer Approval: _____ Management Approval: _____
By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.

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 | Fax: (775) 684-0260

Date: January 17, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Richard Jacobs, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

**DEPARTMENT OF CONSERVATION & NATURAL RESOURCES –
DIVISION OF ENVIRONMENTAL PROTECTION**

Agenda Item Write-up:

Pursuant to NRS 334.010, the division requests approval to purchase one replacement vehicle for a total amount not to exceed \$45,452.

Additional Information:

The authorization for this vehicle was approved in the 2023 Legislative Session, decision unit E713, for fiscal year 2024. The most reasonable quote received from the dealership is \$45,451.25. The difference of \$1,238.25 will be funded with existing authority.

Statutory Authority:

NRS 334.010

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



Bureau of Sustainable Materials Management

901 S. Stewart Street, Suite 4001
Carson City, NV 89701

Date: December 12, 2023

TO: Richard Jacobs, Executive Branch Budget Officer

<via email: rdjacobs@finance.nv.gov

THROUGH: Jennifer Carr, Administrator

Jennifer Carr
Jennifer Carr (Jan 3, 2024 13:39 PST)

THROUGH: Jeffrey Kinder, Deputy Administrator

Jeffrey Kinder, Deputy Administrator
Jeffrey Kinder, Deputy Administrator (Jan 3, 2024 13:20 PST)

THROUGH: Annalyn Settelmeyer, Chief

Annalyn Settelmeyer
Annalyn Settelmeyer (Dec 20, 2023 14:46 PST)

FROM: Joshua Cerda, Environmental Scientist

RE: State Vehicle Purchase

The Nevada Department of Conservation and Natural Resources, Division of Environmental Protection, Bureau of Sustainable Materials Management (BSMM) is seeking approval from the State Board of Examiners pursuant to NRS 333.010 to purchase a new vehicle for the Bureau's use. The BSMM conducts education and outreach activities for NDEP throughout the state. To better accommodate the transport of personnel and educational / outreach materials, the larger 2024 Toyota Grand Highlander would meet the needs better than the current vehicle it will be replacing, a 2007 Toyota Rav4 with over 86,000 miles.

The vehicle is an approved expense in the FY24 Legislatively Approved Budget in Category 10, Budget Account 3187, GL 8310. The approved budget is \$44,213.00 and the most reasonable quote received from the dealership is \$45,451.25 after dealer offered additional \$1000 off the total purchase price to accommodate budget. This is a difference of \$1,238.25. However, current projections show Category 10 having sufficient funds to cover this purchase.

The required paperwork is attached and we are requesting this purchase to be included in the February 13, 2024 Board of Examiners agenda.

Please call if you have any questions regarding this request at 775-687-9473 or email at jcerda@ndep.nv.gov.

Thank you for your consideration of our request.

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

Agency Name: Nevada Division of Environmental Protection	Budget Account #: 3187
Contact Name: Joshua Cerda	Telephone Number: 775-687-9473
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$45,451.25</u> Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>SUV</u> Mission of the requested vehicle(s): <u>Used for transporting personnel and cargo to public outreach events and various bureau activities.</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E713</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u> </u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Vehicle based in Carson City</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) <u>Current Vehicle Information:</u> Vehicle #1 Model Year: <u>2007</u> Odometer Reading: <u>86,125</u> Type of Vehicle: <u>SUV</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. <small>The Grand Highlander is larger than the current Rav4 that it will be replacing and provides the additional personnel and cargo carrying capacity that was much needed from the Rav4. Events often require a large cargo area, as well as the ability to transport multiple individuals. The Rav4 struggled with this in many instances and multiple vehicles were often used. The Grand Highlander will be able to accomplish what often required multiple vehicle use for outreach / public events.</small>
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Jennifer Carr</u> <small>Jennifer Carr (Jan 3, 2024 13:39 PST)</small> Agency Appointing Authority	Administrator Title
Jan 3, 2024 Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? YES

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2024 Toyota Grand Highlander XLE AWD 6708A		
Dealer Name:	Carson City Toyota		
Delivery Location:	Carson City Toyota		
Vehicle Colors:	Exterior:	Interior:	Cloth
	Coastal Cream	Black	x Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$44,670.00	\$44,670.00
SPECIFY OPTIONS: (description)			\$358.00
All weather floor liners	1	\$358.00	
*** Dealer Discount from total price ***		- \$1000.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)	1	\$1,395.00	\$46,423.00
Total purchase price with options	1		\$46,423.00
DMV Title and DRS Fee's	1	\$28.25	
GRAND TOTAL:			\$ 45,451.25

Registered Owner:	Agency Name & Address: Nevada Division of Environmental Protection Bureau of Sustainable Materials Management 901 S Stewart St, Ste 4001, Carson City, NV 89701
Legal Owner:	Agency Name & Address: Nevada Division of Environmental Protection Bureau of Sustainable Materials Management 901 S Stewart St, Ste 4001, Carson City, NV 89701
County Vehicle Based In:	Carson City
Name & Phone of Person to contact when vehicle is ready for delivery:	Joshua Cerda 775-687-9473 jcerda@ndep.nv.gov



CARSON CITY TOYOTA

CAMPAGNI AUTO GROUP

2590 S. CARSON ST. CARSON CITY, NV 89701 CARSONCITYTOYOTA.COM 775-882-8211

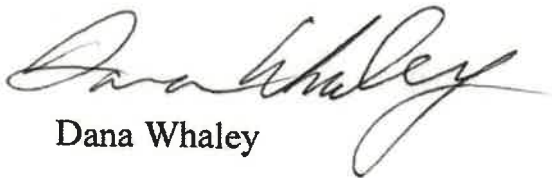
December 5, 2023

Please accept this quote for
One 2024 Toyota Grand Highlander XLE AWD
Model 6708
Color Coastal Cream

Price	\$45,423.00
<u>State Title Fee</u>	<u>\$ 28.25</u>
Total	\$45,451.25

- No factory incentives at this time
- Delivered to Carson City, Nevada

Thank you for your business,


Dana Whaley

**PRICE INCLUDES
2 YEARS OR 25,000
MILE SERVICE
MAINTENANCE AT NO CHARGE**

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 | Fax: (775) 684-0260

Date: January 17, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Richard Jacobs, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

**DEPARTMENT OF CONSERVATION & NATURAL RESOURCES –
DIVISION OF STATE PARKS**

Agenda Item Write-up:


Pursuant to NRS 334.010, the division requests approval to purchase two new vehicles for a total amount not to exceed \$82,477.

Additional Information:

The division is requesting to purchase two new vehicles to perform maintenance and safety at Ice Age Fossils State Park. Funding for this purchase was approved by the IFC through work program #C66234.

Statutory Authority:

NRS 334.010

REVIEWED: 
ACTION ITEM: _____

Joe Lombardo
Governor

JAMES A. SETTELMAYER
Director
Department of Conservation and
Natural Resources

Bob Mergell
Administrator
Nevada State Parks

STATE OF NEVADA



901 S. Stewart Street,
Suite 5005
Carson City, NV
89701-5248

Phone: (775) 684-2770
Fax: (775) 684-2777
stparks@parks.nv.gov
<http://parks.nv.gov>

DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF STATE PARKS

January 24, 2024

MEMORANDUM

To: Richard Jacobs, Budget Analyst
Department of Administration

Through: Robert Mergell, Administrator
State Parks



From: Jen Villanueva, ASO II

Subject: Approval to purchase vehicles

Attached is the Board of Examiners Request for Approval to Purchase a State Vehicle form, pursuant to NRS 334.010. In SFY 24 State Parks was approved contingency funds via work program C66234 during the December IFC to purchase two new vehicles to be used at Ice Age Fossils State Park for general operating purposes within the park. The total request for the two vehicles will be \$82,476.50.

Thank you in advance for your consideration of this request.

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

Agency Name: State Parks	Budget Account #: 4162	
Contact Name: Jennifer Villanueva	Telephone Number: 775-684-2773	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: 2 Amount of the request: \$82,476.50		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: 1 truck, 1 SUV		
Mission of the requested vehicle(s): Vehicles for 2 new positions at Ice Age Fossils State Park		
Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? Contingency funds via work program C66234 approved at December 2023 IFC	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input checked="" type="checkbox"/> 2 Addition(s) <input type="checkbox"/> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. No, vehicles are to be used in off-road terrain.		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. N/A If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. N/A	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 Agency Appointing Authority	 Title	<u>1/17/24</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
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.

Vehicle Item No., Make, Model & No.:	Ford F250 Supercab Long Bed 4 x 4 6.8 V8		
Dealer Name:	Corwin Ford		
Delivery Location:	Reno, NV		
Vehicle Colors:	Exterior: White	Interior: Gray	<input checked="" type="checkbox"/> Cloth
			<input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 52,545.00	\$ 52,545.00
SPECIFY OPTIONS: (description)			
Back Up Camera		\$	
Four Wheel Drive		\$	
Integrated Trailer Brake Controller		\$	
Power Locks		\$	
Skid Plate		\$	
Tire, Spare, Full Size		\$	
Power Outlet 120 V		\$	

DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$ 52,545.00
DMV Title and DRS Fee's			\$ 28.25
GRAND TOTAL:			\$ 52,573.25
Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701		
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701		
County Vehicle Based In:	Clark		
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Villanueva 775-684-2773		



Invoice # 01/09/2024

Corwin | Ford
RENO

Sales • Service • Used Cars & Trucks

3600 KIETZKE LANE
RENO, NV 89502

P.O. BOX 12970
RENO, NV 89510

775-829-3206 Direct

Customer # RETT SMITH

Sold to: DIVISION OF STATE PARKS

Address:

City, State &
Zip Code

VIN	Year	Make	Model
	2024	Ford	F250
Salesperson	Deal #	PO #	
Dennis Tagliarino			

2024 F250 SUPERCAB LONG BED 4X4

INCLUDES: 6.8 V8, 101A POWER GROUP, POWER LOCKS, POWER WINDOWS, SYNC, CRUISE CONTROL, STEEL RIMS, SPARE TIRE, REARVIEW CAMERA, DAYTIME RUNNING LIGHTS, ELECTRONIC SOF (4x4 only), WHITE EXTERIOR, CLOTH GRAY INTERIOR

TOTAL COST \$52,545 PLUS \$28.25 TITLE FEE

**Thank you for your
business!**

DELIVERY COST: (If other than Reno\Carson or Las Vegas)			\$	\$
Total purchase price with options				\$ 29,875.00
DMV Title and DRS Fee's				\$ 28.25
GRAND TOTAL:				\$ 29,903.25
Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701			
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701			
County Vehicle Based In:	Clark			
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Villanueva 775-684-2773			



Invoice # 01/16/2024

Corwin | Ford
RENO

Sales • Service • Used Cars & Trucks

3600 KIETZKE LANE
RENO, NV 89502

Customer #RETT SMITH

P.O. BOX 12970
RENO, NV 89510

Sold to: DIVISION OF STATE PARKS

775-829-3206 Direct

Address:

City, State &
Zip Code

VIN	Year 2024	Make Ford	Model ESCAPE
Salesperson Dennis Tagliarino	Deal #		PO #

2024 ESCAPE ACTIVE FWD

**OXFORD WHITE/ CLOTH EBONY BUCKETS
1.5 ECOBOOST ENGINE/ 6 SPEED TRANS
HEATED STEERING WHEEL/ REMOTE START
HEATED FRONT SEATS
DAYTIME RUNNING LAMPS
ALL POWER**

TOTAL COST \$29,875 PLUS \$28.25 TITLE FEE

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

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 | Fax: (775) 684-0260

Date: January 17, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Michael Rankin, 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 VETERANS SERVICES

Agenda Item Write-up:


Pursuant to NRS 334.010, the department requests approval to purchase one replacement vehicle for a total amount not to exceed \$33,394.

Additional Information:

The department is requesting to purchase one replacement vehicle used for outreach to assist veterans preparation and submission of veterans affairs claims. Sufficient authority exists to cover the purchase of the vehicle.

Statutory Authority:

NRS 334.010

REVIEWED: 
ACTION ITEM: _____

JOE LOMBARDO
Governor



STATE OF NEVADA
NEVADA DEPARTMENT OF VETERANS SERVICES
6630 South McCarran Blvd, Building C, Suite 204
Reno, Nevada 89509
(775) 688-1653 • Fax (775) 688-1656

January 17, 2024

To: BOE Clerk
Governor's Finance Office

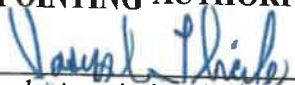
From: Joseph Theile, Deputy CFO
Nevada Department of Veterans Services

Subject: Request to Purchase a New Vehicle

Please accept this memorandum as the official request from the Department of Veterans Services to purchase a 2023 GMC Terrain TXL26 SLE to replace a 2013 Van. The vehicle will be used for outreach to veterans and by Veterans Service Officers to meet with veterans related to the preparation and submission of VA claims.

Please feel free to contact me at 775-825-9752 or by email at theilej@veterans.nv.gov should you have any questions. Thank you.

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

Agency Name: Department of Veterans Services	Budget Account #: 2564
Contact Name: Joe Theile	Telephone Number: 775-825-9752
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information: Number of vehicles requested: 1 Amount of the request: \$33,393.95 Is the requested vehicle(s) new or used: new Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: SUV 2023 GMC Terrain TXL26 SLE Mission of the requested vehicle(s): Vehicle to be used for outreach to veterans and by VSOs to meet with veterans related to preparation and submission of VA claims.	
Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? B/A 2564 THE GIFT ACCOUNT FOR VETERANS
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> Replacement(s)	
Does the requested vehicle(s) comply with requirements pursuant to SAM 1314? If not, please explain. Yes	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: 2013 Odometer Reading: 48,510 Type of Vehicle: Van Ford E-350 <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. Yes <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Agervdv Appointing Authority </div> <div style="text-align: center;"> Executive Officer/ASOIII Title </div> <div style="text-align: center;"> 01/02/2024 Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase Not Approved for Purchase 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.

Vehicle Item No., Make, Model & No.:	2023 Terrain SLE FWD		
Dealer Name:	Auto Nation Buick GMC		
Delivery Location:	5460 Reno Corporate Drive #131 Reno, NV 89511		
Vehicle Colors:	Exterior: Summit White	Interior: Jet Black	Cloth Unknown Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 29,900.00	\$29,900.00
SPECIFY OPTIONS: (description)			\$2,070.00
Driver Convenience Package	1	\$1,375.00	
Terrain Pro Safety Plus	1	\$495.00	
Side Blind and Rear Cross Traffic Alert	1	\$200.00	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)	1	\$1,395.00	\$1,395.00
Total purchase price with options	1		\$33,365.00
DMV Title and DRS Fee's	1	\$28.25	\$28.25
GRAND TOTAL:			\$33,393.95

Registered Owner:	Nevada Department of Veterans Services 6630 S. McCarran Blvd., Building C, Suite 204 Reno, Nevada 89509
Legal Owner:	Nevada Department of Veterans Services 6630 S. McCarran Blvd., Building C, Suite 204 Reno, Nevada 89509
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Joseph Theile 775-825-9752



2023 TERRAIN SLE FWD

EXTERIOR: SUMMIT WHITE
INTERIOR: JET BLACK

ENGINE, 1.5L TURBO DOHC 4-
TRANSMISSION, 9-SPD AUTOMATIC

PULL THIS STRIP TO EXPOSE ADHESIVE

STANDARD EQUIPMENT

ITEMS FEATURED BELOW ARE INCLUDED AT NO EXTRA CHARGE IN THE STANDARD VEHICLE PRICE EXCEPT:

- OWNER BENEFITS**
 - 3 YEAR/36,000 MILE* BUMPER-TO-BUMPER LIMITED WARRANTY
 - 5 YEAR/60,000 MILE* POWERTRAIN LIMITED WARRANTY, ROADSIDE ASSISTANCE & COURTESY TRANSPORTATION
 - FIRST MAINTENANCE VISIT
 - *WHICHEVER COMES FIRST SEE GMC.COM OR DEALER FOR TERMS, DETAILS & LIMITS
- PERFORMANCE & MECHANICAL**
 - TIRE, COMPACT SPARE
 - HILL DESCENT CONTROL
 - STABILITRAK® STABILITY CONTROL SYSTEM W/ TRACTION CONTROL
 - WHEELS, 17" PAINTED ALUMINUM

INTERIOR

- SEATBACK, PASSENGER SIDE, FLAT FOLDING
 - STEERING WHEEL, URETHANE
 - POWER WINDOW W/ EXPRESS DRIVER UP/DOWN
 - DRIVER INFO DISPLAY, 4.2" MULTI-COLOR
 - AUDIO SYSTEM, 6 SPEAKER
- EXTERIOR**
- HEADLAMPS, LED
 - DAYTIME RUNNING LAMPS, LED
 - TAIL LAMPS, LED SIGNATURE
- SAFETY & SECURITY**
- GMC PRO SAFETY:
 - *INTELLIBEAM-AUTO HIGH BEAM
 - *FOLLOWING DISTANCE INDICATOR
 - *FORWARD COLLISION ALERT
 - *LANE KEEP ASSIST W/ LANE DEPARTURE WARNING
 - *AUTOMATIC EMERGENCY BRAKING
 - *FRONT PEDESTRIAN BRAKING

- REAR VISION CAMERA
 - TEEN DRIVER
 - THEFT DETERRENT SYSTEM
 - UNAUTHORIZED ENTRY
 - TIRE PRESSURE MONITOR W/ TIRE FILL ALERT (EXCL. SPARE)
- CONNECTIVITY FEATURES**
- 3 YEARS ONSTAR PREMIUM PLAN: -REMOTE ACCESS PLAN
 - SAFETY & SECURITY PLAN
 - UNLIMITED WIFI DATA PLAN
 - SEE ONSTAR.COM FOR DETAILS
 - DIAG. COLOR TOUCHSCREEN
 - GMC INFOTAINMENT SYSTEM W/ 7" ADDITIONAL FEATURES FOR COMPATIBLE PHONES INCLUDE:
 - BLUETOOTH AUDIO STREAMING
 - VOICE COMMAND PASSTHROUGH
 - PHONE, WIRELESS ANDROID AUTO & WIRELESS APPLE CARPLAY CAPABLE
 - USB CHARGING-ONLY PORTS, 2

OPTIONS & PRICING

OPTIONS INSTALLED BY THE MANUFACTURER (MAY REPLACE STANDARD EQUIPMENT SHOWN)

- DRIVER CONVENIENCE PACKAGE: 1,375.00
- REMOTE VEHICLE START
- ROOF RACK, SIDE RAILS
- DRIVER & FRONT PASSENGER HEATED SEATS
- AIR CONDITIONING, DUAL ZONE
- AUTOMATIC CLIMATE CONTROL
- SEAT, DRIVER 8-WAY POWER WITH 2-WAY POWER LUMBAR

- 2 USB PORTS, AUXILIARY INPUT JACK
 - SIRIUSXM CAPABLE, TRIAL INCLUDED W/ SUBSCRIPTION SOLD SEPARATELY
 - REMOTE KEYLESS/ REMOTE OPEN
- MANUFACTURER'S SUGGESTED RETAIL PRICE
- STANDARD VEHICLE PRICE \$29,900.00**

- TERRAIN PRO SAFETY PLUS PACKAGE: 495.00
 - REAR PARK ASSIST
 - SAFETY ALERT SEAT
 - ADAPTIVE CRUISE CONTROL
 - POWER OUTSIDE MIRRORS, HEATED LED TURN SIGNAL INDICATOR
 - SIDE BLIND ZONE AND REAR CROSS TRAFFIC ALERT
 - REAR CROSS TRAFFIC ALERT
 - LANE CHANGE ALERT WITH SIDE BLIND ZONE ALERT
- TOTAL OPTIONS \$2,070.00
- TOTAL VEHICLE & OPTIONS \$31,970.00
- DESTINATION CHARGE 1,395.00

TOTAL VEHICLE PRICE* \$33,365.00

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24 city

29 highway

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Small SUVs range from 14 to 123 MPG.
The best vehicle rates 132 MPG.

You spend **\$500** more in fuel costs over 5 years compared to the average new vehicle.

Annual fuel cost \$1,700

Fuel Economy & Greenhouse Gas Rating (tailpipe only)



This vehicle emits 326 grams CO₂ per mile. The best emits 0 grams per mile (tailpipe only). Producing and distributing fuel also create emissions. Learn more at EPA.gov/climate.

Actual results will vary for many reasons, including driving conditions and how you drive and maintain your vehicle. The average new vehicle gets 28 MPG and costs \$8,000 to fuel over 5 years. Cost estimates are based on 15,000 miles per year at \$2.95 per gallon. MPG is miles per gasoline gallon equivalent. Vehicle emissions are a significant cause of climate change and smog.

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GOVERNMENT 5-STAR SAFETY RATINGS

Overall Vehicle Score ★ ★ ★ ★ ★

Based on the combined ratings of frontal, side and rollover. Should ONLY be compared to other vehicles of similar size and weight.

Frontal Crash ★ ★ ★ ★ ★
Based on the risk of injury in a frontal impact. Should ONLY be compared to other vehicles of similar size and weight.

Side Crash ★ ★ ★ ★ ★
Based on the risk of injury in a side impact.

Rollover ★ ★ ★ ★ ★
Based on the risk of rollover in a single-vehicle crash.

Star ratings range from 1 to 5 stars (★ ★ ★ ★ ★) with 5 being the highest. Source: National Highway Traffic Safety Administration (NHTSA)

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www.gmc.com

PARTS CONTENT INFORMATION

FOR VEHICLES IN THIS CARLINE:
U.S./CANADIAN PARTS CONTENT: 30%
MAJOR SOURCES OF FOREIGN PARTS CONTENT: MEXICO 28%

NOTE: PARTS CONTENT DOES NOT INCLUDE FINAL ASSEMBLY, DISTRIBUTION, OR OTHER NON-PARTS COSTS.

FOR THIS VEHICLE:
FINAL ASSEMBLY POINT:
SAN LUIS POTOSI, MEXICO
ENGINE OF ORIGIN:
MEXICO
TRANSMISSION: UNITED STATES

This label has been applied pursuant to Federal law. Do not remove this label. It is the property of the ultimate purchaser. It includes information for the National Highway Traffic Safety Administration's Pre-Delivery Service. Does not include dealer installed options or local taxes or license fees.

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ORDER NO CMW5D SALES CODE E
VEHICLE CODE TLU28
DEALER CODE
FINAL ASSEMBLY
SAN LUIS POTOSI, MEXICO

VIN 3GKALMEG5PL257777 REISSUE

DEALER TO WHOM DELIVERED
AUTONATION BUICK GMC HENDERSON
350 N GIBSON
HENDERSON, NV 89014-9999



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 | Fax: (775) 684-0260

Date: January 19, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Jenny Helton, 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 – HEARINGS DIVISION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Hearings Division requests authority to contract with current employee Carolyn Broussard through a gubernatorial appointment pursuant to NRS 616C.340, subsection 4 as a special appeals officer.

Additional Information:

Ms. Broussard is currently a Senior Staff Attorney for the Department of Employment, Training, and Rehabilitation. NRS 616C.340, subsection 4, allows the Governor to appoint one or more special appeals officers to conduct hearings and appeals. As a special appeals officer, Ms. Broussard would serve as an Administrative Law Judge adjudicating personnel cases and drafting findings of facts and conclusion of law. Ms. Broussard would be doing contract work on her own personal time. The Hearings Division intends to contract with Ms. Broussard on a part-time basis through August 2025.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: <u> <i>dh</i> </u>
ACTION ITEM: _____

Joe Lombardo
Governor



Jack Robb
Director

Matthew Tuma
Deputy Director

Dean A. Hardy, Esq.
Senior Appeals Officer

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Hearings Division

<http://hearings.nv.gov/>

Northern Nevada:
Hearing Office
1050 E. Williams St. Ste. 400
Carson City, Nevada 89701
(775) 687-8440 | Fax (775) 687-8441

Appeals Office
1050 E. William St. Ste. 450
Carson City, Nevada 89701
(775) 687-8420 | Fax (775) 687-8421

Southern Nevada:
Hearing Office
2200 S. Rancho Drive, Ste. 210
Las Vegas, Nevada 89102
(702) 486-2525 | Fax (702) 486-2879

Appeals Office
2200 S. Rancho Drive, Ste. 220
Las Vegas, Nevada 89102
(702) 486-2527 | Fax (702) 486-2555

Date: January 18, 2024

To: Governors Finance Office

From: Dean Hardy, Senior Appeals Officer
Department of Administration, Hearings Division

Subject: Authorization to Contract with a Current State Employee-Carolyn Broussard

The Department of Administration, Hearings Division is requesting to contract with a current employee, Carolyn Broussard, through a Gubernatorial Appointment as a Special Appeals Officer. This request was made in accordance with State Administrative Manual Chapter 0323.

Ms. Broussard's current role is Senior Staff Attorney for the Department of Employment, Training, and Rehabilitation (DETR), Ms. Broussard serves as counsel of record for DETR performing defense litigation. As a Special Appeals Officer, Ms. Broussard would serve as an Administrative Law Judge adjudicating personnel cases based on the issues, evidence, and testimony presented at the hearings. Ms. Broussard would also draft findings of facts and conclusion of law and issue to parties to the case. Ms. Broussard will be doing contract work on her own personal time and will be paid \$100.00 per hour for hours billed.

Please contact me if additional information or clarification is needed. My phone number is 702-486-2535 or I can be contacted via email at deanhardy@admin.nv.gov



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

Authorization to Contract with a Current Employee

Employee Information			
Employee Name:	Carolyn Broussard		
Employee ID Number:	86388		
Job Title:	Senior Staff Attorney with DETR		
Current Employee Agency:	DETR		
Current Class and Grade:	Class:	Unclassified	Grade:
Employment Dates:	From:	April 17, 2023	To: Present
Requesting Agency:	Department of Administration, Hearings and Appeals		
Vendor:	Carolyn Broussard		

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	Summarize scope of contract work. Adjudicate administrative personnel appeals and draft findings of facts and conclusion of law.
B	Document the employee's current job description. Special Appeals Officer role is to adjudicate the cases based on the issues, evidence, and testimony presented at the hearing. Also, to draft findings of fact and conclusion of law and issue to the parties in the case.
C	Explain how this differs from current State duties. The Special Appeals Officer is a licensed attorney serving as an Administrative Law Judge presiding over the hearings. The State duties for DETR are as counsel of record for DETR dealing with more defense litigation.
D	Explain why existing State employees within your agency cannot perform these duties. Special Appeals Officers are needed to handle these interlocal agreement hearings because the Appeals Officers that are hired by the Agency have an overwhelming caseload and do not have the time to handle other matters.

E	Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.
	Not applicable
F	List contractors' hourly rate.
	Special Appeals Officers contract for \$100.00 per hour.
G	List the range of comparable State employee rates.
	From \$110,000.00 to \$181,000.00 annually, these salaries are for unclassified FTE-1 positions for which the agency does not have the budgetary authority to fill as full-time position with benefits.
H	Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%).
	Not applicable
I	Document justification for hiring contractor.
	The Appeals Officers that we currently staff cannot take on the additional duties of handling the workload created by the interlocal agreements with other agencies. The Workers' Compensation caseload which is 1,800-2,000 cases per Appeals Officer make it impossible to absorb any additional cases.
J	Will the employee be collecting PERS at any time during the contract?
	No.
K	What is the duration of the contract with the current employee? (Include start and end date)
	Upon approval through August 31, 2025.
L	Will the current employee be working full time or part time? If part time, how many hours?
	Special Appeals Officers work part time, usually no more than 8-12 hours a month.
M	Is the employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No.

Comments – Provide any additional comments:

The vendor will perform hearings and draft decision on own personal time.

Approval for Authorization to Contract with a Current Employee:



Signature of Agency Head Authorizing Request

12/21/2023

Date

Purchasing Administrator Signature (if a Statewide Contract)

Date



Budget Analyst Signature

01/19/2024

Date

Clerk of the Board of Examiners Signature

Date

Secondary Employment Disclosure

Employee Name:

Carolyn Broussard

Employee ID number:

86388

Name of Secondary Employer:

(If self employed, enter the business name)

Department of Admin, HYS Division & ADR

Address of Secondary Employer:

2200 S. Rancho Dr. #220, LV, NV 89102
330 S. Mid St. #1060, LV, NV 89101

Secondary Employer Phone Number:

(702) 486-2527 (702) 671-4493

Describe the nature of the work performed by the secondary employer or self-employment business.

Preside over hearings & mediations

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.

Preside over hearings & mediations, issue decisions & prepare pleadings.

What is the work schedule for the secondary employment? (days and hours worked)

Hearings are conducted on Employee's own personal time

What is your State work schedule? (days and hours worked)

M-F - 8-5pm

If applicable, list provider agreements, brief scope of services, and associated State agencies.

Appointments & work with Governor & ADR office

Comments:

Employee:

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.

Appointing Authority (check one):

- 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 Signature and Date

11/29/23

Kristine Nelson

11.30.2023

Appointing Authority Signature and Date

NOTE: Approved with the understanding that all DETR employment deadlines are being met and backlogs are being addressed. Per DETR Policy, approval may be revoked at any time with proper notice.

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 | Fax: (775) 684-0260

Date: January 9, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Lesley Volkov, 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 Susan Brown to assist in the oversight of the Vegas Strong Resiliency capital improvement project for the Statewide Victim Resource Center for the Department of Health and Human Services, Division of Child and Family Services, through Master Service Agreement #23928 with HAT Limited Partnership dba Manpower.

Additional Information:

Ms. Brown retired from the Governor's Finance Office on July 19, 2022 and is receiving pension benefits. Her skills and experience are needed to assist the department with the oversight of processing the requests for reimbursements for project costs and ensuring subrecipients are compliant with ARPA Final Rule as it relates to capital improvement projects. The department contracted with Ms. Brown from August 8, 2023 through February 8, 2024 and requests to extend this contract from February 13, 2024 to August 8, 2024 on a part-time basis for approximately 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

January 8, 2024

MEMORANDUM

To: Lesley Volkov
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 Susan Brown who Manpower wants to hire. Susan retired from state service and is collecting PERS.

Manpower is aware that this request will need February BOE approval. She is currently working with Manpower and this is a six-month extension to her existing contract with Manpower.

If you have any questions, please contact me at 684-0185 or 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, MPA
Administrator

MEMORANDUM

DATE: January 4, 2024

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

FROM: Tiffany Greenmeyer, Deputy Administrator *36-*
Division of Child and Family Services

SUBJECT: Authorization to Contract with Former Employee – Susan Brown

Pursuant to NRS 333.705, subsection 1, the Division of Child and Family Services (DCFS) is requesting to continue to contract with a former state employee, Susan Brown, using Manpower Staffing Group, Inc. Ms. Brown was previously approved to contract with the Division from August 8, 2023 through February 8, 2024 at the August 8, 2023 Board of Examiners Meeting. This request would continue her services, unchanged, for an additional six months from February 9, 2024 through August 8, 2024.

Through this contract, she will continue to work part-time as needed, up to 20 hours per week, assisting with oversight of the construction oversight of the American Rescue Plan Act Funded Vegas Strong Resiliency capital improvement project, processing the requests for reimbursements for project costs and ensuring that subrecipients are compliant with the ARPA Final Rule as it relates to Capital Improvement Projects.

In her previous positions, Ms. Brown served in various fiscal management positions throughout the state of Nevada for the Division where she obtained specialized knowledge in financial management, budgeting and contracting. She has experience in performing all the duties required and has superior qualifications to meet the needs of this agency.

Ms. Brown anticipates continuing to contract part-time with the Department of Corrections. The Division of Child and Family Services will coordinate with the Department of Corrections to ensure that hours and work does not overlap or create a conflict.



**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:	Susan Brown		
Former Employee ID Number:	010942		
Former Job Title:	Director		
Former Employee Agency:	Governor's Finance Office		
Former Class and Grade:	Class:	U4930	Grade:
Former Employment Dates:	From:	July 14, 1997	To: July 19, 2022
Requesting Agency:	Division of Child and Family Services		
Vendor:	Manpower Temporary Services		

Please mark which of the following applies and complete Sections 'A' through 'M' below:	
X	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
	Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
A	Summarize scope of contract work. To perform monitor and oversight of the American Rescue Plan Act funds awarded to the Vegas Strong Resiliency Center for the capital improvement project for the Statewide Victim Resource Center.
B	Document former job description. Ms. Brown was responsible for collaborating with all executive branch agencies to produce the Governor's Executive budget as well as working in partnership with senior state leaders on budget guidelines based on the Governor's priorities. Additionally, she oversaw the day-to-day operation of the Budget and Internal Audit Divisions as well as Office of Project Management.
C	Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer? Ms. Brown is being hired due to her specialized knowledge in financial management, budgeting and contracting for 25 years in state service. She is knowledgeable in all statewide processes has experience in performing all the duties required and has superior qualifications to meet the needs of this agency.
D	Explain why existing State employees within your agency cannot perform this function.

E	Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.
F	N/A
F	List contractors' hourly rate.
G	\$78.40
G	List the range of comparable State employee rates.
H	Management Analyst IV 39/10 49.49
H	Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result?
I	Ms. Brown, employed as an MAIV, is not receiving employee benefits and the hourly rate was set at a rate based upon Ms. Brown's experience and expertise. The position was selected as it best aligns to the functions she will be performing for our particular project. The salary set at Corrections was reviewed and determined applicable for the work we are contracting her to do as well. It was established above the MAIV range due to her expertise and skills not only as a long-standing state employee and former GFO director, but also because of her specialized knowledge of project management, ARPA, and specialized knowledge and licensure regarding building permitting and real estate that is applicable to and makes her uniquely qualified for the project she is working on.
I	Document justification for hiring contractor.
J	With approval of \$86M in American Rescue Plan funding, additional resources in all financial and programmatic areas are needed to implement the newly approved behavioral health programs. In addition, the division has encountered significant vacancies and turnover and can benefit from experienced financial management staff to provide additional resources to effectively train staff and assist in agency financial operations.
J	Will the employee be collecting PERS at any time during the contract?
K	Yes
K	What is the duration of the contract with the former employee? (Include start and end date)
L	02/13/24 – 08/08/24
L	Will the former employee be working full time or part time? If part time, how many hours?
M	Part-time, up to 20 hours per week
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
M	No

Comments – Provide any additional comments:

This position is funded and obligated through work program 23FR314522 through American Rescue Plan Act Funds to provide monitoring and oversight of the capital improvement project through the Vegas Strong Resiliency Center in Las Vegas.

Ms. Brown anticipates continuing to contract part-time with the Department of Corrections. The Division of Child and Family Services will coordinate with the Department of Corrections to ensure that hours and work does not overlap or create a conflict.

Approval for Authorization to Contract with a Former Employee:

Heather Bugg

Signature of Agency Head Authorizing Request

1/8/24

Date

Linda DeLoach for Gideon Davis

Purchasing Administrator Signature (if a Statewide Contract)

01/08/24

Date

Lusley Valer

Budget Analyst Signature

1/9/24

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 | Fax: (775) 684-0260

Date: January 26, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Kelli Lay, Executive Branch Budget Officer
Governor's Finance Office
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

DEPARTMENT OF TRANSPORTATION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the department requests authority to contract with former employee Leah Atkinson to provide construction management services with Diversified Consulting Services.

Additional Information:

Ms. Atkinson retired from the department February 2, 2024 and will be receiving pension benefits. She has knowledge of overall federal, state, and local requirements, and is familiar with the needs of the department regarding field construction and office engineering. The department intends to contract with her from February 14, 2024 through February 13, 2026 on a full time basis.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: 
ACTION ITEM: _____



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

MEMORANDUM

January 5, 2024

To: State of Nevada Board of Examiners
From: Tracy Larkin Thomason, PE, Director
Subject: Authorization to Contract with a Former Employee – Leah Atkinson

SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with a retiring state employee, Leah Atkinson. Ms. Atkinson will be retiring from State service (NDOT) on February 2, 2024, and has completed her retirement paperwork process. She is currently employed by NDOT and will be hired by Diversified Consulting Services (DCS) on February 14, 2024. DCS will utilize Ms. Atkinson as an Office Engineer on SR 445, Contract 3947 and on I-80, Contract 3948.

BACKGROUND

On August 26, 2022, DCS submitted a proposal for NDOT RFP 284-22-040 to engage service providers to perform professional and technical engineering services to providing construction management augmentation to Construction Crew 913 for Contract 3947 and Contract 3948.

On November 30, 2022, NDOT entered into Agreement No. 284-22-040 with Diversified Consulting Services as the highest ranked firm responding to the RFP to provide construction augmentation services to Crew 913. DCS is currently actively working under this agreement until June 30, 2025.

Ms. Atkinson has had no influence or authority over the consultant procurement for this Crew 913 augmentation.

RECOMMENDATION

We respectfully request your consideration for approval of Diversified Consulting Services to engage Ms. Atkinson to fill the role as an Office Engineer as needed to augment NDOT Construction Crew 913 for Contract 3947 on SR 445 and Contract 3948 on I-80.

DocuSigned by:

Tracy Larkin Thomason

Tracy Larkin Thomason, P.E., Director



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

RECEIVED

JAN 09 2024

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Authorization to Contract with a Former Employee

Employee Information				
Former Employee Name:	Leah Atkinson			
Former Employee ID Number:	07833			
Former Job Title:	Supervisor I, Associate Engineer			
Former Employee Agency:	Nevada Department of Transportation			
Former Class and Grade:	Class:	Engineering 6.215	Grade:	36-10
Former Employment Dates:	From:	June 9, 1997	To:	February 2, 2024
Requesting Agency:	Nevada Department of Transportation (NDOT)			
Vendor:	Diversified Consulting Services, (DCS)			

Please mark which of the following applies and complete Sections 'A' through 'M' below:	
	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
X	Contract is with an entity (service provider) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
A	<p>Summarize scope of contract work.</p> <p>Augmentation of NDOT Construction Crew 913 under Agreement No. 284-22-040, Contracts 3947 and 3948. Role will include project office engineering, document control, stormwater inspection, and processing contractor progress payments.</p>
B	<p>Document former job description.</p> <p>Ms. Atkinson has 22 years of highway construction experience working for NDOT as an Engineering Technician and retiring as a Supervisor 1. Her duties have included construction survey, inspection, and material testing. For the last 10 years of her career, Ms. Atkinson managed a construction field office performing document control, progress pay estimates, certification tracking, AASHTOware Project data entry, B2Gnow payroll verifications, and managing the SharePoint data for construction projects. Over the last 4 years she has supervised consultants and NDOT staff and trained others to perform the same functions on multiple simultaneous projects. In addition to her office engineering responsibilities, Ms. Atkinson has also been the Water Pollution Control Manager (WPCM) on multiple projects, monitoring the best management practices of the contractors' stormwater pollution prevention plans (SWPPP) and ensuring compliance with the approved plans.</p>

C	Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?
	Yes, employee is being hired for her knowledge of overall Federal, State, and local agency requirements, policies, and procedures. She is very familiar with the needs of NDOT regarding field construction, office engineering, and will help NDOT meet its needs for engineering demands that that current staff cannot supply. All information related to NDOT is public information with no confidential/specialized processes.
D	Explain why existing State employees within your agency cannot perform this function.
	NDOT frequently contracts work and solicits requests for proposals to the consultant community due to limited resources at the Department.
E	Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.
	None, no relationships exist.
F	List contractors' hourly rate.
	\$36.00 per hour
G	List the range of comparable State employee rates.
	\$29.04 - \$43.19 (Grade 36)
H	Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result?
	Proposed contract rate is comparable to the average private consultant rate for Ms. Atkinson's qualifications and experience. There is no specific contract term for Ms. Atkinson's employment with Diversified Consulting Services.
I	Document justification for hiring contractor.
	Diversified Consulting Services has a need for someone with Ms. Atkinson's expertise and knowledge for both NDOT and other public works contracts that Diversified Consulting Services performs throughout Nevada.
J	Will the employee be collecting PERS at any time during the contract?
	Yes, due to retirement in February 2024.
K	What is the duration of the contract with the former employee? (Include start and end date)
	Start Date: February 14, 2024 End Date: February 13, 2026
L	Will the former employee be working full time or part time? If part time, how many hours?
	Full-time
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).
	No

Comments – Provide any additional comments:

Approval for Authorization to Contract with a Former Employee:

DocuSigned by:
Tracy Larkin Thomason 01/09/2024
Signature of Agency Head Authorizing Request Date

Purchasing Administrator Signature (if a Statewide Contract) Date

Kellin J. Lay 1/10/24
Budget Analyst Signature Date

Clerk of the Board of Examiners Signature Date

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2980	University of Nevada, Reno	\$12,127,761
2987	University of Nevada, Las Vegas	\$18,241,221
3011	College of Southern Nevada	\$8,598,882
	Total	\$38,967,864

Nevada System of Higher Education

System Administration
4300 South Maryland Parkway
Las Vegas, NV 89119-7530
Phone: 702-889-8426
Fax: 702-889-8492



System Administration
2601 Enterprise Road
Reno, NV 89512-1666
Phone: 775-784-4901
Fax: 775-784-1127

MEMORANDUM

Date: January 23, 2024

To: David Lenzner, Executive Budget Officer III
Michael Rankin, Executive Budget Officer II
Venus Fajota, Executive Budget Officer I
Governor's Finance Office, Budget Division

From: Robin Hager, Budget Director, NSHE

Subject: Request for Salary Adjustment Funds (FY 2024)

NSHE requests Salary Adjustment funds totaling \$38,967,864 for FY 2024 to date. Attached is a summary document identifying the amount requested for the following budgets:

- | | |
|---|--------------|
| • Budget Account 3011 – College of Southern Nevada | \$8,598,882 |
| • Budget Account 2987 – University of Nevada, Las Vegas | \$18,241,221 |
| • Budget Account 2980 – University of Nevada, Reno | \$12,127,761 |

Attached are templates completed for each budget account to demonstrate the requested Salary Adjustment funds.

Please note, several accounts remain under review. Requests for those accounts, if deemed eligible, will be submitted in a separate request. Additionally, NSHE may request redistribution of funds to other accounts with an FY 2024 budgetary shortfall due to the COLA effective in FY 2024.

If you have any questions regarding these requests, please let me know.

NSHE Salary Adjustment Funds Request Revised: FY 2024

Draft updated 1/8/24

Institution: University of Nevada, Reno

Budget Account: BA 2980

Phase 1: Eligibility Determination

- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if \$ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2024 L01	FY 2024 BOR	Difference
GF Appropriations	130,552,045	130,552,045	-
Enhancements	10,223,595	10,223,595	-
Salary Adjustment Funds		12,127,761	12,127,761
Budget Reductions to meet FY24 COLAs			-
Non GF Revenue	118,573,866	118,573,866	-
Total Revenue	259,349,506	271,477,267	12,127,761

	Budgeted Expenditures		
	FY 2024 L01	FY 2024 BOR	Difference
Professional Salary	125,652,906	136,480,005	10,827,099
Classified Salary	23,996,031	26,473,400	2,477,369
Enhancements	10,223,595	10,223,595	-
Vacancy Savings	(2,537,493)	(2,537,493)	-
LOA	5,926,181	3,527,068	(2,399,113)
Grad Assistant	10,248,863	9,139,162	(1,109,701)
Fringe	51,228,785	61,140,730	9,911,945
Fringe Budget Reduction			
Wages	1,885,607	2,018,732	133,125
Operating	32,725,031	34,902,191	2,177,160
Operating Budget Reduction		(9,890,123)	(9,890,123)
Capital Projects			-
Total Expenditures	259,349,506	271,477,267	12,127,761

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '23 - December '23	Projected (through FYE)	Total
Professional	64,375,710	65,945,987	130,321,697
Prof on Leave (if not obligated)			-
Classified (and Technologist)	12,494,631	11,877,717	24,372,348
Class/Tech on Leave (if not obligated)			-
Fringe	30,133,984	28,013,335	58,147,319
Obligated Health Insurance			-
Wages	1,284,417	323,910	1,608,328
LOAs	2,227,596	1,498,533	3,726,129
GAs and TAs	4,909,573	4,576,438	9,486,010
Med Residents			-
Subtotal: Personnel Costs	115,425,910	112,235,920	227,661,830

Excluded Personnel Expenses	Actual July '23 - December '23	Projected (through FYE)	Total
Vacancy Savings Used For Student Fee Shortfall	(2,386,809)	(2,386,809)	(4,773,619)
Vacancy Savings Used For COLA Shortfall	(4,945,062)	(4,945,062)	(9,890,123)
New FTE (not in L01)			-
Ad hoc/Reclassified Positions Net			-
LOAs	2,227,596	1,498,533	3,726,129
Wages	1,284,417	323,910	1,608,328
Additional LOAs, Wages (>budget)		(226,778)	(226,778)
Grad Students	4,909,573	4,576,438	9,486,010
Additional Grads (>budget)			-
Overtime	343,706	-	343,706
Terminal/Retirement Payouts	86,688	-	86,688
Other Add'l Payroll Adjust			-
Stipends (percent or fixed dollar)	851,108	825,476	1,676,584
Stipends - instruction FN10	(619,837)	(626,363)	(1,246,200)
Fringe on Excluded Expenses	1,261,859	1,067,844	2,329,703
Subtotal: Excluded Expenses	3,013,240	107,188	3,120,428
Total Eligible Personnel Expenses	112,412,670	112,128,732	224,541,402
L01 Approved Personnel Exp			198,340,229
Salary Adjustment Funds Needed			26,201,173
Allocated Salary Adjustment Funds			12,127,761
Salary Adjustment Request			12,127,761

NSHE Salary Adjustment Funds Request Revised: FY 2024

Date prepared: 1/4/24

Institution: University of Nevada, Las Vegas

Budget Account: BA 2987

Phase 1: Eligibility Determination

- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds

- if \$ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2024 L01	FY 2024 BOR	Difference
GF Appropriations	209,401,790	209,401,790	-
Salary Adjustment Funds		18,241,221	18,241,221
Budget Reductions to meet FY24 COLAs			-
Non GF Revenue	142,000,397	142,000,397	-
Total Revenue	351,402,187	369,643,408	18,241,221

	Budgeted Expenditures		
	FY 2024 L01	FY 2024 BOR	Difference
Professional Salary	172,515,129	192,885,987	20,370,858
Classified Salary	30,355,984	33,513,452	3,157,468
Vacancy Savings	(3,404,236)	(3,404,236)	-
LOA	12,063,534	4,352,872	(7,710,662)
Grad Assistant	18,199,888	14,677,449	(3,522,439)
Fringe	68,688,981	85,296,600	16,607,619
Fringe Budget Reduction			
Wages	1,886,947	1,958,423	71,476
Operating	51,095,960	40,362,861	(10,733,099)
Operating Budget Reduction			-
Capital Projects			-
Total Expenditures	351,402,187	369,643,408	18,241,221

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '23 - Dec '23	Projected (through FYE)	Total
Professional	91,772,146	92,141,284	183,913,430
Prof on Leave (if not obligated)			-
Classified (and Technologist)	16,156,784	14,730,565	30,887,349
Class/Tech on Leave (if not obligated)			-
Fringe	37,960,164	35,981,337	73,941,501
Obligated Health Insurance			-
Wages	941,341	2,028,885	2,970,226
LOAs	5,661,586	3,576,020	9,237,605
GAs and TAs	6,281,630	8,524,492	14,806,122
Med Residents	-	-	-
Subtotal: Personnel Costs	158,773,652	156,982,582	315,756,234

Excluded Personnel Expenses	Actual July '23 - Dec '23	Projected (through FYE)	Total
Capital Reductions *		(3,000,000)	(3,000,000)
New FTE (not in L01)			-
Ad hoc/Reclassified Positions			-
LOAs	5,661,586	3,576,020	9,237,605
Wages	941,341	2,028,885	2,970,226
Additional LOAs, Wages (>budget)		(5,998,453)	(5,998,453)
Grad Students	6,281,630	8,524,492	14,806,122
Additional Grads (>budget)			-
Overtime	1,100,407		1,100,407
Terminal/Retirement Payouts	22,168		22,168
Other Add'l Payroll Adjust			-
Stipends (percent or fixed dollar)	975,520	947,221	1,922,741
Stipends - instruction FN10 with fringe	(866,813)	(832,401)	(1,699,214)
Fringe on Excluded Expenses	3,293,178	2,835,213	6,128,391
Subtotal: Excluded Expenses	17,409,017	8,080,978	25,489,994
Total Eligible Personnel Expenses	141,364,635	148,901,605	290,266,240
L01 Approved Personnel Exp			268,155,858
Salary Adjustment Funds Needed			22,110,382
Allocated Salary Adjustment Funds			18,241,221
Salary Adjustment Request			18,241,221

NSHE Salary Adjustment Funds Request Revised: FY 2024

Draft updated 11/27/23

Institution: College of Southern Nevada

Budget Account: BA 3011

Phase 1: Eligibility Determination

- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds

- if \$ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2024 L01	FY 2024 BOR	Difference
GF Appropriations	97,157,407	97,157,407	-
Salary Adjustment Funds		8,598,882	8,598,882
Budget Reductions to meet FY24 COLAs	0	-	-
Non GF Revenue	44,992,544	44,992,544	-
Total Revenue	142,149,951	150,748,833	8,598,882

	Budgeted Expenditures		
	FY 2024 L01	FY 2024 BOR	Difference
Professional Salary	52,535,219	68,621,004	16,085,785
Classified Salary	14,798,949	19,178,254	4,379,305
Salary Savings	-	(2,873,373)	(2,873,373)
Vacancy Savings	(1,506,081)	(1,506,081)	-
LOA	10,929,500	11,075,763	146,263
Grad Assistant			-
Fringe	30,935,671	31,640,598	704,927
Fringe Budget Reduction			-
Wages	1,506,478	439,437	(1,067,041)
Operating	32,950,215	24,173,231	(8,776,984)
Operating Budget Reduction			-
Capital Projects			-
Total Expenditures	142,149,951	150,748,833	8,598,882

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '23 - October '23	Projected (through FYE)	Total
Professional	22,356,535	46,465,054	68,821,589
Prof on Leave (if not obligated)			-
Classified (and Technologist)	5,423,279	10,785,934	16,209,213
Class/Tech on Leave (if not obligated)			-
Fringe	9,169,374	18,905,596	28,074,970
Obligated Health Insurance			-
Wages	195,349	2,162,981	2,358,329
LOAs	1,419,414	10,571,420	11,990,835
GAs and TAs			-
Med Residents			-
Subtotal: Personnel Costs	38,563,951	88,890,984	127,454,936

Excluded Personnel Expenses	Actual July '23 - October '23	Projected (through FYE)	Total
Vacancy Savings Used For Student Fee Shortfall	(832,730)	(1,665,460)	(2,498,190)
New FTE (not in L01)			-
Ad hoc/Reclassified Positions	22,836	(4,486)	18,350
LOAs	1,419,414	10,571,420	11,990,835
Wages	195,349	2,162,981	2,358,329
Additional LOAs, Wages (>budget)	(106,768)	(320,305)	(427,074)
Grad Students			-
Additional Grads (>budget)			-
Overtime	138,127		138,127
Terminal/Retirement Payouts			-
Other Add'l Payroll Adjust			-
Stipends (percent or fixed dollar)	61,685	36,018	97,703
Stipends - instruction FN10 with fringe	442,639	683,973	1,126,612
Fringe on Excluded Expenses	194,353	309,465	503,818
Subtotal: Excluded Expenses	1,534,905	11,773,605	13,308,510
Total Eligible Personnel Expenses	37,029,046	77,117,379	114,146,425
L01 Approved Personnel Exp			96,763,758
Salary Adjustment Funds Needed			17,382,667
Allocated Salary Adjustment Funds			8,598,882
Salary Adjustment Request			8,598,882

NSHE FY24-25 COLAs by Budget Account

	FY24			FY25				
	12%	GF %	COLA	4%	7%	TOTAL	GF%	COLA
2977 NSHE - SPECIAL PROJECTS	85,994	100.00%	85,994	117,643	56,119	173,762	100.00%	173,762
2980 NSHE - UNIVERSITY OF NEVADA, RENO	22,070,538	54.95%	12,127,761	30,372,141	14,422,263	44,794,404	54.95%	24,614,525
2982 NSHE - UNR SCHOOL OF MEDICINE	2,667,947	84.37%	2,250,947	3,650,975	1,738,506	5,389,481	84.37%	4,547,105
2983 NSHE - INTERCOLLEGIATE ATHLETICS - UNR	96,007	100.00%	96,007	131,949	62,979	194,928	100.00%	194,928
2985 NSHE - STATEWIDE PROGRAMS - UNR	667,274	100.00%	667,274	913,932	434,893	1,348,825	100.00%	1,348,825
2986 NSHE - SYSTEM ADMINISTRATION	500,171	96.85%	484,416	686,836	326,915	1,013,751	96.85%	981,818
2987 NSHE - UNIVERSITY OF NEVADA, LAS VEGAS	30,056,386	60.69%	18,241,221	41,397,400	19,661,490	61,058,890	60.69%	37,056,640
2988 NSHE - INTERCOLLEGIATE ATHLETICS - UNLV	202,884	100.00%	202,884	278,017	132,540	410,557	100.00%	410,557
2989 NSHE - AGRICULTURAL EXPERIMENT STATION	585,445	75.24%	440,489	805,096	383,506	1,188,602	75.24%	894,304
2990 NSHE - COOPERATIVE EXTENSION SERVICE	587,392	68.38%	401,659	808,790	385,165	1,193,955	68.38%	816,426
2991 NSHE - SYSTEM COMPUTING CENTER	1,378,601	100.00%	1,378,601	1,893,241	900,915	2,794,156	100.00%	2,794,156
2992 NSHE - UNLV LAW SCHOOL	1,428,739	65.05%	929,395	1,966,187	935,849	2,902,036	65.05%	1,887,774
2994 NSHE - GREAT BASIN COLLEGE	1,791,173	74.39%	1,332,454	2,470,102	1,172,833	3,642,935	74.39%	2,709,979
2995 NSHE - WICHE ADMINISTRATION	19,282	100.00%	19,282	26,443	12,600	39,043	100.00%	39,043
2996 NSHE - UNIVERSITY PRESS	33,620	100.00%	33,620	45,770	21,913	67,683	100.00%	67,683
3001 NSHE - STATEWIDE PROGRAMS - UNLV	200,818	100.00%	200,818	275,417	131,245	406,662	100.00%	406,662
3002 NSHE - UNLV DENTAL SCHOOL	2,049,378	54.41%	1,115,067	2,819,790	1,332,167	4,151,957	54.41%	2,259,080
3003 NSHE - BUSINESS CENTER NORTH	234,522	100.00%	234,522	325,854	155,319	481,173	100.00%	481,173
3004 NSHE - BUSINESS CENTER SOUTH	200,060	100.00%	200,060	278,462	132,833	411,295	100.00%	411,295
3005 NSHE - NEVADA STATE COLLEGE	2,731,775	70.34%	1,921,531	3,759,390	1,790,429	5,549,819	70.34%	3,903,743
3010 NSHE - DESERT RESEARCH INSTITUTE	677,906	99.45%	674,178	929,918	442,732	1,372,650	99.45%	1,365,100
3011 NSHE - COLLEGE OF SOUTHERN NEVADA	12,381,400	69.45%	8,598,882	17,103,030	8,170,104	25,273,134	69.45%	17,552,192
3012 NSHE - WESTERN NEVADA COLLEGE	1,590,505	76.58%	1,218,009	2,193,997	1,042,415	3,236,412	76.58%	2,478,444
3014 NSHE - UNLV SCHOOL OF MEDICINE	3,819,724	90.40%	3,453,030	5,261,712	2,504,784	7,766,496	90.40%	7,020,912
3017 NSHE - PRISON EDUCATION PROGRAM	22,862	76.77%	17,551	31,156	14,915	46,071	76.77%	35,369
3018 NSHE - TRUCKEE MEADOWS COMMUNITY COLLEGE	4,323,511	74.06%	3,201,992	5,953,136	2,828,494	8,781,630	74.06%	6,503,675
3221 NSHE - HEALTH LABORATORY AND RESEARCH	150,961	100.00%	150,961	209,112	99,668	308,780	100.00%	308,780
TOTAL			59,678,602			121,263,952		121,263,952

Amount Approved per AB 522 sections 7 & 15

59,678,602

121,263,952

NEVADA
GAMING CONTROL BOARD

MEMORANDUM

DATE: January 4, 2024
TO: Board of Examiners
FROM: Kirk D. Hendrick, Chairman
Nevada Gaming Control Board
SUBJECT: Nevada Gaming Control Board Lodging Policy

The Nevada Gaming Control Board (Board) respectfully requests an exception to the reimbursement rate for specified lodging by employees of the Board.

Relevant to this request, the State Administrative Manual (SAM) (revised Nov. 14, 2023) contains the following provisions:

0006 Exceptions

Deviations from this manual are permitted only upon approval of the Board of Examiners for the agency requesting the exception.

0210 Travel Status

Employees in travel status shall receive reimbursement that matches the rates established by the U.S. General Services Administration (GSA) for the employee's primary destination.

...

Upon approval of the department head, agencies may make exceptions to the rate of reimbursement for lodging when the following applies:

...

2. Costs have escalated because of special events; lodging within prescribed allowances cannot be obtained nearby; and costs to commute to/from the nearby location exceed the cost saving from occupying less expensive lodging.

In-State Travel

1. 150% of the standard Continental United States (CONUS) federal per diem rate for non-surveyed sites, or

Out-of-State Travel

1. 175% of the federal per diem rate for surveyed out-of-state sites; or
2. 300% of the standard CONUS federal per diem rate for non-surveyed out-of-state sites.

On rare occasions, the Board encounters situations where an employee (or employees) performs work in remote state locations, such as West Wendover. To be fiscally prudent, the employee(s) sometimes stay up to two weeks straight and work through the weekend(s); rather than traveling home to Reno on Friday and then back to West Wendover on Monday.

The availability of lodging in remote locations is often quite limited. As a result, weekend lodging rates generally do not fall within the rates prescribed by SAM 0210. Additionally, while some remote locations may have nearby out-of-state lodging (e.g., Wendover, UT), such out-of-state

accommodations are not always safe for our state employees and some locations simply are not suitable for lodging.

Consequently, the Board respectfully requests the exception set forth below, which will allow approved employees to be reimbursed at a rate of up to 300% of the standard CONUS rate for non-surveyed sites for in-state travel during weekends. This amount will be consistent with the amount allowed for non-surveyed out-of-state sites.

In-State Travel

1. 150% of the standard Continental United States (CONUS) federal per diem rate for non-surveyed sites Monday through Thursday, or
2. 300% of the standard Continental United States (CONUS) federal per diem rate for non-surveyed sites Friday through Sunday.

Please contact me at your convenience with any questions at khendrick@gcb.nv.gov.

Information:

Scope: Nevada Gaming Control Board (Board) and Nevada Gaming Commission (Commission) employees, including Board members and Commission members. This policy specifically excludes travel by agents of the Board, Investigations Division, traveling for the purpose of investigating an applicant for approval under the Gaming Control Act which is paid from the Investigative Fund pursuant to NRS 463.331.

Purpose: To establish the process for out of the ordinary airfare reimbursement.

Policy:

- A. Out of the ordinary travel is travel by a Board or Commission employee traveling for Board or Commission business to and from a location other than the employee's principal duty station.
 - B. For out of the ordinary travel, it is the policy of the Board and Commission that rate of reimbursement for airfare will be the lesser of the:
 - 1. cost of airfare between Reno/Las Vegas, or
 - 2. the actual cost of the plane ticket.
 - C. Out of the ordinary travel will not be reimbursed by the Board or Commission if the travel was reimbursed by other means.
-

Procedure:

- A. For out of the ordinary travel, where the employee is traveling to and from a location other than the employee's principal duty station, the following procedures shall apply:
 - 1. The employee will use the employee's personal credit card and submit a claim for reimbursement.
 - 2. The employee will attach documentation of the actual plane ticket cost, along with documentation of what airfare to/from Reno/Las Vegas would have cost and request reimbursement for the lesser amount.
 - 3. The employee will attach a memo to the travel expense reimbursement claim, providing a justification and explaining the unusual circumstances surrounding travel.

For example:

- I. I am requesting reimbursement for the cost of a plane ticket to/from Reno/Las Vegas. I was in Billings, MT for personal business and not at my principal duty station – Reno, NV. I was required to travel from Billings to Las Vegas for the September NGC meeting. The cost of a plane ticket from Reno to Las Vegas was less than my ticket from Billings to Las Vegas, so I

am requesting reimbursement for the lesser amount (i.e., the cost of the ticket from Reno to Las Vegas).

The memo should also attest that the employee is not being reimbursed by other means. For example, if the employee is reimbursed for the employee's plane ticket by another employer, the employee cannot request to also be reimbursed by the state.

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 | Fax: (775) 684-0260

Date: January 22, 2024
To: Amy Stephenson, Clerk of the Board
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

GAMING CONTROL BOARD – NEVADA GAMING COMMISSION

Agenda Item Write-up:

Pursuant to NRS 281.160, the board requests approval of an agency specific travel policy regarding the amount of reimbursement allowed for travel.

Additional Information:

Based upon the State Administrative Manual, the attached policy will specifically define that employees are allowed to be reimbursed only at the lesser rate for personal-to-business travel.

Statutory Authority:

NRS 281.160 & SAM 0218

REVIEWED: *a*

ACTION ITEM: _____

NEVADA
GAMING CONTROL BOARD

MEMORANDUM

DATE: January 4, 2024
TO: Board of Examiners
FROM: Kirk D. Hendrick, Chairman
Nevada Gaming Control Board

SUBJECT: Nevada Gaming Control Board and Nevada Gaming Commission Airfare Policy

The Nevada Gaming Control Board (Board) respectfully requests to implement a policy limiting the amount of reimbursement allowed for airfare by employees of the Board and Nevada Gaming Commission (Commission).

Relevant to this request, the State Administrative Manual (SAM) (revised Nov. 14, 2023) contains the following provisions:

0006 Exceptions

Deviations from this manual are permitted only upon approval of the Board of Examiners for the agency requesting the exception.

0218 Travel Reimbursement

...

Employees may be reimbursed for the following:

1. Actual expenses incurred for parking or vehicle storage fees for private automobiles and commercial transportation costs (i.e., taxi, shuttle, etc.). Receipts are required.

The Board submits this request because there are rare "out of the ordinary" circumstances in which Board and Commission employees must travel to/from personal business in order to get to Board or Commission business. Therefore, based upon the SAM, the attached policy will specifically define that Board and Commission employees are allowed to be reimbursed only at the lesser rate for such personal-to-business travel.

Please contact me at your convenience with any questions at khendrick@gcb.nv.gov.

Attachment

Information:

Scope: Nevada Gaming Control Board (Board) and Nevada Gaming Commission (Commission) employees, including Board members and Commission members. This policy specifically excludes travel by agents of the Board, Investigations Division, traveling for the purpose of investigating an applicant for approval under the Gaming Control Act which is paid from the Investigative Fund pursuant to NRS 463.331.

Purpose: To establish the process for out of the ordinary airfare reimbursement.

Policy:

- A. Out of the ordinary travel is travel by a Board or Commission employee traveling for Board or Commission business to and from a location other than the employee's principal duty station.
- B. For out of the ordinary travel, it is the policy of the Board and Commission that rate of reimbursement for airfare will be the lesser of the:
 - 1. cost of airfare between Reno/Las Vegas, or
 - 2. the actual cost of the plane ticket.
- C. Out of the ordinary travel will not be reimbursed by the Board or Commission if the travel was reimbursed by other means.

Procedure:

- A. For out of the ordinary travel, where the employee is traveling to and from a location other than the employee's principal duty station, the following procedures shall apply:
 - 1. The employee will use the employee's personal credit card and submit a claim for reimbursement.
 - 2. The employee will attach documentation of the actual plane ticket cost, along with documentation of what airfare to/from Reno/Las Vegas would have cost and request reimbursement for the lesser amount.
 - 3. The employee will attach a memo to the travel expense reimbursement claim, providing a justification and explaining the unusual circumstances surrounding travel.

For example:

- i. I am requesting reimbursement for the cost of a plane ticket to/from Reno/Las Vegas. I was in Billings, MT for personal business and not at my principal duty station – Reno, NV. I was required to travel from Billings to Las Vegas for the September NGC meeting. The cost of a plane ticket from Reno to Las Vegas was less than my ticket from Billings to Las Vegas, so I

am requesting reimbursement for the lesser amount (i.e., the cost of the ticket from Reno to Las Vegas).

The memo should also attest that the employee is not being reimbursed by other means. For example, if the employee is reimbursed for the employee's plane ticket by another employer, the employee cannot request to also be reimbursed by the state.

LEASES SUMMARY

BOE #	LESSEE	LESSOR	AMOUNT
1.	DEPARTMENT OF ADMINISTRATION – PURCHASING DIVISION	GLOBAL EXPERIENCE SPECIALISTS, INC.	\$534,917
		This is an extension of an existing lease.	
	Term of Lease:	01/01/2024 – 12/31/2024	Located in Las Vegas
2.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – AGING AND DISABILITY SERVICES DIVISION – EARLY INTERVENTION SERVICES	O’FLAHERTY RENTALS, LLC	\$64,953
		This is an extension of an existing lease.	
	Term of Lease:	06/01/2024 – 05/31/2029	Located in Ely
3.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – AGING AND DISABILITY SERVICES DIVISION – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH – DIVISION OF CHILD AND FAMILY SERVICES	STUCKER LEGACY, LLC	\$7,918,268
		This is a new location.	
	Term of Lease:	03/01/2024 – 02/28/2029	Located in Reno
4.	NEVADA PHYSICAL THERAPY BOARD	CHEYENNE CORPORATE CENTER, LLC	\$217,457
		This is an extension of an existing lease.	
	Term of Lease:	03/01/2024 – 02/28/2029	Located in Las Vegas

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

For Budget Division Use Only	
Reviewed by:	<i>[Signature]</i>
Reviewed by:	<i>[Signature]</i> 1-20-24
Reviewed by:	

STATEWIDE THIRD SUBLEASE AMENDMENT INFORMATION

1. Agency: Department of Administration
 State of Nevada Purchasing Division
 515 E. Musser Street, Suite 300
 Carson City, Nevada 89701
 Judy Gates
 T: 775.684.0192 E: j.gates@admin.nv.gov

Remarks: This third sublease extends the lease term an additional six (6) months with one more option to renew. This warehouse is used to house and distribute PPE and testing supplies. This space also houses space for the State's Purchasing Surplus Program.

Exceptions/Special notes: Current Rate: \$0.85 a sf, Market Rate: \$1.10 a sf, pre-negotiated rate: \$0.88. This lease has been approved by Director Robb to move forward.

2. Lessee: Department of Administration, Public Works Division, Building and Grounds

3. Name of Lessor: Global Experience Specialists, Inc.

4. Address of Lessor: 7150 S. Tenaya Way, Suite 100
 Las Vegas, Nevada 89113

5. Property contact: Kris Truscott, Property Managaer T: 702.416.2999 E: ktruscott@ges.com
 Jon Massimino Lease/Contract Manager E: Jmassimino@viad.com

6. Address of Lease property: 7050 Lindell Road, Building B
 Las Vegas, Nevada 89118

a. Square Footage: Rentable
 Usable 101,310 Plus 1,542 sf of office space at no cost to the agency

b. Cost:

	cost per month	# of months in time frame	cost per year	time frame	improve ment cost per square foot	Base Rent cost per square foot	Actual cost per square foot
4%	\$ 89,152.80	6	\$ 534,916.80	January 1, 2024 - June 30, 2024	\$0.00	\$0.00	\$0.88
c. Total Lease Consideration:		6	\$ 534,916.80				
ONE OPTION TO RENEW							
0%	\$ 89,152.80	6	\$ 534,916.80	June 1, 2024- December 31, 2024	\$0.00	\$0.00	\$0.88
c. Total Renewal Consideration:		12	\$ 534,916.80				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Renewal terms: One option for an additional 6 month term			
f. Holdover notice:		# of Days required	30	Holdover terms: 25% / 90			
g. Term:		Six (6) months					
h. Pass-thrus/CAM/Taxes		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant					
i. Utilities:		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant					
j. Janitorial:		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant					
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:		Current Rate \$0.85, Market Rate \$1.10 pre-negotiated rate \$0.88					
m. Specific termination clause in lease:		Breach/Default lack of funding					
n. Lease will be paid for by Agency Budget Account Number:		1358					


STATEWIDE LEASE INFORMATION

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

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

Yes ___ No ___ Dec Unit _____

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

 _____
 Authorized Agency Signature Date
 5

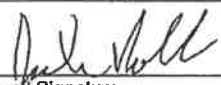
For Public Works Information:

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? *If Yes, explain....	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Does the Lessor have a current Nevada State Business License? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input checked="" type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV19831009024	Exp: 7/31/2024
g. Is the Lessor's Name the same as the Legal Entity Name? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
i. State of Nevada Vendor number:	T29038861	
j. Is this an Arms Length Transaction (No Conflict of Interest) **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

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

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

 _____
 Authorized Signature Date
 Public Works Division
 BM
 For Board of Examiners YES NO

Joe Lombardo
Governor



Jack Robb
Director

Matthew Tuma
Deputy Director

Wilfred J Lewis, Jr.
Administrator

Carson City Office:
515 East Musser Street, Suite 102
Carson City, Nevada 89701
Phone: (775) 684-4141

Buildings & Grounds Section
Phone: (775) 684-1800

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

Las Vegas Office:
2300 McLeod Street
Las Vegas, Nevada 89104
Phone: (702) 486-5115

Buildings & Grounds Section
Phone: (702) 486-4300

Date: January 25, 2024

To: Lesley Volkov, Executive Branch Budget Officer

From: Becky McCabe, Public Works Division, Leasing Services

Becky.mccabe@admin.nv.gov

Subject: Retroactive Memo for placement on the February Board of Examiners Meeting

This retroactive memo is for the Department of Administration, State Purchasing located at 7050 Lindell Road, Building B, Las Vegas, Nevada 89118.

This memo is a clarification for a retroactive start date of January 1, 2024 for the lease referenced above, which houses the Department of Administration, State Purchasing.

Due to a delay in receiving the space request from the agency and an unanticipated delay in receiving the certification of funding, due to a misunderstanding as to which BA would be paying for the sublease, this created a delay for submittal to BOE prior to the January 1, 2024 start date.

This lease is for placement on the February 13, 2024 Board of Examiner's meeting.

Thank You,

Becky McCabe

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 Health and Human Services
Aging and Disability Services Division, Early Intervention Services
3416 Goni Road, Building D 132- Fiscal
Carson City, Nevada 89706
Mariana Acevedo
T: 775-687-4210 E: macedvedo@adsd.nv.gov

Remarks: Lease Renewal - Approved to renew by Director Jack Robb

Exceptions/Special notes: No Tenant Improvements, No Market Data Available Rural Area

2. Lessee: Department of Administration, Public Works Division, Building and Grounds

3. Name of Lessor: O'Flaherty Rentals, LLC

4. Address of Lessor: 965 Pioche Highway
Ely, Nevada 89301

5. Property contact: John O'Flaherty
T: 775-289-2801 E: oflahertyph@gmail.com

6. Address of Lease property: 1500 Avenue F, Suite B
Ely, Nevada 89301

a. Square Footage: Rentable Usable 728

b. Cost:

	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
2.50%	\$ 1,029.75	12	\$ 12,357.00	June 1, 2024 - May 31, 2025	\$0.00	\$0.00	\$1.41
2.50%	\$ 1,055.49	12	\$ 12,665.88	June 1, 2025 - May 31, 2026	\$0.00	\$0.00	\$1.44
2.50%	\$ 1,081.88	12	\$ 12,982.56	June 1, 2026 - May 31, 2027	\$0.00	\$0.00	\$1.48
2.50%	\$ 1,108.93	12	\$ 13,307.16	June 1, 2027 - May 31, 2028	\$0.00	\$0.00	\$1.52
2.50%	\$ 1,136.65	12	\$ 13,639.80	June 1, 2028 - May 31, 2029	\$0.00	\$0.00	\$1.56

c. Total Lease Consideration: 60 \$ 64,952.40

d. Total Improvement Cost: \$0.00

e. Option to renew: Yes 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 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: No Market Data Average State Rate in Ely \$1.38 per SF

m. Specific termination clause in lease: Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number: 3208

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

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

Rigwe Robb

 Authorized Agency Signature

01/09/2024

_____ Date

3

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? *If Yes, explain....	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Does the Lessor have a current Nevada State Business License? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20071746105	Exp: 11/30/2024
g. Is the Lessor's Name the same as the Legal Entity Name? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
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:	T80692360	
j. Is this an Arms Length Transaction (No Conflict of Interest) **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

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

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

[Signature] _____ Date 1/9/24
 Public Works Division IN BEHALF OF KENT LEFEVRE
 RG For Board of Examiners YES NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Aging and Disability, Division of Child and Family Services, Division of Public Behavioral Health
 1000 N Division Suite 101
 Carson City, Nevada 89703
 Debi Reynolds
 T: 775-684-2214 E: dreynolds@dhhs.nv.gov

Remarks: New Lease for ADSD, DCFS, DPBH

Exceptions/Special notes: New lease of entire building with first option to purchase building. Approved by Director Jack Robb
 Negotiated at \$1.60 NNN Agencies will pay for Utilities, CAM, and Janitorial Services.

2. Lessee: Department of Administration, Public Works Division, Building and Grounds

3. Name of Lessor: Stucker Legacy, LLC

4. Address of Lessor: 1370 McKenzle Ave
 Los Altos, CA 94024

5. Property contact: Dan Stucker
 T: 650-248-7000 E: dan.stucker@yahoo.com

6. Address of Lease property: 10375 Professional Circle
 Reno, Nevada 89521

a. Square Footage: Rentable Usable 79,248

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Improve ment cost per square foot	Base Rent cost per square foot	Approximate cost per square foot	
\$126,796.80	12	\$ 1,521,561.60	March 1, 2024 - February 28, 2025	\$0.00	\$0.00	\$1.60	
2% \$129,332.73	12	\$ 1,551,992.76	March 1, 2025 - February 28, 2026	\$0.00	\$0.00	\$1.63	
2% \$131,919.39	12	\$ 1,583,032.68	March 1, 2026 - February 28, 2027	\$0.00	\$0.00	\$1.66	
2% \$134,557.77	12	\$ 1,614,693.24	March 1, 2027 - February 29, 2028	\$0.00	\$0.00	\$1.69	
2% \$137,248.93	12	\$ 1,646,987.16	March 1, 2028 - February 28, 2029	\$0.00	\$0.00	\$1.73	
c. Total Lease Consideration:		60	\$7,918,267.44				
d. Total Improvement Cost:							\$0.00
e. Option to renew:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	365	Renewal terms:	One Identical Term		
f. Holdover notice:		# of Days required	30	Holdover terms:	5%/90		
g. Term:		Five Year Term					
h. Pass-thrus/CAM/Taxes		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant					
i. Utilities:		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant					
j. Janitorial:		<input type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant	<input type="checkbox"/> 3 day <input 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:		Co Star Market Rate MG \$2.09					
m. Specific termination clause in lease:		Breach/Default lack of funding					
n. Lease will be paid for by Agency Budget Account Number:		See Attached RA billing breakdown					

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

DEES, ADSD + DPBT need to use return to work funds (\$18456)

[Signature] 1/10/2024
Authorized Agency Signature Date
staff count here

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? **If Yes, explain....	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Does the Lessor have a current Nevada State Business License? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20131679505	Exp: 2/29/2024
g. Is the Lessor's Name the same as the Legal Entity Name? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
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:	T32015303	
j. Is this an Arms Length Transaction (No Conflict of Interest) **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

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

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

[Signature] 1/10/24
Authorized Signature Date
Public Works Division
RG 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:	At 1-22-24
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE AMENDMENT INFORMATION

1. Agency: Nevada Physical Therapy Board
3291 North Buffalo Drive, Suite 100
Las Vegas, Nevada 89129
Charles Harvey
T: 702.876.5535 E: pted@govmail.state.nv.us

Remarks: This is a lease amendment to exercise our option to renew for one identical term. The current Market Rate is \$3.06 NNN. The current rate is \$2.25 and the renewal rate is \$2.32. This lease has been approved by Director Jack Robb to move forward.

Exceptions/Special notes: The Board would like to remain at this location.

2. Lessee: Department of Administration, Public Works Division, Building and Grounds

3. Name of Lessor: Cheyenne Corporate Center, LLC

4. Address of Lessor: c/o Pretium Property Management
PO Box 2155
Haddonfield, New Jersey 08033

5. Property contact: Alicia Kutcher
3291 N. Buffalo Drive, Suite 130
Las Vegas, Nevada 89129
T: 702.327.2868 E: alicia@cheyenne.center

6. Address of Lease property: 3291 North Buffalo Drive, Suite 100
Las Vegas, Nevada 89129

RECEIVED

JAN 10 2024

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

a. Square Footage: Rentable Usable 1,490

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Approx. cost per square foot	
3%	\$ 3,454.35	12	\$ 41,452.20	March 1, 2024 - February 28, 2025	\$0.00	\$0.00	\$2.32
2%	\$ 3,523.43	12	\$ 42,281.16	March 1, 2025 - February 28, 2026	\$0.00	\$0.00	\$2.36
3%	\$ 3,629.14	12	\$ 43,549.68	March 1, 2026 - February 28, 2027	\$0.00	\$0.00	\$2.44
3%	\$ 3,701.72	12	\$ 44,420.64	March 1, 2027 - February 29, 2028	\$0.00	\$0.00	\$2.48
2%	\$ 3,812.77	12	\$ 45,753.24	March 1, 2028 - February 28, 2029	\$0.00	\$0.00	\$2.56
c. Total Lease Consideration:		60	\$ 217,456.92				\$2.43

d. Total Improvement Cost: \$0.00

e. Option to renew: Yes No 365 Renewal terms: One (1) Identical Term

f. Holdover notice: # of Days required 30 Holdover terms: 5% / 90

g. Term: Five (5) years

h. Pass-thrus/CAM/Taxes Landlord Tenant

i. Utilities: Landlord Tenant

j. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see special notes)

k. Repairs: Major: Landlord Tenant Minor: Landlord Tenant

l. Comparable Area Market Rate Average: Current Market Rate \$3.06 NNN, Current Lease Rate \$2.25 Renewal Rate \$2.32

m. Specific termination clause in lease: Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number: B023

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

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

Director Hawley (Jan 10, 2024 12:28 PST) Jan 10, 2024
 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 type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Is the Lessor Exempt from obtaining a Business License? *If Yes, explain....	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
c. Does the Lessor have a current Nevada State Business License? **If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Foreign	
f. Nevada Business ID Number:	NV20171594552	Exp: _____
g. Is the Lessor's Name the same as the Legal Entity Name? *If No, explain....	<input type="checkbox"/> YES Corporation Service Company	<input type="checkbox"/> NO
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:	NA Board paid	
j. Is this an Arms Length Transaction (No Conflict of Interest) *If No, explain....	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

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

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

 1/10/24
 Authorized Signature Date
 Public Works Division
 BM For Board of Examiners YES NO

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	011	GOVERNOR'S OFFICE - STATE ENERGY OFFICE - OFFICE OF ENERGY	INNOVATIVE EMERGENCY MANAGEMENT, INC.	FEDERAL	\$242,100	
	Contract Description:	This is a new contract to provide a needs assessment and documentation to implement home rebate programs.				
		Term of Contract:	Upon Approval - 07/31/2024	Contract # 28741		
2.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC	OTHER: STATUTORY CONTINGENCY	\$96,000	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides ongoing outside counsel services for case number A-20-814296-C for Lopez vs. State of Nevada. This amendment increases the maximum amount from \$166,000 to \$262,000 due to the increased need for these services.				
		Term of Contract:	05/24/2021 - 12/31/2024	Contract # 24499		
3.	030	ATTORNEY GENERAL'S OFFICE - GRANTS UNIT	KATIE SNIDER DBA JUSTICE RESEARCH, LLC	FEDERAL	\$202,125	Sole Source
	Contract Description:	This is a new contract to provide data analysis to support Mobile Outreach Safety Teams, Forensic Assessment Services Triage Teams, and other deflection and diversion programs.				
		Term of Contract:	08/15/2023 - 12/31/2025	Contract # 28746		
4.	050	TREASURER'S OFFICE - STATE TREASURER	NEVADA GRANTLAB	GENERAL	\$249,575	
	Contract Description:	This is a new contract to provide assistance in registering eligible non-profit organizations to apply to receive payment pursuant to Assembly Bill 526 of the 2023 Legislative Session.				
		Term of Contract:	Upon Approval - 09/19/2025	Contract # 28691		
5.	051	TREASURER'S OFFICE - COLLEGE SAVINGS TRUST	DAVIDSON & BELLUSO, INC.	OTHER: TRANSFER FROM ENDOWMENT ACCOUNT	\$345,299	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17891 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.				
		Term of Contract:	Upon Approval - 01/31/2025	Contract # 28677		
6.	051	TREASURER'S OFFICE - COLLEGE SAVINGS TRUST	ESTIPONA GROUP	OTHER: TRANSFER FROM ENDOWMENT ACCOUNT	\$345,299	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.				
		Term of Contract:	Upon Approval - 01/31/2025	Contract # 28679		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
7.	051	TREASURER'S OFFICE - COLLEGE SAVINGS TRUST	THE ABBI AGENCY	OTHER: TRANSFER FROM ENDOWMENT ACCOUNT	\$345,299	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.				
		Term of Contract:	Upon Approval - 01/31/2025	Contract # 28678		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	DLR GROUP ARCHITECTURE & ENGINEERING, INC.	GENERAL	\$114,100	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Southern Desert Correctional Center - Perimeter Security Fence Upgrade CIP Project: CIP Project No. 23-M44; SPWD Contract No. 115705. This amendment increases the maximum amount from \$568,300 to \$682,400 due to additional civil engineering services for the perimeter fence upgrades.				
		Term of Contract:	09/12/2023 - 06/30/2027	Contract # 28078		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	CLARK & SULLIVAN CONSTRUCTORS, INC. DBA CLARK & SULLIVAN CONSTRUCTION	GENERAL 67% HIGHWAY 33%	\$181,200	Professional Service
	Contract Description:	This is a new contract to provide Owner Construction Manager At-Risk services for the Department of Public Safety - Advance Planning Headquarters Building CIP Project for the construction of a 161,900 square-foot building with a 550 space structured parking garage with connecting bridge, rooftop photovoltaic system, a fitness center, and a state forensic testing laboratory: CIP Project No. 23-P01; SPWD Contract No. 116151.				
		Term of Contract:	Upon Approval - 06/30/2027	Contract # 28646		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	CORE WEST, INC.	GENERAL	\$232,825	Professional Service
	Contract Description:	This is a new contract to provide Owner Construction Manager At-Risk services for the North Las Vegas State Veterans Home - Advance Planning CIP Project for the construction of a 128 bed, 120,000 square-foot skilled nursing facility: CIP Project No. 23-P04; SPWD Contract No. 116187.				
		Term of Contract:	Upon Approval - 06/30/2027	Contract # 28648		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	FRAME ARCHITECTURE, INC.	GENERAL	\$1,077,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Old State Armory Building - Advance Planning Seismic Retrofit and Remodel CIP Project to include schematic design, civil, structural, mechanical, electrical, and fire protection engineering, and construction documents for the structural seismic reinforcement and building rehabilitation utilizing energy efficient design solutions to provide office space for State agencies: CIP Project No. 23-P07; SPWD Contract No. 116195.				
	Term of Contract:	Upon Approval - 06/30/2027	Contract # 28732			
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	VAN WOERT BIGOTTI ARCHITECTS, A PROFESSIONAL CORPORATION	GENERAL 67% HIGHWAY 33%	\$14,000,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Department of Public Safety - Advance Planning Headquarters Building CIP Project to include schematic design, design development, construction documents, and architecture and engineering services throughout the planning phase of the project for the construction of a 161,900 square-foot building with a 550 space structured parking garage with connecting bridge, rooftop photovoltaic system, a fitness center, and a state forensic testing laboratory: CIP Project No. 23-P01; SPWD Contract No. 116246.				
	Term of Contract:	Upon Approval - 06/30/2027	Contract # 28749			
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DCNR AND AGRICULTURE CIP PROJECTS - NON-EXEC	SHAW ENGINEERING, LTD.	GENERAL	\$239,125	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Gallagher Fish Hatchery - Hatchery Water Intrusion Repairs CIP project to include schematic design, design development, construction documents, and construction administration services for the design and construction of structural repairs to the exterior walls, foundation, floor slab, and structural roof repair caused by the cracked, discontinuous structural beams at both the east and west walls, which support the roof framing: CIP Project No. 23-M06; SPWD Contract No. 116244.				
	Term of Contract:	Upon Approval - 06/30/2027	Contract # 28717			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF MOTOR VEHICLES CIP PROJECTS - NON-EXEC	AZTECH INSPECTIONS & TESTING, LLC	BONDS	\$634,980	Professional Service
	Contract Description:	This is a new contract to provide professional materials testing and inspection services for the Department of Motor Vehicles (DMV) - Silverado Ranch Facility CIP Project to include materials testing and inspections of commercial driver's license (CDL) and DMV buildings with Quality Assurance Agency inspections and rough site construction, soils, masonry, concrete, and structural testing for the construction of a full service DMV facility, including CDL services: CIP Project No. 23-C02; SPWD Contract No. 116152.				
		Term of Contract:	Upon Approval - 06/30/2027	Contract # 28644		
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$160,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Silver Sage Building - Roofing & HVAC System Replacement CIP Project to include design development, drawings, technical specifications, construction documents, bid review, bid submittal, construction administration services for the design and construction of a roofing system, and replacement of rooftop units and associated temperature controls: CIP Project No. 23-C37-1; SPWD Contract No. 116255.				
		Term of Contract:	Upon Approval - 06/30/2027	Contract # 28734		
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	KNIT	FEDERAL	(\$346,860)	Professional Service
	Contract Description:	This is the second amendment to the original contract which provides professional architectural/engineering services for the Las Vegas Detention Center - Forensics Facility Renovation CIP Project: CIP Project No. 23-A018; SPWD Contract No. 115222. This amendment decreases the maximum amount from \$776,000 to \$429,140 due to the cancellation of the project.				
		Term of Contract:	02/14/2023 - 12/31/2026	Contract # 27055		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
17.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - DIVISION OF TOURISM - TOURISM AND CULTURAL AFFAIRS ADMINISTRATION	KPS/3	OTHER: LODGING TAX	\$160,000	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing, and education services. This service agreement provides ongoing strategic planning, account management, creative development, media buying, public relations, event planning, and website and digital services.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28752		
18.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - TOURISM	GLOBAL MARKETING & SALES, INC.	OTHER: LODGING TAX	\$1,600,000	
	Contract Description:	The is a new contract to provide ongoing marketing services to promote Nevada in Latin America as a premier leisure and cultural tourism destination.				
		Term of Contract:	Upon Approval - 12/31/2027	Contract # 28738		
19.	111	DEPARTMENT OF INDIGENT DEFENSE SERVICES	DMSLAW, LLC	GENERAL	\$173,333	Professional Service
	Contract Description:	This a new contract to provide ongoing oversight, assessments, and reporting of the quality of indigent defense services.				
		Term of Contract:	Upon Approval - 06/30/2024	Contract # 28737		
20.	111	DEPARTMENT OF INDIGENT DEFENSE SERVICES	JOHN J. KADLIC, ATTORNEY AT LAW, LLC	GENERAL	\$173,333	Professional Service
	Contract Description:	This a new contract to provide ongoing oversight, assessments, and reporting of the quality of indigent defense services.				
		Term of Contract:	Upon Approval - 06/30/2024	Contract # 28744		
21.	111	DEPARTMENT OF INDIGENT DEFENSE SERVICES - PUBLIC DEFENDER'S OFFICE	LAW OFFICES OF KRISTINA WILDEVELD	GENERAL	\$200,000	Professional Service
	Contract Description:	This is a new contract to provide representation for complex litigation cases.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28687		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
22.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - APPLICATION SUPPORT	CARAHSOFT TECHNOLOGY CORPORATION	OTHER: INTERNAL SERVICE FUNDS	\$427,628	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-13299 which provides cloud services. This service agreement provides information technology service management solutions.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28759		
23.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES	ELKO COUNTY FIRE PROTECTION DISTRICT	OTHER: REVENUE	\$330,861	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing rack space at Elko Mountain, Rocky Point, Spruce Mountain, Ellen Dee Mountain, and Penn Hill Mountain located in Elko County, and Mary's Mountain located in Eureka County.				
		Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28492		
24.	300	DEPARTMENT OF EDUCATION - DATA SYSTEMS MANAGEMENT	SHI INTERNATIONAL CORP.	FEDERAL	\$240,000	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV18-417 which provides cloud services. This service agreement provides migration of legacy applications hosting the department's authentication system and SharePoint data from on-premises systems to a cloud infrastructure.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28318		
25.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - ADULT PROTECTIVE SERVICES & LONG-TERM CARE OMBUDSMAN	KPS/3	FEDERAL	\$168,280	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides an awareness campaign including research, development of an integrated media plan, and an update of marketing materials addressing abuse.				
		Term of Contract:	Upon Approval - 09/30/2024	Contract # 28658		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
26.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - ADULT PROTECTIVE SERVICES & LONG-TERM CARE OMBUDSMAN	SOCIAL ENTREPRENEURS, INC.	GENERAL 37% FEDERAL 63%	\$119,000	
	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 the facilitation of in-person and virtual training to improve staff safety when working with vulnerable persons.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28742		
27.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	HEALTH MANAGEMENT ASSOCIATES, INC.	FEE: HOSPITAL PROVIDER ASSESSMENT 25% FEDERAL 75%	\$595,000	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17885 which provides consulting, marketing, and education services. This service agreement provides project management, analysis, policy and report development, and technical assistance to enhance the state's system of care for children and youth. This contract is contingent upon IFC approval of work program #C66653.				
		Term of Contract:	01/01/2024 - 12/31/2024	Contract # 28439		
28.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	MILLIMAN, INC.	GENERAL 50% FEDERAL 50%	\$3,000,000	
	Contract Description:	This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28698		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
29.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	MANATT HEALTH STRATEGIES, LLC	GENERAL 50% FEDERAL 50%	\$3,000,000	
	Contract Description:	This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28696		
30.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	MERCER HEALTH & BENEFITS, LLC	GENERAL 50% FEDERAL 50%	\$3,000,000	
	Contract Description:	This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28697		
31.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	CHURCHILL COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$1,556,809	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28554		
32.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	ELKO COUNTY HUMAN & SOCIAL SERVICES	OTHER: REVENUE	\$2,927,049	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28558		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
33.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	HUMBOLDT COUNTY HUMAN SERVICES	OTHER: REVENUE	\$1,758,432	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28561		
34.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	LANDER COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$1,004,689	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28562		
35.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	LINCOLN COUNTY	OTHER: REVENUE	\$849,493	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28563		
36.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	LYON COUNTY HUMAN SERVICES	OTHER: REVENUE	\$2,079,644	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28564		
37.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	NYE COUNTY HEALTH AND HUMAN SERVICES	OTHER: REVENUE	\$2,091,742	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28566		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	PERSHING COUNTY	OTHER: REVENUE	\$1,190,017	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28567		
39.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	WASHOE COUNTY HUMAN SERVICES	OTHER: REVENUE	\$23,706,750	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28569		
40.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	WHITE PINE COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$999,748	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28570		
41.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	UPTODATE, INC.	GENERAL	\$199,666	
	Contract Description:	This is a new contract to provide user access to a drug information database to generate Nevada drug lists.				
		Term of Contract:	Upon Approval - 08/31/2027	Contract # 28754		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
42.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	SOCIAL ENTREPRENEURS, INC.	FEDERAL	\$112,244	
	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 Substance Use Response Working Group requirements.				
		Term of Contract:	Upon Approval - 09/30/2024	Contract # 28525		
43.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - PREVENTION/ TREATMENT OF PROBLEM GAMBLING	KPS/3	GENERAL	\$146,045	
	Contract Description:	This is a new service agreement under statewide contract 99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides marketing services related to gambling addiction.				
		Term of Contract:	01/01/2024 - 06/30/2025	Contract # 28589		
44.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNICABLE DISEASES	TRIYOUNG, INC.	OTHER: PHARMACUETICAL REBATES 20% FEDERAL 80%	\$173,700	Sole Source
	Contract Description:	This is a new contract to provide consulting services in support of CAREWare to merge eligibility processing with Clark County.				
		Term of Contract:	Upon Approval - 12/31/2025	Contract # 28634		
45.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	FIDELITY INFORMATION SERVICES, LLC	GENERAL 29% FEDERAL 71%	\$4,228,804	
	Contract Description:	This is the fifth amendment to the original contract which provides ongoing Electronic Benefit Transfer services for Supplemental Nutrition Assistance Program and Temporary Assistance for Needy Families benefits. This amendment increases the maximum amount from \$15,175,100 to \$19,403,904 due to the increased need for these services.				
		Term of Contract:	07/01/2018 - 06/30/2026	Contract # 20068		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
46.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - WELFARE FIELD SERVICES	SOCIAL ENTREPRENEURS, INC.	FEDERAL	\$394,186	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting and data analysis services. This service agreement provides consulting and data analysis to identify services needed to assist Nevada youth experiencing homelessness.				
		Term of Contract:	01/01/2024 - 06/30/2025	Contract # 28649		
47.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY ADMINISTRATION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS	GENERAL 45% FEDERAL 55%	\$518,725	Exempt
	Contract Description:	This is the second amendment to the original interlocal agreement which provides ongoing development of a child welfare training infrastructure and an intensive quality training and professional development system for undergraduate and graduate social work students. This amendment increases the maximum amount from \$7,600,386 to \$8,119,111 and adjusts the deliverables budget to remove unexpended prior year contract authority, add Families First Act transition and prevention-based training curriculum and funding, and fund cost of living adjustments for university contract dedicated staff. This contract is contingent upon IFC approval of work programs #C66311 and #C66312.				
		Term of Contract:	07/01/2020 - 06/30/2026	Contract # 23160		
48.	702	DEPARTMENT OF WILDLIFE - HERITAGE - NON-EXEC	STANTEC CONSULTING SERVICES, INC.	FEE: HABITAT CONSERVATION 50% OTHER: HERITAGE ACCOUNT 50%	\$129,875	Professional Service
	Contract Description:	This is a new contract to provide engineering designs, permitting, and planning for a permanent fish management structure at Third Creek in Incline Village.				
		Term of Contract:	Upon Approval - 01/31/2025	Contract # 28550		
49.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	BASIN ENGINEERING CORPORATION	FEE: SPORTSMEN REVENUE 75% FEDERAL 25%	\$178,664	Professional Service
	Contract Description:	This is a new contract to provide ongoing civil engineering design, surveying, and consulting services.				
		Term of Contract:	Upon Approval - 01/31/2028	Contract # 28674		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
50.	702	DEPARTMENT OF WILDLIFE - GAME MANAGEMENT	WASHINGTON STATE UNIVERSITY	FEDERAL	\$350,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing veterinary diagnostic services, necropsy services, and pathogen testing services from samples and tissues collected from Nevada's wildlife.				
		Term of Contract:	Upon Approval - 01/31/2028	Contract # 28316		
51.	702	DEPARTMENT OF WILDLIFE - HABITAT	LINCOLN COUNTY CONSERVATION DISTRICT	FEE: HABITAT CONSERVATION 44% FEDERAL 56%	\$56,500	Exempt
	Contract Description:	This is the third amendment to the original interlocal agreement which provides habitat improvement projects on private and public lands. This amendment increases the maximum amount from \$64,000 to \$120,500 due to the increased need for these services.				
		Term of Contract:	04/12/2021 - 12/31/2024	Contract # 23981		
52.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - WATER POLLUTION CONTROL	NEVADA WATER ENVIRONMENT ASSOCIATION, INC.	FEE: WASTEWATER OPERATOR	\$158,525	
	Contract Description:	This is a new contract to provide a qualified vendor to administer the certification of wastewater treatment system operators throughout the state.				
		Term of Contract:	Upon Approval - 02/13/2028	Contract # 28591		
53.	741	DEPARTMENT OF BUSINESS AND INDUSTRY - INSURANCE - INSURANCE REGULATION	PEARSON VUE, A BUSINESS OF NCS PEARSON, INC.	OTHER: FEES CHARGED TO APPLICANTS	\$460,000	
	Contract Description:	This is a new contract to provide ongoing testing services and administration of continuing education and pre-licensing programs.				
		Term of Contract:	09/01/2023 - 09/30/2027	Contract # 27878		
54.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO TRUCKEE MEADOWS COMMUNITY COLLEGE	OTHER: CAREER ENHANCEMENT PROGRAM	\$500,347	Exempt
	Contract Description:	This is a new interlocal agreement to provide workshops in Emergency Management for students to pursue entry-level public safety and healthcare certifications. This interlocal agreement is contingent upon IFC approval of work program #C66846.				
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28376		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
55.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	NEVADAWORKS	OTHER: REVENUE	\$170,875	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide reimbursement of shared costs for use of space in EmployNV Career Hubs in northern Nevada.				
		Term of Contract:	Upon Approval - 12/31/2027	Contract # 28459		
56.	950	PUBLIC EMPLOYEES' BENEFITS PROGRAM	CARRUM HEALTH	FEE: PREMIUM AND SUBSIDY REVENUE	\$4,000,000	
	Contract Description:	This is a new contract to provide a network of optional bundled payments, concierge services, and travel for procedures.				
		Term of Contract:	Upon Approval - 06/30/2028	Contract # 28745		

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: **28741**

Agency Name: STATE ENERGY OFFICE	Legal Entity Name: Innovative Emergency Management, Inc.
Agency Code: 011	Contractor Name: Innovative Emergency Management, Inc.
Appropriation Unit: 4868-33	Address: 2801 Slater Road, Suite 200
Is budget authority available?: Yes	City/State/Zip: Morrisville, SC 27560
If "No" please explain: Not Applicable	Contact/Phone: Allison Veillette 800-977-8191
	Vendor No.: T27044427
	NV Business ID: NV20101077613

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 #: 01GO-S2580 JS

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2024**

Contract term: **180 days**

4. Type of contract: **Contract**

Contract description: **Needs Assesement**

5. Purpose of contract:

This is a new contract to provide a needs assessment and documentation to implement home rebate programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$242,100.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The U.S. Department of Energy has issued grant opportunities for home rebates of energy efficiency retrofits through the Inflation Reduction Act which requires the standup of a large and complicated new program.

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

The GOE does not have sufficient staffing to stand up or administer a program of this size and requires additional assistance to best serve Nevada.

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):

Home Performance Coalition
Innovative Emergencyt Mgmt

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #01GO-S2580, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 12/13/2023 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:

10/12/21-6/30/25-Governors Finance Office-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	bmcDani	01/08/2024 11:16:27 AM
Division Approval	nmann	01/08/2024 12:12:41 PM
Department Approval	ssands	01/08/2024 12:15:31 PM
Contract Manager Approval	ssands	01/08/2024 12:15:34 PM
Budget Analyst Approval	mBro28	01/22/2024 16:07:58 PM
BOE Agenda Approval	stillley	01/22/2024 16:44:49 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 24499	Amendment Number: 3	
Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC	Contractor Name: WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC
Agency Code: 030	Address: 6385 South Rainbow Boulevard Ste400	
Appropriation Unit: 1030-04	City/State/Zip: Las Vegas, NV 89118	
Is budget authority available?: Yes	Contact/Phone: 702-938-3844	
If "No" please explain: Not Applicable	Vendor No.: T29044342	
	NV Business ID: NV20051683659	

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 % Statutory Contingency

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2024**

Contract term: **3 years and 222 days**

4. Type of contract: **Contract**

Contract description: **Outside Counsel**

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing outside counsel services for case number A-20-814296-C for Lopez vs. State of Nevada. This amendment increases the maximum amount from \$166,000 to \$262,000 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:	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
a. Amendment 1:	\$60,000.00	\$60,000.00	\$100,000.00	Yes - Action
b. Amendment 2:	\$66,000.00	\$66,000.00	\$66,000.00	Yes - Info
2. Amount of current amendment (#3):	\$96,000.00	\$96,000.00	\$162,000.00	Yes - Action
3. New maximum contract amount:	\$262,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

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

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

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

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	01/08/2024 10:50:26 AM
Division Approval	jhoba2	01/08/2024 10:50:32 AM
Department Approval	jhoba2	01/08/2024 10:50:48 AM
Contract Manager Approval	tlyon1	01/09/2024 15:27:17 PM
Budget Analyst Approval	vmilazz1	01/22/2024 12:20:51 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: **28746**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: Katie Snider
Agency Code: 030	Contractor Name: Katie Snider DBA Justice Research, LLC
Appropriation Unit: 1040-15	Address: 18346 SE Tibbetts Court
Is budget authority available?: Yes	City/State/Zip: Gresham, OR 97030
If "No" please explain: Not Applicable	Contact/Phone: Katie M. Snider 775 770 7321
	Vendor No.: PENDING
	NV Business ID: NV20232979538

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 **08/15/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **Yes**

If "Yes", please explain

Due to required changes to the Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) grant, our office will be contracting directly with Dr. Snider, Justice Research LLC for the remainder of the grant.

3. Termination Date: **12/31/2025**

Contract term: **2 years and 139 days**

4. Type of contract: **Contract**

Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide data analysis to support Mobile Outreach Safety Teams, Forensic Assessment Services Triage Teams, and other deflection and diversion programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$202,125.00**

Other basis for payment: \$3,675.00 (August 15, 2023, through August 31, 2023); \$7,350.00 (per Month for 27 months)

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide data analysis to support MOST, FASTT, and other deflection and diversion programs with data collection, analysis, and dissemination, and data consolidation and delivery to program evaluators for these programs and the COSSUP grant.

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 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: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 231204

Approval Date: 12/19/2023

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?

No b. If "No", please explain:

DBA

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

Yes

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

Yes

19. Agency Field Contract Monitor:

John Dekoekoeke, Grants Unit Manager Ph: (775) 684-1110

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	01/09/2024 14:36:57 PM
Division Approval	jhoba2	01/09/2024 14:37:00 PM
Department Approval	jhoba2	01/09/2024 14:37:02 PM
Contract Manager Approval	tlyon1	01/09/2024 15:23:34 PM
Budget Analyst Approval	vmilazz1	01/19/2024 18:31:57 PM
BOE Agenda Approval	vmilazz1	01/19/2024 18:32:02 PM
BOE Final Approval	Pending	

AARON D. FORD
Attorney General

CRAIG A. NEWBY
First Assistant Attorney General

CHRISTINE JONES BRADY
Second Assistant Attorney General



TERESA BENITEZ-
THOMPSON
Chief of Staff

LESLIE NINO PIRO
General Counsel

HEIDI PARRY STERN
Solicitor General

STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street
Carson City, Nevada 89701

MEMORANDUM

Date: January 2, 2024

To: Amy Stephenson, Director, Governor's Finance Office

Thru: Bud Milazzo, Executive Branch Budget Officer, Governor's Finance Office

From: Jessica L. Hoban, Chief Financial Officer, Office of the Attorney General

Subject: Retroactive Contract

Attached is a new contract between the Nevada Office of the Attorney General (OAG) and Dr. Katie M. Snider dba Justice Research, LLC.

Due to required changes to the Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) grant, the OAG will be contracting directly with Dr Snider, Justice Research LLC for the remainder of the grant.

Based on these requirements, the OAG requests the BOE's consideration for the approval of this retroactive contract. Please contact me if you have any questions or if I can be of any assistance.

Sincerely,

Jessica L. Hoban, OAG Chief Financial Officer



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#:	231204 (2)

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

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

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:	Office of the Attorney General (OAG)	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	John Dekoekkoek, Grants Unit Manager	775-684-1110	jcdekoekkoek@ag.nv.gov
	Jean Booth, Grants Project Analyst III	775-684-1274	jaboath@ag.nv.gov

1b	Vendor Information:	
	Vendor Name:	Katie M. Snider, Ph. D dba Justice Research, LLC
	Contact Name:	Katie M. Snider
	Complete Address: City, State, and Zip Code	18346 SE Tibbetts Court Gresham, OR 97030
	Telephone Number:	775-770-7321
	Email Address:	kknider@justiceresearch.org

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:	X	No:
	Contract:	Start Date:	08/15/2023	End Date: 12/31/2025

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	Federal COSSUP Grant # 15PBJA-21-GG-04508-COAP

Other (Explain):	
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Purchasing Use Only:	
Approval #:	231204 (a)

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$202,125.00

Provide a description of work/services to be performed or services with goods to be purchased:

The State of Nevada has been awarded Comprehensive Opioid, Stimulant, and Substance Use Program (COSSUP) funding through the Bureau of Justice Assistance to address substance misuse in Nevada through the enhancement of existing programs such as Forensic Assessment Services Triage Teams (FASTT), Mobile Outreach Safety Teams (MOST), the provision of naloxone, and through the development and implementation of new programming.

The COSSUP award includes funding for the goal of “comprehensive, real-time, regional information collection, analysis, and dissemination.” The need for comprehensive data collection to improve program delivery and outcomes has been widely recognized by the Northern Nevada Health Region, State agencies, and by FASTT and MOST program partners. Efforts to improve data collection and dissemination for these programs have been ongoing. Under the COSSUP award, funds have been allocated to contract a data analyst who can support MOST, FASTT, and other deflection and diversion programs with data collection, analysis, and dissemination, and who can support data consolidation and delivery to program evaluators for these programs and the COSSUP grant. Under this contract, Justice Research, LLC has been providing data analysis and technical assistance throughout the first year of the COSSUP award through a contract with a subgrantee that was awarded by the Office of the Attorney General (OAG). Due to required changes in the COSSUP award, the OAG will now contract directly with Justice Research, LLC for the ongoing data analysis and technical assistance as described in this Scope of Work throughout the remaining term of the COSSUP award as defined in this contract.

The following table shows a detailed description of the work that needs to continue on this award.

<i>Program Activities</i>	<i>Data Analyst Responsibilities</i>
<i>#1 – Prebooking or post-booking treatment alternative-to-incarceration programs that serve individuals at high risk for overdose or substance abuse.</i>	<i>Work with FASTT teams to monitor data collection, develop standardized quarterly reports, provide reports back to programs to include progress reporting and actionable insights.</i>
<i>#2 – Law enforcement and other first responder diversion programs. A variety of multidisciplinary overdose prevention, response, and diversion and referral models, led by law enforcement and other first responders, have emerged in communities throughout the nation.</i>	<i>Continue working with MOST teams to develop standardized data collection tools, monitor data collection, provide quarterly reports back to programs to include progress reporting and actionable insights.</i>

	<p>#3 – <i>Prevention based education opportunities in schools and community.</i></p>	<p><i>Support Education and Prevention Programs that are active through the grant. Address data collection needs through development, refinement, and monitoring of data collection tools and processes as needed.</i></p>	
	<p>#4 – <i>Comprehensive, real-time, regional information collection, analysis, and dissemination.</i></p>	<p><i>Identify opportunities for data dissemination. Publish COSSUP data newsletters semi-monthly, that include updates on FASTT, MOST, ODMAP, and other programs addressing the COSSUP mission.</i></p>	
	<p>#5 – <i>Support program development and collaboration.</i></p>	<p><i>Work with Nevada Rural Hospital Partners’ (NFHP) Regional Behavioral Health Coordinator (RBHC) to develop and publish comprehensive program handbooks for FASTT and MOST programs. Work with NRHP RBHC to coordinate monthly meetings for FASTT and MOST; conduct outreach and provide data TA for developing FASTT and MOST programs in Nevada.</i></p>	
	<p>#6 – <i>Attend regional and national conferences. Present at regional and national conferences.</i></p>	<p><i>Attend National COSSUP conferences in 2024 and 2025. Dates are TBD. Submit proposals to present; attend additional conferences focused on substance use, mental health, and criminal justice.</i></p>	
	<p>#7 – <i>Timely reporting and technical assistance reporting.</i></p>	<p><i>Work with OAG to produce stakeholder reports and facilitate stakeholder access to updated data including program activities and successes. Draft summaries for stakeholders as requested. Support OAG and other COSSUP subgrantees and/or programs as requested to collect and consolidate quarterly PMT reports.</i></p>	

<p>3</p>	<p>What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?</p> <p><i>These services require expertise in data analysis, research, program creation, and program evaluation. Dr. Snider was chosen for her expertise in these fields and is uniquely positioned to provide this type of service for this grant. Dr. Snider was chosen for this grant by a sub-awardee of the COSSUP grant and was contracted by the sub-awardee to perform these services. Dr. Snider has been part of this COSSUP grant project since Nevada received the award and is extensively familiar with the details and has provided exemplary service and expertise to this point.</i></p> <p><i>Due to grant management issues on the part of the sub-awardee, the Office of the Attorney General (OAG) has determined that the original sub-awardee can no longer be funded. However, the services provided by Dr. Snider are critical to the data collection and evaluation of the COSSUP grant. To maintain compliance with the federal grant terms and conditions, the OAG needs to ensure the services provided by Dr. Snider continue throughout the term of the grant. If the OAG is not able to contract directly with Dr. Snider for these services for the remainder of the grant term, the OAG and the State of Nevada, may be penalized for not completing grant deliverables which could also jeopardize future funding.</i></p>
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<p>4</p>	<p>Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:</p>
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Dr. Snider has been involved with the COSSUP grant since the OAG received the award and has been critical to the success of the project up to this point. The COSSUP grant is currently scheduled for a maximum of 2 more years. If the OAG would be required to complete an RFP for these services, it will take more than 1 year to get a new vendor chosen and incorporated into the COSSUP grant project. This type of delay would be a disaster for the project. The delay would adversely affect current performance measurement and program evaluation metrics, which could cause a delay providing effective services to those that suffer from Substance Use Disorder (SUD) throughout the State, and could subject the OAG to penalties for grant performance and jeopardize future grant funding.

	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?		
<i>Timing. The OAG was recently made aware that to continue to provide these vital services on behalf of the COSSUP grant, it was necessary for the OAG to directly contract with Dr. Snider, Justice Research, LLC.</i>			

Purchasing Use Only:	
Approval #:	231204 (C)

	Has the agency purchased these services/services with goods in the past? Check One:				Yes	No
	<p><i>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></i></p>					X
6	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for these services/services with goods, the following information must be provided along with the CETS contract number(s) associated with each:</i>					
	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>If a new vendor were to be chosen to perform these services, it could take up to 1-year to get the new vendor incorporated into the project. This type of delay would be a disaster for the project. It would cause delays in our current performance measures and program evaluation metrics, which could cause a delay providing effective services to those that suffer from Substance Use Disorder (SUD). All of which could possibly jeopardize grant funding.</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>The price that has been negotiated for these services is either equal to, or below, the market rate. This is based on online research that has been done. Therefore, we believe that the negotiated price and the services being provided are a great value for the state and will contribute to the successful completion of the COSSUP grant.</i></p>	

9	Will this purchase obligate the State to this vendor for future purchases? Check One:				Yes	No
	<p><i><u>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u></i></p>					X
a. <i>If yes, please provide details regarding future obligations or needs.</i>						

<i>Purchasing Use Only:</i>	
Approval #:	2312040

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.

APPROVED
By John Dekoekkoek at 3:41 pm, Nov 17, 2023

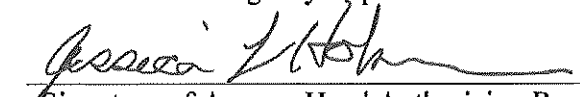
Signature of Agency Representative Initiating Request

John Dekoekkoek

11/17/2023

Print Name of Agency Representative Initiating Request

Date


Signature of Agency Head Authorizing Request

Jessica L Hoban

11/17/2023

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.

NOTE: <i>If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.</i>	<input type="checkbox"/>
--	--------------------------

Approved by:


Administrator, Purchasing Division or Designee

12/19/23
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: **28691**

Agency Name: TREASURER - TREASURER'S OFFICE	Legal Entity Name: Nevada GrantLab
Agency Code: 050	Contractor Name: Nevada GrantLab
Appropriation Unit: 1080-25	Address: 610 S. 7th St.
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89101
If "No" please explain: Not Applicable	Contact/Phone: Miles Dickson 702.720.3141
	Vendor No.: T29046878
	NV Business ID: NV20212205949

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.

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

Agency Reference #: RFP # 05TO-S2495 PSMs Initials: tb

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/19/2025**

Contract term: **1 year and 230 days**

4. Type of contract: **Contract**

Contract description: **Non-profits**

5. Purpose of contract:

This is a new contract to provide assistance in registering eligible non-profit organizations to apply to receive payment pursuant to Assembly Bill 526 of the 2023 Legislative Session.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$249,575.00**

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 Assembly Bill 526, 370 Nevada non-profit organizations have been identified as eligible to apply for a set percentage of unspent American Rescue Plan Act funds delivered to the State. The State Treasurer's Office is responsible for the administration and distribution of funding to the Identified Organizations.

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

Per Assembly Bill 526, the State Treasurer's Office is tasked with hiring a consultant with requisite technical expertise to assist the Office in registering eligible nonprofit organizations including, without limitation, notifying eligible nonprofit organizations of the requirement to register to receive a payment.

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):

The Artemis Global Group, Inc
Nevada GrantLab
Geosyntec Consultants, Inc

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #05TO-S2495, and in accordance with NRS 333, the selected vendor was the only responsive proposal received. The proposal was reviewed and deemed acceptable by an independently appointed evaluation committee.

d. Last bid date: 10/16/2023 Anticipated re-bid date: 10/16/2024

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

March-April 2023
Department of Health and Human Services
Service satisfactory

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

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

Not Applicable

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

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	Ihoove1	12/29/2023 09:17:24 AM
Division Approval	Ihoove1	12/29/2023 09:17:27 AM
Department Approval	Ihoove1	12/29/2023 09:17:31 AM
Contract Manager Approval	Ihoove1	01/22/2024 17:23:25 PM
Budget Analyst Approval	stilley	01/22/2024 18:05:11 PM
BOE Agenda Approval	stilley	01/22/2024 18:05:13 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28677**

Agency Name:	TREASURER - COLLEGE SAVINGS TRUST	Legal Entity Name:	DAVIDSON & BELLUSO, INC.
Agency Code:	051	Contractor Name:	DAVIDSON & BELLUSO, INC.
Appropriation Unit:	1092-20	Address:	3753 Howard Hughes Pkwy Suite 200
Is budget authority available?:	Yes	City/State/Zip:	Las Vegas, NV 89169
If "No" please explain:	Not Applicable		
		Contact/Phone:	Mike Barcia 602.277.1185
		Vendor No.:	T27043741
		NV Business ID:	NV20181600787

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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2025**

Contract term: **1 year**

4. Type of contract: **Contract**

Contract description: **Marketing**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17891 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$345,299.00**

Other basis for payment: As invoiced by the Contractor and approved by the State. Not to exceed \$100,000 FY24 College Savings, \$30,000 FY24 Financial Literacy, \$215,299 FY25 College Savings Marketing

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):

Estipona Group
Davidson Belluso
The Abbi Agency

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:
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	01/05/2024 16:51:38 PM
Division Approval	lhoove1	01/05/2024 16:51:41 PM
Department Approval	lhoove1	01/05/2024 16:51:45 PM
Contract Manager Approval	jveit	01/08/2024 14:39:11 PM
Budget Analyst Approval	stilley	01/23/2024 08:54:56 AM
BOE Agenda Approval	stilley	01/23/2024 08:54:59 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28679**

Agency Name: TREASURER - COLLEGE SAVINGS TRUST	Legal Entity Name: Estipona Group
Agency Code: 051	Contractor Name: Estipona Group
Appropriation Unit: 1092-20	Address: P.O. Box 10606
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89510
If "No" please explain: Not Applicable	Contact/Phone: Edward Estipona 775.624.8720
	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.

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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2025**

Contract term: **1 year**

4. Type of contract: **Contract**

Contract description: **Marketing**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$345,299.00**

Other basis for payment: As invoiced by the Contractor and approved by the State. Not to exceed \$100,000 FY24 College Savings, \$30,000 FY24 Financial Literacy, \$215,299 FY25 College Savings Marketing

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):

The Abbi Agency
Davidson Belluso Inc
Estipona Group

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	lhoove1	01/05/2024 16:48:17 PM
Division Approval	lhoove1	01/05/2024 16:48:21 PM
Department Approval	lhoove1	01/05/2024 16:48:24 PM
Contract Manager Approval	jveit	01/06/2024 11:32:25 AM
Budget Analyst Approval	stilley	01/22/2024 18:24:31 PM
BOE Agenda Approval	stilley	01/22/2024 18:24:34 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: **28678**

Agency Name: TREASURER - COLLEGE SAVINGS TRUST	Legal Entity Name: The Abbi Agency
Agency Code: 051	Contractor Name: The Abbi Agency
Appropriation Unit: 1092-20	Address: 1385 Haskell Street, Suite A
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89509
If "No" please explain: Not Applicable	Contact/Phone: Patrick Whitaker 775.323.2977
	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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2025**

Contract term: **1 year**

4. Type of contract: **Contract**

Contract description: **Marketing**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing and education services. This service agreement provides branding, marketing, and promotion services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$345,299.00**

Other basis for payment: As invoiced by the Contractor and approved by the State. Not to exceed \$100,000 FY24 College Savings, \$30,000 FY24 Financial Literacy, \$215,299 FY25 College Savings Marketing

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):

Davidson Belluso Inc
Estipona Group
The Abbi Agency

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	Ihoove1	01/05/2024 16:53:10 PM
Division Approval	Ihoove1	01/05/2024 16:53:13 PM
Department Approval	Ihoove1	01/05/2024 16:53:15 PM
Contract Manager Approval	jveit	01/06/2024 11:33:36 AM
Budget Analyst Approval	stilley	01/22/2024 18:21:28 PM
BOE Agenda Approval	stilley	01/22/2024 18:21:30 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: 28078	Amendment Number: 1
Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: DLR GROUP ARCHITECTURE & ENGINEERING, INC.
Agency Code: 082	Contractor Name: DLR GROUP ARCHITECTURE & ENGINEERING, INC.
Appropriation Unit: 1550-47	Address: 6225 N. 24TH ST., STE. 250
Is budget authority available?: Yes	City/State/Zip: PHOENIX, AZ 85016
If "No" please explain: Not Applicable	Contact/Phone: 720-904-0440
	Vendor No.: T32009274
	NV Business ID: NV20121109037

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 #: 115705

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 02/2024

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 first amendment to the original contract which provides professional architectural/engineering services for the Southern Desert Correctional Center - Perimeter Security Fence Upgrade CIP Project: CIP Project No. 23-M44; SPWD Contract No. 115705. This amendment increases the maximum amount from \$568,300 to \$682,400 due to additional civil engineering services for the perimeter fence upgrades.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$568,300.00	\$568,300.00	\$568,300.00	Yes - Action
2. Amount of current amendment (#1):	\$114,100.00	\$114,100.00	\$114,100.00	Yes - Action
3. New maximum contract amount:	\$682,400.00			

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:

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	01/08/2024 21:28:48 PM
Division Approval	nmann	01/08/2024 21:29:00 PM
Department Approval	nmann	01/08/2024 21:29:12 PM
Contract Manager Approval	lwildes	01/09/2024 08:24:01 AM
Budget Analyst Approval	klay0	01/10/2024 13:43:35 PM
BOE Agenda Approval	bmacke1	01/22/2024 09:18:28 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: **28646**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1558-18 Is budget authority available?: Yes If "No" please explain: Not Applicable	Legal Entity Name: Contractor Name: Address: City/State/Zip Contact/Phone: Vendor No.: NV Business ID:	CLARK & SULLIVAN CONSTRUCTORS, INC. DBA CLARK & SULLIVAN CONSTRUCTION CLARK & SULLIVAN CONSTRUCTORS, INC. DBA CLARK & SULLIVAN CONSTRUCTION 905 INDUSTRIAL WAY SPARKS, NV 89431 775-355-8500 T32014097 NV19751002010
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.

<input checked="" type="checkbox"/> General Funds	67.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
<input checked="" type="checkbox"/> Highway Funds	33.00 %	Other funding	0.00 %

Agency Reference #: 116151

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
 Anticipated BOE meeting date 02/2024

Retroactive? **No**
 If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**
 Contract term: **3 years and 149 days**

4. Type of contract: **Contract**
 Contract description: **OWNER-CMAR**

5. Purpose of contract:

This is a new contract to provide Owner Construction Manager At-Risk services for the Department of Public Safety - Advance Planning Headquarters Building CIP Project for the construction of a 161,900 square-foot building with a 550 space structured parking garage with connecting bridge, rooftop photovoltaic system, a fitness center, and a state forensic testing laboratory: CIP Project No. 23-P01; SPWD Contract No. 116151.

6. NEW CONTRACT
 The maximum amount of the contract for the term of the contract is: **\$181,200.00**
 Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislatively 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:

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

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/08/2024 21:16:17 PM
Division Approval	nmann	01/08/2024 21:16:22 PM
Department Approval	nmann	01/08/2024 21:16:26 PM
Contract Manager Approval	lwildes	01/09/2024 08:22:58 AM
Budget Analyst Approval	klay0	01/19/2024 16:13:01 PM
BOE Agenda Approval	bmacke1	01/22/2024 09:20:56 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28648**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: CORE WEST, INC.
Agency Code: 082	Contractor Name: CORE WEST, INC.
Appropriation Unit: 1558-19	Address: 7150 CASCADE VALLEY CT.
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89128-0455
If "No" please explain: Not Applicable	Contact/Phone: 702-794-0550
	Vendor No.: T81092744
	NV Business ID: NV19861002524

To what State Fiscal Year(s) will the contract be charged? **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 #: 116187

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 days**

4. Type of contract: **Contract**

Contract description: **OWNER - CMAR**

5. Purpose of contract:

This is a new contract to provide Owner Construction Manager At-Risk services for the North Las Vegas State Veterans Home - Advance Planning CIP Project for the construction of a 128 bed, 120,000 square-foot skilled nursing facility: CIP Project No. 23-P04; SPWD Contract No. 116187.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$232,825.00**

Other basis for payment: Monthly progress payments based on services provided.

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:

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

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/09/2024 12:06:29 PM
Division Approval	nmann	01/09/2024 12:06:32 PM
Department Approval	nmann	01/09/2024 12:06:34 PM
Contract Manager Approval	lwildes	01/09/2024 14:19:32 PM
Budget Analyst Approval	klay0	01/17/2024 08:26:20 AM
BOE Agenda Approval	bmacke1	01/22/2024 09:19:13 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: **28732**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: FRAME ARCHITECTURE, INC.
Agency Code: 082	Contractor Name: FRAME ARCHITECTURE, INC.
Appropriation Unit: 1558-21	Address: 4090 S. MCCARRAN BLVD., STE. E
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-7529
If "No" please explain: Not Applicable	Contact/Phone: 775-827-9977
	Vendor No.: T29014981
	NV Business ID: NV20031302154

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 #: 116195

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 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 Old State Armory Building - Advance Planning Seismic Retrofit and Remodel CIP Project to include schematic design, civil, structural, mechanical, electrical, and fire protection engineering, and construction documents for the structural seismic reinforcement and building rehabilitation utilizing energy efficient design solutions to provide office space for State agencies: CIP Project No. 23-P07; SPWD Contract No. 116195.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,077,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislative 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:

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

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/09/2024 11:31:58 AM
Division Approval	nmann	01/09/2024 11:32:00 AM
Department Approval	nmann	01/09/2024 11:32:02 AM
Contract Manager Approval	lwildes	01/09/2024 13:39:11 PM
Budget Analyst Approval	klay0	01/17/2024 10:24:07 AM
BOE Agenda Approval	bmacke1	01/22/2024 09:20:08 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28749**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**

Agency Code: **082**

Appropriation Unit: **1558-18**

Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **VAN WOERT BIGOTTI ARCHITECTS, A PROFESSIONAL CORPORATION**

Contractor Name: **VAN WOERT BIGOTTI ARCHITECTS, A PROFESSIONAL CORPORATION**

Address: **1400 S. VIRGINIA ST., STE. C**

City/State/Zip: **RENO, NV 89502-2836**

Contact/Phone: **775-328-1010**

Vendor No.: **T60080600**

NV Business ID: **NV19781005709**

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.

<input checked="" type="checkbox"/>	General Funds	67.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
<input checked="" type="checkbox"/>	Highway Funds	33.00 %	Other funding	0.00 %

Agency Reference #: **116246**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Department of Public Safety - Advance Planning Headquarters Building CIP Project to include schematic design, design development, construction documents, and architecture and engineering services throughout the planning phase of the project for the construction of a 161,900 square-foot building with a 550 space structured parking garage with connecting bridge, rooftop photovoltaic system, a fitness center, and a state forensic testing laboratory: CIP Project No. 23-P01; SPWD Contract No. 116246.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,000,000.00**

Other basis for payment: Monthly progress payments based on services provided.

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)?

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.

business license - currently pending

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.

business license - currently pending

19. Agency Field Contract Monitor:

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

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/09/2024 13:12:45 PM
Division Approval	nmann	01/09/2024 13:12:48 PM
Department Approval	nmann	01/09/2024 13:12:50 PM
Contract Manager Approval	lwildes	01/09/2024 13:40:38 PM
Budget Analyst Approval	klay0	01/19/2024 16:24:31 PM
BOE Agenda Approval	bmacke1	01/22/2024 09:21:51 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: **28717**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: SHAW ENGINEERING, LTD.
Agency Code: 082	Contractor Name: SHAW ENGINEERING, LTD.
Appropriation Unit: 1591-49	Address: 20 VINE ST.
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89503-5520
If "No" please explain: Not Applicable	Contact/Phone: 775-329-5559
	Vendor No.: T27036374
	NV Business ID: NV19951060977

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 #: 116244

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 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 Gallagher Fish Hatchery - Hatchery Water Intrusion Repairs CIP project to include schematic design, design development, construction documents, and construction administration services for the design and construction of structural repairs to the exterior walls, foundation, floor slab, and structural roof repair caused by the cracked, discontinuous structural beams at both the east and west walls, which support the roof framing: CIP Project No. 23-M06; SPWD Contract No. 116244.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$239,125.00**

Other basis for payment: Monthly progress payments based on services provided.

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:

Aaron Smith, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/08/2024 21:49:28 PM
Division Approval	nmann	01/08/2024 21:49:31 PM
Department Approval	nmann	01/08/2024 21:49:35 PM
Contract Manager Approval	lwildes	01/09/2024 08:24:51 AM
Budget Analyst Approval	klay0	01/10/2024 15:23:29 PM
BOE Agenda Approval	bmacke1	01/22/2024 09:17:56 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28644**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	AZTECH INSPECTIONS & TESTING, LLC
Agency Code:	082	Contractor Name:	AZTECH INSPECTIONS & TESTING, LLC
Appropriation Unit:	1593-24	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:	702-247-7645
		Vendor No.:	T27036634
		NV Business ID:	NV20091455548

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 #: 116152

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional materials testing and inspection services for the Department of Motor Vehicles (DMV) - Silverado Ranch Facility CIP Project to include materials testing and inspections of commercial driver's license (CDL) and DMV buildings with Quality Assurance Agency inspections and rough site construction, soils, masonry, concrete, and structural testing for the construction of a full service DMV facility, including CDL services: CIP Project No. 23-C02; SPWD Contract No. 116152.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$634,980.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Justus Pang, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/03/2024 15:38:32 PM
Division Approval	nmann	01/03/2024 15:38:34 PM
Department Approval	nmann	01/03/2024 15:38:37 PM
Contract Manager Approval	lwildes	01/04/2024 07:26:38 AM
Budget Analyst Approval	klay0	01/17/2024 08:46:41 AM
BOE Agenda Approval	bmacke1	01/22/2024 09:19:36 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28734**

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: 1594-36	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: 775-284-7083
	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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 116255

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 149 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 Silver Sage Building - Roofing & HVAC System Replacement CIP Project to include design development, drawings, technical specifications, construction documents, bid review, bid submittal, construction administration services for the design and construction of a roofing system, and replacement of rooftop units and associated temperature controls: CIP Project No. 23-C37-1; SPWD Contract No. 116255.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$160,000.00**

Other basis for payment: Monthly progress payments based on services provided.

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:

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:

TJ Dobson, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	01/09/2024 13:46:20 PM
Division Approval	nmann	01/09/2024 13:46:35 PM
Department Approval	nmann	01/09/2024 13:46:38 PM
Contract Manager Approval	lwildes	01/16/2024 15:17:36 PM
Budget Analyst Approval	klay0	01/17/2024 07:48:54 AM
BOE Agenda Approval	bmacke1	01/22/2024 09:17:23 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: **27055** Amendment Number: **2**
 Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **KNIT**
 Agency Code: **082** Contractor Name: **KNIT**
 Appropriation Unit: **All Appropriations** Address: **7250 PEAK DR., STE. 216**
 Is budget authority available?: **No** City/State/Zip: **LAS VEGAS, NV 89128**
 Contact/Phone: **702-363-2222**
 Vendor No.: **T29033716**
 NV Business ID: **NV19851015692**

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3161, expenditure category 62, ARPA-Forensic LV Jail Renov.

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

Agency Reference #: 115222

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/14/2023**
 Anticipated BOE meeting date 02/2024
 Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2026**
 Contract term: **3 years and 321 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 Detention Center - Forensics Facility Renovation CIP Project: CIP Project No. 23-A018; SPWD Contract No. 115222. This amendment decreases the maximum amount from \$776,000 to \$429,140 due to the cancellation of the project.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$738,000.00	\$738,000.00	\$738,000.00	Yes - Action
a. Amendment 1:	\$38,000.00	\$38,000.00	\$38,000.00	Yes - Info
2. Amount of current amendment (#2):	-\$346,860.00	-\$346,860.00	-\$308,860.00	Yes - Action
3. New maximum contract amount:	\$429,140.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application - Southern Nevada Adult Mental Health

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

01/09/2024 14:23:57 PM

Division Approval	nmann	01/09/2024 14:24:10 PM
Department Approval	nmann	01/09/2024 14:24:23 PM
Contract Manager Approval	lwildes	01/09/2024 14:39:00 PM
Budget Analyst Approval	klay0	01/16/2024 15:36:12 PM
BOE Agenda Approval	bmacke1	01/22/2024 09:15:48 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: **28752**

Agency Name: DTCA - DIVISION OF TOURISM	Legal Entity Name: KPS/3
Agency Code: 101	Contractor Name: KPS/3
Appropriation Unit: 1520-31	Address: 500 RYLAND STREET #300
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502
If "No" please explain: Not Applicable	Contact/Phone: ROB GAEDTKE 775/686-7439
	Vendor No.: T80988055
	NV Business ID: NV19941094961

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 % LODGING TAX

Agency Reference #: **RFQ 99SWC-S2340**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

4. Type of contract: **Contract**

Contract description: **Marketing**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing, and education services. This service agreement provides ongoing strategic planning, account management, creative development, media buying, public relations, event planning, and website and digital services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$160,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Indian Commission (to be known as the Department of Native American Affairs effective 7/1/2024) is in need of administrative and marketing support as they are in the process of becoming a stand alone agency. Formerly, the Division of Tourism provided all the marketing and communications resources for the entire department. Contracting with a dedicated marketing agency will give the Native American Affairs the kind of promotional power they need to fulfill their missions for Nevada residents.

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

To accomplish the needs of Native American Affairs, we will use various channels to advertise and generate awareness of the agency. The agency's staff does not possess the professional expertise needed.

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 RFQ #33SWC-S2340, this vendor was selected because they have been used by multiple state agencies in the past and are deemed 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:

Multiple state agencies use this vendor: 030, 040, 083, 102, 334, 400, 402, 403, 406, 500, 550, 700, 701, 702, 704, 705, 706, 707, 708, 740, 741, 741, 930, 950, 960 with multiple contracts.

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

No If "Yes", please provide details of the litigation 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	01/09/2024 15:08:38 PM
Division Approval	amathies	01/09/2024 15:08:40 PM
Department Approval	amathies	01/09/2024 15:08:42 PM
Contract Manager Approval	amathies	01/09/2024 15:08:45 PM
Budget Analyst Approval	mbro28	01/22/2024 16:03:34 PM
BOE Agenda Approval	stilley	01/22/2024 17:04:58 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: **28738**

Agency Name: **DTCA - DIVISION OF TOURISM**
Agency Code: **101**
Appropriation Unit: **1522-31**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **GLOBAL MARKETING & SALES, INC.**
Contractor Name: **GLOBAL MARKETING & SALES, INC.**
Address: **1580 SAWGRASS CORPORATE PKWY
STE 130**
City/State/Zip: **SUNRISE, FL 33323-2860**
Contact/Phone: **ALEX PACE 786/301-7771**
Vendor No.: **T27041849**
NV Business ID: **NV20171626928**

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % LODGING TAX

Agency Reference #: **RFP #10TCA-S2506-AM**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2027**

Contract term: **3 years and 334 days**

4. Type of contract: **Contract**

Contract description: **Latin America Rep**

5. Purpose of contract:

The is a new contract to provide ongoing marketing services to promote Nevada in Latin America as a premier leisure and cultural tourism destination.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,600,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Tourism is tasked with developing a comprehensive program of marketing and advertising for both domestic and international markets that publicizes travel and tourism to all regions of Nevada. This contract focuses on the international traveler.

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

The state does not have employees located in Latin America to perform the necessary work as identified in the contract. Latin America representatives have direct knowledge of the industry, culture, language, and traveler. They also have the Latin American industry contacts. Being in Latin America, the representatives are able to conduct sales calls, in office trainings, media visits, attend sales missions and shows more conveniently and at a reduced cost.

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):

SALES INTERNATIONAL

CONNECT WORLDWIDE
GLOBAL MARKETING & SALES INC

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #10TCA-S2506, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 10/02/2023 Anticipated re-bid date: 07/01/2027

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:

Nevada Division of Tourism, 2017-2023. The contractor has been verified as satisfactory.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	01/05/2024 15:04:34 PM
Division Approval	amathies	01/05/2024 15:04:36 PM
Department Approval	amathies	01/05/2024 15:04:39 PM
Contract Manager Approval	amathies	01/05/2024 15:04:41 PM
Budget Analyst Approval	mbro28	01/22/2024 16:03:14 PM
BOE Agenda Approval	stilley	01/22/2024 17:05:33 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: **28737**

Agency Name: **INDIGENT DEFENSE**

Agency Code: **111**

Appropriation Unit: **1008-36**

Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **DMSLAW, LLC**

Contractor Name: **DMSLAW, LLC**

Address: **7121 W Craig Road # 113-23**

City/State/Zip: **Las Vegas, NV 89129**

Contact/Phone: **David M. Schieck 702-303-4251**

Vendor No.: **T32014305**

NV Business ID: **NV20171497056**

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

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

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

2. Contract start date:

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

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2024**

Contract term: **149 days**

4. Type of contract: **Contract**

Contract description: **DIDS Oversight**

5. Purpose of contract:

This a new contract to provide ongoing oversight, assessments, and reporting of the quality of indigent defense services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$173,333.00**

Other basis for payment: plus travel expenses for preapproved travel. Expenses such as copies .15 cents or other reasonable amount, support by receipt. will not reimburse for stationary or supplies/computer equipment/subscriptions or programs/or preparation or reviewing of billing is not a reimbursable expense.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 180.440 and the Davis v. State (Nev. First Jud. Dist. Ct. Case No. 170C002271B (Aug. 11, 2020)) consent judgment require systematic review on an annual basis of public defense counsel for quality and efficiency according to nationally and locally adopted standards, including, but not limited to, the ABA Criminal Justice Standards.

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

The Department has insufficient staff to cover the expected oversight duties of the consent judgment

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

[Empty text box]

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	dcarlo4	01/09/2024 11:05:10 AM
Division Approval	ssands	01/09/2024 13:20:22 PM
Department Approval	ssands	01/09/2024 13:20:25 PM
Contract Manager Approval	ssands	01/10/2024 08:48:36 AM
Budget Analyst Approval	bmacke1	01/22/2024 17:28:34 PM
BOE Agenda Approval	bmacke1	01/22/2024 17:28:37 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: **28744**

Agency Name: **INDIGENT DEFENSE**

Agency Code: **111**

Appropriation Unit: **1008-36**

Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: John J. Kadlic, Attorney at Law, LLC

Contractor Name: **John J. Kadlic, Attorney at Law, LLC**

Address: **10898 Dancing Aspen Drive**

City/State/Zip: **Reno, NV 89521**

Contact/Phone: 775-883-3478

Vendor No.: pending

NV Business ID: NV20141667729

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

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

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

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2024**

Contract term: **149 days**

4. Type of contract: **Contract**

Contract description: **DIDS Oversight**

5. Purpose of contract:

This a new contract to provide ongoing oversight, assessments, and reporting of the quality of indigent defense services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$173,333.00**

Other basis for payment: plus travel expenses for preapproved travel. Expenses such as copies .15 cents or other reasonable amount, support by receipt. will not reimburse for stationary or supplies/computer equipment/subscriptions or programs/or preparation or reviewing of billing is not a reimbursable expense.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 180.440 and the Davis v. State (Nev. First Jud. Dist. Ct. Case No. 170C002271B (Aug. 11, 2020)) consent judgment require systematic review on an annual basis of public defense counsel for quality and efficiency according to nationally and locally adopted standards, including, but not limited to, the ABA Criminal Justice Standards.

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

The Department has insufficient staff to cover the expected oversight duties of the consent judgement.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

[Empty text box]

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	dcarlo4	01/09/2024 10:44:11 AM
Division Approval	ssands	01/09/2024 13:19:48 PM
Department Approval	ssands	01/09/2024 13:19:51 PM
Contract Manager Approval	ssands	01/10/2024 07:16:29 AM
Budget Analyst Approval	bmacke1	01/22/2024 17:10:38 PM
BOE Agenda Approval	bmacke1	01/22/2024 17:10:42 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: **28687**

Agency Name: INDIGENT DEFENSE	Legal Entity Name: LAW OFFICES OF KRISTINA WILDEVELD
Agency Code: 111	Contractor Name: LAW OFFICES OF KRISTINA WILDEVELD
Appropriation Unit: 1499-04	Address: 550 E. Charleston Boulevard
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89104
If "No" please explain: Not Applicable	Contact/Phone: Kristina Wildeveld 702-222-0007
	Vendor No.: T32010667
	NV Business ID: NV20061372305

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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

4. Type of contract: **Contract**

Contract description: **legal services**

5. Purpose of contract:

This is a new contract to provide representation for complex litigation cases.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00**

Other basis for payment: **FY24 \$100,000; FY25 \$100,000**

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 180.450 rural counties may transfer responsibility for the provision of indigent defense services to the Nevada State Public Defender (NSPD). Certain rural counties transferred responsibility for death penalty cases to the NSPD for the next biennium.

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

Supreme Court Rule (SCR) 250 sets forth stringent requirements to take a death penalty case. Also, death penalty cases take a significant amount of time. Current state employees do not have the bandwidth to take on this additional workload in addition to their other duties.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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 is one of several attorney's for complex litigation

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	mlynn	01/03/2024 17:22:23 PM
Division Approval	ssands	01/04/2024 11:29:01 AM
Department Approval	ssands	01/09/2024 10:44:21 AM
Contract Manager Approval	ssands	01/09/2024 11:03:18 AM
Budget Analyst Approval	bmacke1	01/22/2024 17:04:31 PM
BOE Agenda Approval	bmacke1	01/22/2024 17:04:38 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28759**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: CARASOFT TECHNOLOGY CORPORATION
Agency Code: 180	Contractor Name: CARASOFT TECHNOLOGY CORPORATION
Appropriation Unit: 1365-26	Address: 1890 PRESTON WHITE DR STE 201
Is budget authority available?: Yes	City/State/Zip: RESTON, VA 20191
If "No" please explain: Not Applicable	Contact/Phone: 703/871-8500
	Vendor No.: PUR0004357
	NV Business ID: NV20151127305

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 % internal service funds

2. Contract start date:

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

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

4. Type of contract: **Contract**

Contract description: **ServiceNow ITSM**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-13299 which provides cloud services. This service agreement provides information technology service management solutions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$427,627.95**

II. JUSTIFICATION

7. What conditions require that this work be done?

In order to meet the increased demands being made on the Service Desk and in support of the technology needs of our partner agencies and users an update to our core ITSM (IT Service Management) Service Desk solution is required. The current application is an on-premises solution that requires support of the in-house DBA's, Infrastructure Team, and Service Desk personnel. We have a backlog of requests that need to be configured and scripted to support the necessary changes to automate many of the manual processes that exist today.

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

This is a specialized service.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

[Empty text box]

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	vkneefel	01/17/2024 13:53:05 PM
Division Approval	jbensho1	01/17/2024 14:52:16 PM
Department Approval	ddodge	01/17/2024 14:57:25 PM
Contract Manager Approval	thudder	01/17/2024 14:58:55 PM
EITS Approval	ljean	01/17/2024 16:17:52 PM
Budget Analyst Approval	mranki1	01/19/2024 15:27:24 PM
BOE Agenda Approval	mranki1	01/19/2024 15:28:31 PM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division
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Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

MEMORANDUM

TO: Tim Galluzi, Administrator, EITS, DOA
Jason Benshoof, IT Chief, Agency IT Services, EITS, DOA
Michael Smith, IT Manager III, EITS, DOA
Tiffany Morelli, Management Analyst III, EITS, DOA

CC: 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 – DOA – TIN 80 – *ITSM Modernization*
(*ServiceNow*) – BA 1365

DATE: May 20, 2022

We have completed our review for the Department of Administration (DOA), Enterprise IT Services' (EITS) – *ITSM Modernization (ServiceNow)* – TIN 80.

The submitted TIN, for an estimated value of \$618,801.76 in the FY24/FY25 biennium (100% General Fund), is to update EITS' core IT Service Management (ITSM) Service Desk solution.

The current application is an outdated, on-premises solution with minimal self-help functionality that requires support from in-house DBA's, Infrastructure, and Service Desk personnel.

This investment supports a cloud-based SaaS solution that fosters best-practice frameworks, such as ITIL and COBIT, creates a formal governance process, and helps transform the help desk into a modern IT ServiceDesk and Center of Excellence.

EITS envisions this SaaS model as an enterprise solution that will allow other state agencies the ability to leverage the platform thus increasing their support capabilities with improved metrics, reporting, and service to Nevada's constituents. Several agencies already have asked to join EITS' ITSM platform; this investment will make it possible to satisfy these request.

The agency considers the investment and final implementation to have an ongoing low security risk 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: **28492**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: Elko County Fire Protection District
Agency Code: 180	Contractor Name: Elko County Fire Protection District
Appropriation Unit: 1388-00	Address: 155 South Ninth Street
Is budget authority available?: Yes	City/State/Zip: Elko, NV 89801
If "No" please explain: Not Applicable	Contact/Phone: Matthew Petersen (775)738-996
	Vendor No.: T81072742B
	NV Business ID: N/A
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 % Revenue

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 11/2023

Retroactive? **Yes**

If "Yes", please explain

Vendor would not sign the contract until rates were Legislatively approved. Upon approval, the contract had to be routed to their Board of Commissioners for approval.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Revenue Contract**

Contract description: **Microwave Services**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing rack space at Elko Mountain, Rocky Point, Spruce Mountain, Ellen Dee Mountain, and Penn Hill Mountain located in Elko County, and Mary's Mountain located in Eureka County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$330,861.05**

Other basis for payment: \$65,808.93 per year and \$8,301.80 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

N/A

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

N/A

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

Governmental Entity

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

14. Is the contractor currently involved in litigation with the State 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	jbrya1	12/06/2023 08:25:49 AM
Division Approval	ccarey	12/11/2023 15:45:40 PM
Department Approval	ddodge	12/11/2023 15:50:50 PM
Contract Manager Approval	mespinoz	12/11/2023 16:31:20 PM
Budget Analyst Approval	mranki1	12/21/2023 08:54:25 AM
BOE Agenda Approval	mranki1	12/21/2023 08:54:27 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Timothy D. Galluzi
Chief Information Officer
Darla J. Dodge
Deputy Administrator

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

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MEMORANDUM

DATE: 22 August 2023
TO: Michael Rankin, Executive Branch Budget Officer
Governor's Finance Office
FROM: Timothy Galluzi, State Chief Information Officer TG
SUBJECT: Request BOE retroactive approval for attached revenue agreement

The attached revenue agreement with Elko County Fire Protection District has been submitted for approval to the Board of Examiners. As a result of the Office of the Chief Information Office (OCIO) rates not being published until July 13, 2023 and the approval of the OCIO working name, the second party to the agreement was not willing to sign the agreement.

This revenue agreement is a continuation of service to provide rack space at Elko Mountain, Rocky Point, Spruce Mountain, Ellen Dee and Penn Hill in Elko County, Mary's Mountain in Eureka County and DS0 Channels in Elko and Eureka County.. As this is a revenue agreement, we are requesting the retroactive approval date to have contractual authority between the State and the Elko County Fire Protection District to bill for the services and receive revenue for the State of Nevada.

If the agreement is not approved with an effective date of 01 July 2023, the Office of the Chief Information Officer within the Office of the Governor Network Transport Services budget account would not receive revenue for service provided and not collect sufficient funds this fiscal year for the expenses related to this service.

We respectfully request the Board of Examiners to retroactively approve this revenue agreement with a start date of 01 July 2023.

Signature: 
Timothy Galluzi (Aug 22, 2023 11:03 PDT)
Email: 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: **28318**

Agency Name: NDE - DEPARTMENT OF EDUCATION	Legal Entity Name: SHI INTERNATIONAL CORP.
Agency Code: 300	Contractor Name: SHI INTERNATIONAL CORP.
Appropriation Unit: 2716-56	Address: 290 DAVIDSON AVE
Is budget authority available?: Yes	City/State/Zip: SOMERSET, NJ 08873-414
If "No" please explain: Not Applicable	Contact/Phone: 303/723-5256
	Vendor No.: PUR0001595
	NV Business ID: NV20131129294

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 #: 300

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

4. Type of contract: **Contract**

Contract description: **Data Migration**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV18-417 which provides cloud services. This service agreement provides migration of legacy applications hosting the department's authentication system and SharePoint data from on-premises systems to a cloud infrastructure.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$240,000.00**

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?

Nevada Department of Education has initiated the modernization of its legacy Bighorn suite. The core objectives are to integrate these applications within the new Identity & Access Management solution, RapidIdentity, migrate the applications into the existing cloud environment, and implement improvements to heighten usability.

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

The State does not have a specialized staff person dedicated to implementing the data migration.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Contractor was selected from the Statewide Contract # NASPO Cloud Solutions AR488/99SWC-NV18-417.

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

- 10. a. Does the contract contain any IT components? Yes
- b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

null, null Ph: null

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	carnol1	11/06/2023 13:51:59 PM
Division Approval	carnol1	11/06/2023 13:52:02 PM
Department Approval	carnol1	11/06/2023 13:52:09 PM
Contract Manager Approval	mgosej29	11/06/2023 14:14:39 PM
EITS Approval	ljean	11/07/2023 11:46:02 AM
Budget Analyst Approval	vfajota	01/09/2024 12:52:08 PM
BOE Agenda Approval	mranki1	01/10/2024 12:43:12 PM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Enterprise IT Services Division

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

M E M O R A N D U M

TO: Peter Zutz, Administrator, ADAM, NDE
Glenn Meyer, ITM 2, NDE
Susie King, Fiscal Grant Analyst, NDE

CC: David Haws, Administrator, EITS, DOA
David Axtell, Chief Enterprise Architect, EITS, DOA

FROM: Timothy Galluzi, Technology Investment Administrator, EITS, DOA

SUBJECT: TIN Review Completed – NDE - *SLDS Grant* – T2616132

DATE: Aug 21st, 2020

We have completed the review for Nevada Department of Education (NDE) – *SLDS Grant* TIN.

The submitted TIN, for an estimated value of \$3,499,913, supports replacement of an existing technology solution, software product, and/or equipment solution currently in place and in use by the agency.

This investment will serve to replace the existing NDE Authentication system, implement the Ed-Fi ODS and create an automated solution for EDFACTS reporting. The agency reports that the current security/authentication solution in place at the agency no longer provides the elements and functionality required to scale secure user access to educational data sets.

The agency also reports that when completed, the Ed-Fi implementation, connection to IC using the API to populate the ODS and then linking the ODS to Generate will create an end to end federal reporting system based on Common Education Standards and supported with industry maintained code. This implementation can serve as a model for other states to implement an interoperable system that is built on industry standards and maintained by a consortium of states.

If there are to be any changes to enterprise services, including: network, server, telecom etc. please notify EITS as soon as possible.

The agency indicated that they would be interested in a pre and post implementation review from the Office of Information Security (OIS). Please reach out to OIS to plan for the reviews.

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

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

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

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28658**

Agency Name: DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name: KPS/3
Agency Code: 402	Contractor Name: KPS/3
Appropriation Unit: 3282-61	Address: 500 RYLAND ST STE 300
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-1662
If "No" please explain: Not Applicable	Contact/Phone: ROB GAEDTKE 775/686-7439
	Vendor No.: PUR0004720
	NV Business ID: NV19941094961

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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2024**

Contract term: **241 days**

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

Contract description: **APS Awareness Campai**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides an awareness campaign including research, development of an integrated media plan, and an update of marketing materials addressing abuse.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$168,280.00**

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?

Aging and Disability Services Division (ADSD), Adult Protective Services (APS) receives and investigates statewide reports of abuse, neglect, self-neglect, exploitation, isolation and abandonment for vulnerable persons, age 18-59, in addition to persons 60 years and older, collectively referred to as vulnerable adults. Adult Protective Services will continue its community outreach efforts to raise awareness and connect people with resources that help them understand the types of abuse, who the vulnerable adult population is, and how to report abuse.

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

State employees are not subject matters experts on marketing and are utilizing a state marketing service agreement for this.

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 RFP 99SWC-S2340

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 2019 with DHHS 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	gjorgens	12/19/2023 08:55:26 AM
Division Approval	ecreceli	12/19/2023 09:53:03 AM
Department Approval	dschmid5	12/19/2023 13:47:32 PM
Contract Manager Approval	macedved1	12/19/2023 14:19:05 PM
Budget Analyst Approval	khal5	01/16/2024 08:04:53 AM
BOE Agenda Approval	nrezaie	01/16/2024 15:40:01 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28742**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	SOCIAL ENTREPRENEURS, INC.
Agency Code:	402	Contractor Name:	SOCIAL ENTREPRENEURS, INC.
Appropriation Unit:	3282-30	Address:	6548 S MCCARRAN BLVD STE
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.

<input checked="" type="checkbox"/> General Funds	37.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	63.00 %	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 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

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

Contract description: **APS General Training**

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 the facilitation of in-person and virtual training to improve staff safety when working with vulnerable persons.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$119,000.00**

Other basis for payment: As Invoiced by the Vendor and Approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

Aging and Disability Services Division (ADSD), Adult Protective Services (APS) receives and investigates statewide reports of abuse, neglect, self-neglect, exploitation, isolation and abandonment for vulnerable persons, age 18-59, in addition to persons 60 years and older, collectively referred to as vulnerable adults. This training will result in Adult Protective Services staff, as well as other program staff within ADSD, in improving their personal safety by knowing what to look for and how to respond with the goal of avoidance of safety problems.

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

State employees are not subject matters experts on the training topics and are utilizing a state master service agreement for this.

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 RFP 99SWC-S2340

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:

DHHS - since 2019 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	gjorgens	01/08/2024 11:43:21 AM
Division Approval	ecreceli	01/08/2024 11:58:18 AM
Department Approval	dschmid5	01/08/2024 16:52:37 PM
Contract Manager Approval	maceved1	01/09/2024 10:16:47 AM
Budget Analyst Approval	khal5	01/17/2024 15:01:29 PM
BOE Agenda Approval	nrezaie	01/18/2024 12:29:48 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28439**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Health Management Associates, Inc.
Agency Code:	403	Contractor Name:	Health Management Associates, Inc.
Appropriation Unit:	3158-32	Address:	120 N. Washington Square Suite 705
Is budget authority available?:	No	City/State/Zip:	Lansing, MI 48933
If "No" please explain: Hospital Assessment Funds pending February IFC Work Program #C66653.		Contact/Phone:	Jeff DeVries 517-482-9236
		Vendor No.:	T27042461
		NV Business ID:	NV20181629216

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 %	X	Fees	25.00 % Hospital Provider Assessment
X Federal Funds	75.00 %		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? **No** or b. other effective date **01/01/2024**
Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

This is a retroactive request due to this HMA contract funded with HCBS ARPA funds and Hospital Assessment Funds. The portion funded with HCBS ARPA funds will be funded by a balance forward non-IFC Work Program. The portion funded by Hospital Assessment Funds, which is a new funding source, will require a new Work Program #C66653 that will need February IFC approval.

3. Termination Date: **12/31/2024**

Contract term: **1 year**

4. Type of contract: **Other (include description): Statewide Service Agreement**

Contract description: **Children's BH TA**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17885 which provides consulting, marketing, and education services. This service agreement provides project management, analysis, policy and report development, and technical assistance to enhance the state's system of care for children and youth. This contract is contingent upon IFC approval of work program #C66653.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$595,000.00**

Other basis for payment: As invoiced by the Contractor and approved by the State. FY 2024: \$439,000; FY 2025: \$156,000

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):

State employees do not have the expertise or resources to provide these services.

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 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:
 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:

Marcel Brown, Social Services Prog Spec III Ph: null

Sarah Dearborn, Social Services Chief II Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	11/15/2023 16:27:44 PM
Division Approval	laaron	12/08/2023 00:36:17 AM
Department Approval	staciew4	12/12/2023 12:03:28 PM
Contract Manager Approval	ltuttl1	12/12/2023 12:14:11 PM
Budget Analyst Approval	nrezaie	01/16/2024 10:58:33 AM
BOE Agenda Approval	nrezaie	01/16/2024 11:01:01 AM

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 13, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy *Theresa Carsten for SW*
Theresa Carsten for SW (Nov 14, 2023 11:42 PST)

RE: Request for Retroactive Start Date of January 1, 2024 for Service Agreement with Health Management Associates, Inc.

This memorandum requests that the Health Management Associates, Inc. (HMA) 28439 Service Agreement be approved for a retroactive start date of January 1, 2024.

This is a new Service Agreement under the new Purchasing Statewide Master Services Agreement (MSA) 99SWC-S2340 Consulting, Marketing, and Education Services which is replacing the current DHHS-wide MSA 40DHHS-S30 Public Health Consulting, Management and Education Services that terminates December 31, 2023. Services provide for project management, analysis, policy and report development services, and technical assistance and strategy support to enhance the state's system of care for children and youth with behavioral health needs and/or in the foster care system with a focus on Medicaid policy.

This Service Agreement is requested as retroactive due to the time required to estimate its services and costs being split between the current Work Order 22242 agreement under MSA S30 (terminating 12/31/23) and the new Service Agreement (effective 01/01/24) under MSA S2340. This HMA contract is funded with HCBS ARPA funds and Hospital Assessment Funds. The portion funded with HCBS ARPA funds will be funded by a balance forward non-IFC Work Program. The portion funded by Hospital Assessment Funds, which is a new funding source, will require a new Work Program #C66653 that will need February IFC approval.

If the retroactive date is not approved, Nevada risks being out of compliance with the agreement between Nevada and the United States Department of Justice. There will be a significant disruption in the continued research and implementation support of services needed to address identified behavioral health concerns for youth in Nevada.

Thank you.

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: **28698**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: MILLIMAN, INC.
Agency Code: 403	Contractor Name: MILLIMAN, INC.
Appropriation Unit: 3158-47	Address: 17335 Golf Parkway Suite 100
Is budget authority available?: Yes	City/State/Zip: Brookfield, WI 53045
If "No" please explain: Not Applicable	Contact/Phone: Michael Cook 262-796-3417
	Vendor No.: T29047774
	NV Business ID: NV20011420475

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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.

<input checked="" type="checkbox"/> General Funds	50.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	50.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **Contract**

Contract description: **Federal Waiver**

5. Purpose of contract:

This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

Payment for services will be made at the rate of \$750,000.00 per year

Other basis for payment: Within 30 days upon receipt of invoice. FY24 \$150,000 FY25-27 \$750,000 FY28 \$600,000

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division requires support with development of all federal waiver application materials for certain federal waivers and program authorities under Title XIX of the Social Security Act and the Affordable Care Act, including, but not limited to, 1915(b), 1915(c), 1915(i), 1332, and 1115 waivers and waiver renewals.

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

The State does not have the resources or expertise to develop and implement a Federal Waiver Program.

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 #44DHHS-S2481, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP: 2010 - 2020 and 2023 - current - Satisfactory

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Malinda Southard, Deputy Administrator Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/09/2024 10:32:08 AM
Division Approval	laaron	01/09/2024 11:02:19 AM
Department Approval	sruybali	01/09/2024 11:24:17 AM
Contract Manager Approval	ltuttl1	01/09/2024 13:26:12 PM
Budget Analyst Approval	nrezaie	01/17/2024 07:16:45 AM
BOE Agenda Approval	nrezaie	01/17/2024 07:58:16 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28696**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Manatt Health Strategies, LLC
Agency Code:	403	Contractor Name:	Manatt Health Strategies, LLC
Appropriation Unit:	3158-47	Address:	2049 Century Park East Suite 1700
Is budget authority available?:	Yes	City/State/Zip:	Los Angeles, CA 90067
If "No" please explain:	Not Applicable	Contact/Phone:	Anne Karl 212-790-4578
		Vendor No.:	T32011562
		NV Business ID:	NV20201698341

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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.

<input checked="" type="checkbox"/>	General Funds	50.00 %	Fees	0.00 %
<input checked="" type="checkbox"/>	Federal Funds	50.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **Contract**

Contract description: **Federal Waiver**

5. Purpose of contract:

This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

Payment for services will be made at the rate of \$750,000.00 per year

Other basis for payment: Within 30 Days upon receipt of invoice. FY24 \$150,000 FY25-27 \$750,000 FY28 \$600,000

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division requires support with development of all federal waiver application materials for certain federal waivers and program authorities under Title XIX of the Social Security Act and the Affordable Care Act, including, but not limited to, 1915(b), 1915(c), 1915(i), 1332, and 1115 waivers and waiver renewals.

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

The State does not have the resources or expertise to develop and implement a Federal Waiver Program.

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 #44DHHS-S2481, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP: 10/2021 - 06/2023 - 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:

Malinda Southard, Deputy Administrator Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/29/2023 11:53:44 AM
Division Approval	laaron	01/04/2024 09:40:19 AM
Department Approval	sruyballi	01/08/2024 16:40:52 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:04:52 AM
Budget Analyst Approval	nrezaie	01/16/2024 12:13:57 PM
BOE Agenda Approval	nrezaie	01/17/2024 07:16:06 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: **28697**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Mercer Health & Benefits, LLC
Agency Code:	403	Contractor Name:	Mercer Health & Benefits, LLC
Appropriation Unit:	3158-47	Address:	2325 East Camelback Road Suite 600
Is budget authority available?:	Yes	City/State/Zip:	Phoenix, AZ 85016
If "No" please explain:	Not Applicable		
		Contact/Phone:	Fred Gibson 480-395-1023
		Vendor No.:	T32007146
		NV Business ID:	NV20041250294

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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.

<input checked="" type="checkbox"/>	General Funds	50.00 %	Fees	0.00 %
<input checked="" type="checkbox"/>	Federal Funds	50.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **Contract**

Contract description: **Federal Waiver**

5. Purpose of contract:

This is a new contract to provide technical assistance, policy support, analysis, and recommendations for Federal Waiver Programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

Payment for services will be made at the rate of \$750,000.00 per year

Other basis for payment: Within 30 days upon receipt of invoice. FY24 \$150,000 FY25-27 \$750,000 FY28 \$600,000

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division requires support with development of all federal waiver application materials for certain federal waivers and program authorities under Title XIX of the Social Security Act and the Affordable Care Act, including, but not limited to, 1915(b), 1915(c), 1915(i), 1332, and 1115 waivers and waiver renewals.

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

The State does not have the resources or expertise to develop and implement a Federal Waiver Program.

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 #44DHHS-S2481, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Multiple contracts with DHCFP 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:

Malinda Southard, Deputy Administrator Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/29/2023 11:57:39 AM
Division Approval	laaron	01/04/2024 09:42:30 AM
Department Approval	sruyballi	01/08/2024 16:41:07 PM
Contract Manager Approval	ltuttl1	01/16/2024 11:27:20 AM
Budget Analyst Approval	nrezaie	01/16/2024 12:13:03 PM
BOE Agenda Approval	nrezaie	01/17/2024 07:16:27 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: **28554**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Churchill County Social Services
Agency Code: 403	Contractor Name: Churchill County Social Services
Appropriation Unit: 3243-00	Address: 485 West B Street Suite 105
Is budget authority available?: Yes	City/State/Zip: Fallon, NV 89406
If "No" please explain: Not Applicable	Contact/Phone: Shannon Ernst 775-428-0211
	Vendor No.: T81032440A
	NV Business ID: Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,556,809.15**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$393,903.76; FY25-27: \$387,635.13/year

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/13/2023 18:12:44 PM
Division Approval	laaron	12/14/2023 11:43:53 AM
Department Approval	staciew4	12/15/2023 09:23:03 AM
Contract Manager Approval	trya4	12/15/2023 09:40:15 AM
Budget Analyst Approval	nrezaie	01/09/2024 10:31:25 AM
BOE Agenda Approval	nrezaie	01/09/2024 10:32:06 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: Request for Retroactive Start Date of July 1, 2023, for County Match Contracts

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
- CETS 28560 Eureka County
- CETS 28551 Humboldt County
- CETS 28552 Lander County
- CETS 28563 Lincoln County
- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28558**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Elko County Human & Social Services
Agency Code:	403	Contractor Name:	Elko County Human & Social Services
Appropriation Unit:	3243-00	Address:	571 Idaho Street
Is budget authority available?:	Yes	City/State/Zip:	Elko, NV 89801
If "No" please explain:	Not Applicable	Contact/Phone:	Kathleen Jones 775-738-4375
		Vendor No.:	T81072742E
		NV Business ID:	Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,927,049.35**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$684,884.09 and FY25-27 \$747,388.42

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/05/2024 09:02:08 AM
Division Approval	laaron	01/08/2024 15:22:37 PM
Department Approval	sruyball	01/08/2024 16:40:18 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:03:15 AM
Budget Analyst Approval	nrezaie	01/17/2024 12:53:49 PM
BOE Agenda Approval	nrezaie	01/19/2024 08:55:34 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
- CETS 28560 Eureka County
- CETS 28551 Humboldt County
- CETS 28552 Lander County
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- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28561**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Humboldt County Human Services
Agency Code: 403	Contractor Name: Humboldt County Human Services
Appropriation Unit: 3243-00	Address: 50 W. 5th Street
Is budget authority available?: Yes	City/State/Zip: Winnemucca, NV 89445
If "No" please explain: Not Applicable	Contact/Phone: Dave Mendiola 775-623-6343
	Vendor No.: T40139500
	NV Business ID: Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,758,431.81**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$417,674.09 and FY25-27 \$446,919.24

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/05/2024 09:58:20 AM
Division Approval	laaron	01/08/2024 15:17:37 PM
Department Approval	sruyball	01/08/2024 16:39:45 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:02:44 AM
Budget Analyst Approval	nrezaie	01/17/2024 12:49:57 PM
BOE Agenda Approval	nrezaie	01/19/2024 09:37:35 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor

Richard Whitley, MS
Director



DEPARTMENT OF HEALTH AND HUMAN SERVICES


DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023
TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office
FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP) 
RE: Request for Retroactive Start Date of July 1, 2023, for County Match Contracts

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
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- CETS 28566 Nye County
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- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28562**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Lander County Social Services
Agency Code:	403	Contractor Name:	Lander County Social Services
Appropriation Unit:	3243-00	Address:	50 State Route 305
Is budget authority available?:	Yes	City/State/Zip:	Battle Mountain, NV 89820
If "No" please explain:	Not Applicable	Contact/Phone:	Tonia Bakker 775-635-5311
		Vendor No.:	T40262000
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,004,688.79**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$231,608.56 / FY25-27: \$257,693.41

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/21/2023 12:01:01 PM
Division Approval	laaron	12/21/2023 21:17:28 PM
Department Approval	staciew4	12/22/2023 09:25:58 AM
Contract Manager Approval	swes2	12/22/2023 09:51:56 AM
Budget Analyst Approval	nrezaie	01/09/2024 11:36:47 AM
BOE Agenda Approval	nrezaie	01/09/2024 11:36:54 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

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Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

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- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

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To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28563**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Lincoln County
Agency Code: 403	Contractor Name: Lincoln County
Appropriation Unit: 3243-00	Address: PO Box 539
Is budget authority available?: Yes	City/State/Zip: Pioche, NV 89043
If "No" please explain: Not Applicable	Contact/Phone: Denice Brown 775-962-8063
	Vendor No.: T40267400D
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$849,493.49**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$198,886.91 / FY25-27: \$216,868.86

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/21/2023 12:00:00 PM
Division Approval	laaron	12/21/2023 21:18:34 PM
Department Approval	staciew4	12/22/2023 09:26:30 AM
Contract Manager Approval	swes2	12/22/2023 09:57:24 AM
Budget Analyst Approval	nrezaie	01/09/2024 11:48:33 AM
BOE Agenda Approval	nrezaie	01/17/2024 16:43:50 PM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
- CETS 28560 Eureka County
- CETS 28551 Humboldt County
- CETS 28552 Lander County
- CETS 28563 Lincoln County
- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28564**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Lyon County Human Services
Agency Code:	403	Contractor Name:	Lyon County Human Services
Appropriation Unit:	3243-00	Address:	PO Box 1141
Is budget authority available?:	Yes	City/State/Zip:	Silver Springs, NV 89429
If "No" please explain:	Not Applicable	Contact/Phone:	Shayla Holmes 775-577-5009
		Vendor No.:	T40156600A
		NV Business ID:	Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,079,643.83**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$554,161.89 and FY25-27 \$508,493.98

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/05/2024 10:00:17 AM
Division Approval	laaron	01/08/2024 14:46:43 PM
Department Approval	sruyballi	01/08/2024 16:39:22 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:01:45 AM
Budget Analyst Approval	nrezaie	01/17/2024 12:46:43 PM
BOE Agenda Approval	nrezaie	01/19/2024 11:22:24 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
- CETS 28560 Eureka County
- CETS 28551 Humboldt County
- CETS 28552 Lander County
- CETS 28563 Lincoln County
- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28566**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Nye County Health and Human Services
Agency Code:	403	Contractor Name:	Nye County Health and Human Services
Appropriation Unit:	3243-00	Address:	1981 E. Calvada Blvd. North #120
Is budget authority available?:	Yes	City/State/Zip:	Pahrump, NV 89048
If "No" please explain:	Not Applicable	Contact/Phone:	Karyn Smith 775-751-7096
		Vendor No.:	T80044560S
		NV Business ID:	Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,091,742.44**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$513,515.25 and FY25-27 \$526,075.73

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/05/2024 08:56:32 AM
Division Approval	laaron	01/08/2024 15:23:25 PM
Department Approval	sruyballi	01/08/2024 16:40:31 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:03:44 AM
Budget Analyst Approval	nrezaie	01/17/2024 12:43:23 PM
BOE Agenda Approval	nrezaie	01/18/2024 11:17:04 AM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
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- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28567**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Pershing County
Agency Code: 403	Contractor Name: Pershing County
Appropriation Unit: 3243-00	Address: PO Box 820
Is budget authority available?: Yes	City/State/Zip: Lovelock, NV 89419
If "No" please explain: Not Applicable	Contact/Phone: Lacey Donaldson 775-273-2208
	Vendor No.: T81041592A
	NV Business ID: Govenmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,190,017.00**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$289,357.42; FY25-27: \$300,219.86/year

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/13/2023 18:16:03 PM
Division Approval	laaron	12/14/2023 11:40:36 AM
Department Approval	staciew4	12/15/2023 09:24:45 AM
Contract Manager Approval	trya4	12/15/2023 09:43:16 AM
Budget Analyst Approval	nrezaie	01/09/2024 11:55:14 AM
BOE Agenda Approval	nrezaie	01/17/2024 12:54:47 PM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

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Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: **Request for Retroactive Start Date of July 1, 2023, for County Match Contracts**

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

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- CETS 28554 Churchill County
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- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28569**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Washoe County Human Services
Agency Code:	403	Contractor Name:	Washoe County Human Services
Appropriation Unit:	3243-00	Address:	250 S. Center Street
Is budget authority available?:	Yes	City/State/Zip:	Reno, NV 89501
If "No" please explain:	Not Applicable	Contact/Phone:	Amber Howell 775-337-4506
		Vendor No.:	T40283400A
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$23,706,750.47**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$6,096,871.64; FY25-27: \$5,869,959.61/year

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/21/2023 11:58:33 AM
Division Approval	laaron	12/21/2023 21:19:15 PM
Department Approval	staciew4	12/22/2023 09:26:16 AM
Contract Manager Approval	swes2	12/22/2023 09:55:06 AM
Budget Analyst Approval	nrezaie	01/09/2024 15:35:46 PM
BOE Agenda Approval	nrezaie	01/17/2024 12:55:16 PM
BOE Final Approval	Pending	

Joe Lombardo
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023

TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office

FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)

RE: Request for Retroactive Start Date of July 1, 2023, for County Match Contracts

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
- CETS 28560 Eureka County
- CETS 28551 Humboldt County
- CETS 28552 Lander County
- CETS 28563 Lincoln County
- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28570**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	White Pine County Social Services
Agency Code:	403	Contractor Name:	White Pine County Social Services
Appropriation Unit:	3243-00	Address:	297 E. 11th Street E Suite 7
Is budget authority available?:	Yes	City/State/Zip:	Ely, NV 89301
If "No" please explain:	Not Applicable	Contact/Phone:	Desiree Barnson 775-293-6528
		Vendor No.:	T80971176V
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$999,747.86**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$236,222.12 and FY25-27 \$254,508.58

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

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

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

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

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2015 to 2023. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/05/2024 09:19:24 AM
Division Approval	laaron	01/08/2024 15:21:32 PM
Department Approval	sruyball	01/08/2024 16:40:01 PM
Contract Manager Approval	ltuttl1	01/09/2024 07:04:11 AM
Budget Analyst Approval	nrezaie	01/17/2024 12:36:40 PM
BOE Agenda Approval	nrezaie	01/17/2024 12:37:17 PM
BOE Final Approval	Pending	

Joe Lombardo
Governor

Richard Whitley, MS
Director



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Stacie Weeks,
JD MPH
Administrator

MEMORANDUM

DATE: November 28, 2023
TO: Aaron Frantz, Executive Branch Budget Officer, Governor's Finance Office
FROM: Stacie Weeks, Administrator, Division of Health Care Financing and Policy (DHCFP)
RE: Request for Retroactive Start Date of July 1, 2023, for County Match Contracts

This memorandum requests the County Match contracts listed below be approved for a retroactive start date effective July 1, 2023.

- CETS 28553 Carson County
- CETS 28554 Churchill County
- CETS 28556 Clark County
- CETS 28557 Douglas County
- CETS 28558 Elko County
- CETS 28559 Esmeralda County
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- CETS 28564 Lyon County
- CETS 28565 Mineral County
- CETS 28566 Nye County
- CETS 28567 Pershing County
- CETS 28568 Storey County
- CETS 28569 Washoe County
- CETS 28570 White Pine County

Historically, these contracts are retroactive due to falling in line with the approved Biennial budget in which the counties must be aware of funding approved in the Legislatively approved budget. These contracts are delayed due to the need for projections and the division has been struggling with staffing shortages and therefore did not have staff to directly oversee the program until after July 01, 2023.

While these contracts require a retroactive start date to allow the State to collect revenue from the Counties for the non-federal share of medical care of indigent persons, the counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285.

To streamline the County Match contracts process, these contracts shall have a term of four years, rather than the previous two-year terms, to ensure all contracts are in place while new projections are calculated for FY2026 and FY2027. If necessary, contracts will be amended, which will avoid contract terminations and retroactive requests.

Thank you.

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: **28754**

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name: UPTODATE, INC.
Agency Code: 406	Contractor Name: UPTODATE, INC.
Appropriation Unit: 3161-26	Address: 230 3RD AVE
Is budget authority available?: Yes	City/State/Zip: WALTHAM, MA 02451-7528
If "No" please explain: Not Applicable	Contact/Phone: Eve Barys 781/392-2000
	Vendor No.: PUR0005752
	NV Business ID: NV20131471968

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %

Agency Reference #: **40DHHS-S2192**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2027**

Contract term: **3 years and 211 days**

4. Type of contract: **Contract**

Contract description: **Pharmacy Database**

5. Purpose of contract:

This is a new contract to provide user access to a drug information database to generate Nevada drug lists.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$199,666.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 439B.630 the Drug Transparency Program requires access to specific detailed drug information in order to generate and post Nevada Drug Lists.

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

State agencies or employees do not have the resources to develop and maintain a drug information database.

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):

Qengine LLC
EBSCO INFORMATION SERVICES
UpToDate, Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #40DHHS-S2192, 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: 11/02/2022 Anticipated re-bid date: 11/01/2026

- 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:

DPBH, 2015

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

No If "Yes", please provide details of the litigation 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	ijanssen	01/17/2024 10:57:11 AM
Division Approval	ijanssen	01/17/2024 10:57:16 AM
Department Approval	ijanssen	01/17/2024 10:57:20 AM
Contract Manager Approval	ijanssen	01/17/2024 10:57:24 AM
Budget Analyst Approval	cdavis	01/22/2024 08:12:22 AM
BOE Agenda Approval	nrezaie	01/22/2024 09:03:12 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28525**

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 #: 18287

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2024**

Contract term: **241 days**

4. Type of contract: **Contract**

Contract description: **Consulting**

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 Substance Use Response Working Group requirements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$112,244.00**

Other basis for payment: varying rates per cost schedule and deliverables

II. JUSTIFICATION

7. What conditions require that this work be done?

2021 81st Legislative Session, Assembly Bill 374 was passed and 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 SEI is to support and ensure effective implementation and support for the SURG to meet the legislative requirements as outlined in AB 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?

Vendor on State MSA 99SWC-S2340

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:

Statewide contract 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?

Yes

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

Yes

18. a. Is the legal entity active and in good standing with the Nevada 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	12/22/2023 09:36:11 AM
Division Approval	dcastro	12/22/2023 09:36:15 AM
Department Approval	dcastro	12/22/2023 09:36:17 AM
Contract Manager Approval	dcastro	12/22/2023 09:36:20 AM
Budget Analyst Approval	cdavis	01/17/2024 10:41:54 AM
BOE Agenda Approval	nrezaie	01/18/2024 15:06:56 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: **28589**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	KPS/3
Agency Code:	406	Contractor Name:	KPS/3
Appropriation Unit:	3200-19	Address:	500 RYLAND ST STE 300
Is budget authority available?:	Yes	City/State/Zip:	RENO, NV 89502-1662
If "No" please explain:	Not Applicable	Contact/Phone:	Rob Gaedtke 775/686-7439
		Vendor No.:	PUR0004720
		NV Business ID:	NV19941094961
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.			
<input checked="" type="checkbox"/>	General Funds	100.00 %	Fees 0.00 %
	Federal Funds	0.00 %	Bonds 0.00 %
	Highway Funds	0.00 %	Other funding 0.00 %
Agency Reference #:	SA 18283		

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 02/2024

Retroactive? **Yes**

If "Yes", please explain

The existing agreement is scheduled to conclude on 12/31/2023, and the proposed new contract will come into effect upon approval by the BOE, which is anticipated on 2/13/2024. To align with this timeline, the contract will need to retroactively cover the period from 1/1/2023, and a corresponding retro memo must be supplied.

3. Termination Date: **06/30/2025**

Contract term: **1 year and 180 days**

4. Type of contract: **Contract**

Contract description: **Marketing Campaign**

5. Purpose of contract:

This is a new service agreement under statewide contract 99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides marketing services related to gambling addiction.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$146,045.00**

Other basis for payment: Per deliverables cost schedule.

II. JUSTIFICATION

7. What conditions require that this work be done?

(CHAPTER 465 - CRIMES AND LIABILITIES CONCERNING GAMING) Problem Gambling and the priorities of Advisory Committee on Problem Gambling.

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

The selection of this vendor was based on their extensive professional background and expertise in addressing issues related to problem gambling. They will be extending their services beyond the conclusion of the previous DHHS Master Service Agreement, which is set to expire on 12/31/2023.

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):

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

The selection of this vendor was based on their extensive professional background and expertise in addressing issues related to problem gambling. They will be extending their services beyond the conclusion of the previous DHHS Master Service Agreement, which is set to expire on 12/31/2023.

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:

Statewide contract 99SWC-NV23-17886

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

No If "Yes", please provide details of the litigation 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	ijanssen	12/20/2023 17:01:40 PM
Division Approval	ijanssen	12/20/2023 17:01:43 PM
Department Approval	ijanssen	12/20/2023 17:01:45 PM
Contract Manager Approval	ijanssen	12/20/2023 17:01:49 PM
Budget Analyst Approval	cdavis	01/16/2024 07:05:14 AM
BOE Agenda Approval	nrezaie	01/18/2024 07:19:55 AM
BOE Final Approval	Pending	

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: 12/19/2023

TO: John Borrowman, ASO IV
Division of Public and Behavioral Health

THROUGH: Shannon Bennett, Health Bureau Chief
Bureau of Behavioral Health, Wellness and Prevention

FROM: Kim Garcia, Social Service Program Specialist III
Problem Gambling Services *kg*

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL KPS3, Inc., SA# 18283

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

The following information is required:

- Name of Provider: KPS3, Inc.
- Services to be provided: Public Awareness media campaign for problem gambling services.
- Funding source and expenditure category: BA# 3200 - CAT 19; GFUND
- Requested start date of work: 01/01/2024
- Expected execution date of agreement: 01/09/2024
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - Due to the change in processing the Master Service Agreements through state purchasing instead of work orders, this created multiple division wide delays.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:
 - The original contract ends December 31, 2023, and the requested service agreement is to start on January 1, 2024, to prevent delays in services. The direct impact on the services would delay delivery of the public awareness information on problem gambling to individuals that might be impacted or struggling with gambling.
 - Explain how the program/bureau will prevent future retroactive requests:
 - In the future the bureau will work closely with the division's contract unit to streamline the process and allow additional time for review and document processing.

If you have any questions, please contact Kim Garcia at (775) 684-4057 or k.garcia@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: **28634**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	TRIYOUNG, INC.
Agency Code:	406	Contractor Name:	TRIYOUNG, INC.
Appropriation Unit:	3215-24	Address:	14050 North 83rd Ave., Ste 290
Is budget authority available?:	Yes	City/State/Zip:	Peoria, AZ 85381-5650
If "No" please explain:	Not Applicable		
		Contact/Phone:	Julie Young 602-424-1700
		Vendor No.:	T32014954
		NV Business ID:	NV20232967720

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	80.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	20.00 % Pharmaceutical rebates
Agency Reference #:	C18301		

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2025**

Contract term: **1 year and 334 days**

4. Type of contract: **Contract**

Contract description: **Consulting Services**

5. Purpose of contract:

This is a new contract to provide consulting services in support of CAREWare to merge eligibility processing with Clark County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$173,700.00**

Other basis for payment: See cost schedule.

II. JUSTIFICATION

7. What conditions require that this work be done?

TIN 270 was completed in 2021 and then suspended, since then we have completed jProg Cloud Hosting (TIN 270 Update B) and now CAREWare database consolidation and RWISE implementation (TIN 270 Update C).

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

CAREWare is a client level application/database. RWISE is an eligibility tool that is a middleware; providing a user-interface to the CAREWare database for ease of use. TriYoung is the only company that provides this type of software/middleware.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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 #: 231002

Approval Date: 10/10/2023

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

TriYoung is the only company that has an interface such as the one provided.

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	dcastro	01/05/2024 14:36:46 PM
Division Approval	dcastro	01/05/2024 14:36:48 PM
Department Approval	dcastro	01/05/2024 14:36:51 PM
Contract Manager Approval	dcastro	01/05/2024 14:36:55 PM
EITS Approval	ljean	01/08/2024 08:29:27 AM
Budget Analyst Approval	cdavis	01/17/2024 07:36:08 AM
BOE Agenda Approval	nrezaie	01/18/2024 08:02:17 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

Purchasing Use Only:	
Approval#:	231002②

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:		DHHS/DPBH/Office of HIV
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Tory Johnson, Health Program Manager II		702-486-0767 tojohnson@health.nv.gov

1b	Vendor Information:	
	Vendor Name:	TriYoung Inc.
	Contact Name:	Julie Young
	Complete Address: City, State, and Zip Code	14050 N 83 rd Ave., Peoria, Arizona 85381
	Telephone Number:	602-424-1700
	Email Address:	Julie@triyounge.com

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

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	X	No:
	If 'No' Enter Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:	X	No:
	Contract:	Start Date:	Upon approval	End Date: 12/12/2027

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	

	Other (Explain):	

<i>Purchasing Use Only:</i>	
Approval #:	231002ca

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$215,700

	Provide a description of work/services to be performed or services with goods to be purchased:
2	<p>Procurement of a front-facing interface developed by TriYoung, called Ryan White Integrated Statewide Eligibility (RWISE). This is an interface that uses the CAREWare database for eligibility teams to receive, review, and process eligibility for the Ryan White program. RWISE is an extension of CAREWare which allows direct data access as needed for the custom areas of CAREWare. Because RWISE is an extension of CAREWare the information that is being set in RWISE is shared across the CAREWare system and includes the creation of eligibility records that ensure clients are reported on the Ryan White HIV/AIDS Program Services Report (RSR) and AIDS Drug Data Report (ADR), used to meet the reporting requirements to the federal grantee, the US Department of Health and Human Services, Health Resources and Services Administration, HIV/AIDS Bureau (DHHS, HRSA, HAB). Acquiring this interface would also help with having a universal system that is utilized statewide by other Ryan White recipients (A, C, D) and all subrecipients funded by each funding stream. This interface is being shared between Clark County Social Services, Office of HIV, which is the Las Vegas Ryan White Part A recipient for HIV services. Additionally, statewide subrecipients are utilizing a universal eligibility application, but there is not a universal client-level database to place this information. Subrecipients have to mirror their information from Ryan White Part A CAREWare into Ryan White Part B CAREWare are vice versa. Having this interface would eliminate the need to mirror information anymore.</p> <p>The features included in the product include workflow organization for Ryan White eligibility, data entry validation that ensures key data elements are captured for reporting and eligibility, and validation that ensures that clients are reported on the annual RSR, which is a one (1) of the components needed for continued grant funding. The addition of this functionality will increase reporting efficiencies, decrease errors, and organize and create more efficient workflows for Division staff. The new efficiencies will also promote better services to the public the Division serves.</p>

	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?
3	<p>RWISE is a web-based interface developed by TriYoung, Inc. that uses the CAREWare database to provide an interface for eligibility teams to receive, review and process eligibility for the Ryan White Program. The interface is built using the standard program interface available for CAREWare along with direct data access as needed for the custom areas of CAREWare. RWISE is an extension of CAREWare, therefore the data is stored and reportable within CAREWare. The information that is being set in RWISE is shared across the CAREWare system which includes the creation of those tedious Eligibility records that ensure clients are reported on the RSR. CAREWare can be used to run reports on all RWISE data. RWISE allows for the scanning and uploading of eligibility documents which are directly stored in the referral within CAREWare. Service providers can simply select the link and retrieve supporting documentation for their clients. RWISE allows for custom workflow management which will support multilocation application entry/collection and centralized eligibility determination processing. It has features that facilitate data entry required for the ADR/RSR reporting. RWISE provides features such as custom data quality validations, custom calculated fields, and real-time updates of custom fields. TriYoung, Inc. will customize the fields</p>

#231002 @

within the web application extensions to accommodate each program's unique eligibility and data collection requirements. TriYoung's unique data validation tools within the web applications allow the user to ensure the grant required data is collected for RSR, ADR, Continuum of Care, utilization reporting and budget variance reports. These tools prevent the user from moving forward until the required data.

4 Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:
 TriYoung Inc. is the exclusive provider of Web Application Extensions of CAREWare. (RWISE)
 TriYoung, Inc. has an established working relationship with JPROG, the CAREWare developer.

	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
			X
5	a. <i>If yes</i> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.		
	b. <i>If not</i> , why were alternatives not evaluated?		
	TriYoung Inc. is the exclusive provider of Web Application Extensions of CAREWare. (RWISE)		

<i>Purchasing Use Only:</i>	
Approval #:	231002 @

6	Has the agency purchased these services/services with goods in the past? Check One:				Yes	No
	<i>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></i>					X
a. <i>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 <u>CETS contract number(s)</u> associated with each:</i>						
<i>Term</i>		<i>Value</i>	<i>Short Description</i>	<i>Provide Type of Procurement RFP#, RFQ#, Waiver #</i>	<i>CETS #</i>	
<i>Start Date</i>	<i>End Date</i>					
		\$				
		\$				
		\$				
		\$				
		\$				

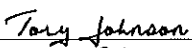
7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
	<i>This would delay the ability for Clark County Social Services, Ryan White Part A and Nevada Office of HIV the ability to have a central client-level database and reduce the need to mirror information into either system, which causes delays in clients being served effectively and efficiently.</i>

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?
	<i>As TriYoung is the only company that has an interface like this, no other research was conducted.</i>

9	Will this purchase obligate the State to this vendor for future purchases? Check One:		Yes	No
	<i>NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</i>		X	
a. <i>If yes, please provide details regarding future obligations or needs.</i>				
<i>There will be a one-time purchase for the implementation of RWISE, however, there will be an ongoing monthly/yearly charge for support and as needed future change requests or enhancements to the application.</i>				

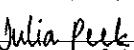
<i>Purchasing Use Only:</i>	
Approval #:	23100200

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.

DocuSigned by:


 Signature of Agency Representative Initiating Request

Tory Johnson	Health Program Manager II - 3215	10/3/2023
Print Name of Agency Representative Initiating Request		Date

DocuSigned by:


 Signature of Agency Head Authorizing Request

Julia Peek	Deputy Administrator	10/3/2023
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:

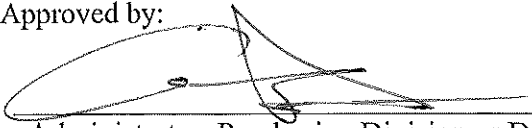
 Representative Providing Review

_____ 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.

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.	<input checked="" type="checkbox"/>
---	-------------------------------------

Approved by:


 Administrator, Purchasing Division or Designee

10/10/23

 Date

Joe Lombardo
Governor



#231002@

Timothy D. Galluzi
State Chief Information Officer

Darla J. Dodge
Deputy CIO- COO

David 'Ax' Axtell
Deputy CIO - CTO

Robert "Bob" Dehnhardt
Deputy CIO - CISO

**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 | Fax: (775) 687-9097

M E M O R A N D U M

TO: Julia Peek, Deputy Administrator, DHHS
Jennifer Bender, Management Analyst III, DHHS
Lorraine McMullen, IT Manager I, DHHS
Tory Johnson, Section Manager, DHHS
Mona Lisa Schmidt, Client Technologies Specialist III (Contractor), 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 – DHHS – TIN 270 – RWISE/CAREWARE PROJECT – Update C – BA 3215

DATE: October 2, 2023

We have completed our review for the Department of Health and Human Services' (DHHS) – RWISE/CAREWARE PROJECT – TIN 270, Update C.

The submitted TIN, for an estimated value of \$215,700.00 in the FY24/FY25 biennium (83% ADAP Base grant and 17% Pharmaceutical rebates), is to update contact information and to move forward with the RWISE implementation and CAREWARE database consolidation including vendor and cost updates.

The implementation of TriYoung's RWISE, an integrated extension of the existing CAREWare database, aims to optimize the Ryan White Program's operational efficiency. This sophisticated interface facilitates

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seamless eligibility assessments, while also ensuring compliance with federal reporting requirements to the U.S. Department of Health and Human Services. By incorporating workflow enhancements and robust data validation mechanisms, the Division expects to realize significant improvements in reporting accuracy, reduced errors, and increased staff productivity, thereby elevating the quality of public services provided.

The State of Nevada Division of Public and Behavioral Health hosts the Ryan White HIV/AIDS Part B Program. The Part B Program provides medications and services to eligible Nevadans living with HIV/AIDS. The different Ryan White programs in Nevada collaborate to ensure that services are provided to meet the needs of clients. The goals and objectives follow those of the National HIV/AIDS Strategy goals and are as follows:

- Reducing new infections
- Increasing access to care and improving outcomes for people living with HIV
- Reducing HIV related disparities and health inequities

Nevada Part B CAREWare is a secure, centralized, software application designed to report client-level data from HIV services programs funded through Part B of the Ryan White HIV/AIDS Program, as well as through state dollars. Two disparate systems, CAREWare Part A and CAREWare Part B, need to be consolidated into a single system to prevent duplicate entry and to consolidate expense.

The agency considers the investment and final implementation to have an ongoing low security risk because CAREWare instances are hosted in a HIPAA-compliant manner through reserving secure PII-designated servers and other AWS services. The agency expect to have four interfaces with the solution: Medicare import, ADAP eligibility export, eHARS lab data import, and a dental services import.

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



Timothy D. Galluzi
State Chief Information Officer

Darla J. Dodge
Deputy CIO- COO

David 'Ax' Axtell
Deputy CIO - CTO

Robert "Bob" Dehnhardt
Deputy CIO - CISO

STATE OF NEVADA
GOVERNOR'S OFFICE
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M E M O R A N D U M

TO: Julia Peek, Deputy Administrator, DHHS
Jennifer Bender, Management Analyst III, DHHS
Lorraine McMullen, IT Manager I, DHHS
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Mona Lisa Schmidt, Client Technologies Specialist III (Contractor), 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 – DHHS – TIN 270 – RWISE/CAREWARE PROJECT – Update C – BA 3215

DATE: October 2, 2023

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The submitted TIN, for an estimated value of \$215,700.00 in the FY24/FY25 biennium (83% ADAP Base grant and 17% Pharmaceutical rebates), is to update contact information and to move forward with the RWISE implementation and CAREWARE database consolidation including vendor and cost updates.

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The State of Nevada Division of Public and Behavioral Health hosts the Ryan White HIV/AIDS Part B Program. The Part B Program provides medications and services to eligible Nevadans living with HIV/AIDS. The different Ryan White programs in Nevada collaborate to ensure that services are provided to meet the needs of clients. The goals and objectives follow those of the National HIV/AIDS Strategy goals and are as follows:

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Nevada Part B CAREWare is a secure, centralized, software application designed to report client-level data from HIV services programs funded through Part B of the Ryan White HIV/AIDS Program, as well as through state dollars. Two disparate systems, CAREWare Part A and CAREWare Part B, need to be consolidated into a single system to prevent duplicate entry and to consolidate expense.

The agency considers the investment and final implementation to have an ongoing low security risk because CAREWare instances are hosted in a HIPAA-compliant manner through reserving secure PII-designated servers and other AWS services. The agency expect to have four interfaces with the solution: Medicare import, ADAP eligibility export, eHARS lab data import, and a dental services import.

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: 20068	Amendment Number: 5	
Agency Name: DHHS - WELFARE AND SUPPORTIVE SERVICES	Legal Entity Name: FIDELITY INFORMATION SERVICES, LLC	Contractor Name: FIDELITY INFORMATION SERVICES, LLC
Agency Code: 407	Address: 11000 W. Lake Park Drive	
Appropriation Unit: 3228-12	City/State/Zip: Milwaukee, WI 53224-3003	
Is budget authority available?: Yes	Contact/Phone: 414/357-9133	
If "No" please explain: Not Applicable	Vendor No.: T27038949A	
	NV Business ID: NV20191497453	

To what State Fiscal Year(s) will the contract be charged? **2019-2026**

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

<input checked="" type="checkbox"/>	General Funds	29.00 %	Fees	0.00 %
<input checked="" type="checkbox"/>	Federal Funds	71.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2018**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2026**

Contract term: **8 years and 1 day**

4. Type of contract: **Contract**

Contract description: **EBT Services**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides ongoing Electronic Benefit Transfer services for Supplemental Nutrition Assistance Program and Temporary Assistance for Needy Families benefits. This amendment increases the maximum amount from \$15,175,100 to \$19,403,904 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:	\$8,880,000.00	\$8,880,000.00	\$8,880,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
d. Amendment 4:	\$6,295,100.00	\$6,295,100.00	\$6,295,100.00	Yes - Action
2. Amount of current amendment (#5):	\$4,228,804.00	\$4,228,804.00	\$4,228,804.00	Yes - Action
3. New maximum contract amount:	\$19,403,904.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Supplemental Nutrition Assistance Program requires EBT services to Welfare clients who meet the requirements for assistance.

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

State employees do not have the resources or expertise to perform this type of 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):

Solutran Inc.
Conduent Financial Information
Fidelity Information Services

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 3292, and in accordance with NRS 333, the selected the vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 08/16/2017 Anticipated re-bid date: 06/01/2025

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently under contract with DWSS and DPBH and providing satisfactory services.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	cbuscay	12/21/2023 11:32:02 AM
Division Approval	cbuscay	12/21/2023 11:32:06 AM
Department Approval	rthomps1	01/04/2024 11:29:43 AM
Contract Manager Approval	mpomerle	01/16/2024 10:06:26 AM
Budget Analyst Approval	afrantz	01/16/2024 14:03:57 PM
BOE Agenda Approval	afrantz	01/16/2024 14:04:05 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: **28649**

Agency Name: DHHS - WELFARE AND SUPPORTIVE SERVICES	Legal Entity Name: SOCIAL ENTREPRENEURS, INC.
Agency Code: 407	Contractor Name: SOCIAL ENTREPRENEURS, INC.
Appropriation Unit: 3233-45	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 A 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 #: 407

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 02/2024

Retroactive? **Yes**

If "Yes", please explain

Per the All State Agency Memo that was issued by Purchasing on November 28, 2023, Agencies currently engaged in services under contracts from previous solicitation 40DHHS-S30 (colloquially referred to as the DHHS MSA) must terminate or transition projects to a service agreement under a new statewide contract prior to December 31, 2023. Due to the timing of the released memo (November 28, 2023) with these specific terms, our agency missed the December and January BOE deadlines.

3. Termination Date: **06/30/2025**

Contract term: **1 year and 180 days**

4. Type of contract: **Other (include description): Service Agreement via Statewide Contract 99SWC-NV23-17884**

Contract description: **Homeless Study**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting and data analysis services. This service agreement provides consulting and data analysis to identify services needed to assist Nevada youth experiencing homelessness.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$394,185.50**

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?

Youth Homeless project and study derived from the availability of Special Use Funding through the American Rescue Plan Act, Federal Grant #23F1327130.

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

State employees do not have the resources or expertise to provide this service.

9. Were quotes or proposals solicited? **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):

Public Health Support Services
Comagien Health
Nevada Public Health Foundation

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP # 99SWC-S2340 and in accordance with NRS 333. Statewide contract is Permissive for State Agencies.

d. Last bid date: 04/17/2023 Anticipated re-bid date: 04/17/2026

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:

Contractor currently is under contract with the State of Nevada and other using 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:
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:

Laura Sizemore, Social Services Program Specialist II Ph: 775-684-0766

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbusgay	12/19/2023 15:49:29 PM
Division Approval	cbusgay	12/19/2023 15:49:32 PM
Department Approval	rthomps1	12/20/2023 08:02:29 AM
Contract Manager Approval	mpomerle	12/20/2023 09:33:55 AM
Budget Analyst Approval	afrantz	01/18/2024 08:21:40 AM
BOE Agenda Approval	afrantz	01/18/2024 08:28:51 AM

Joe Lombardo
Governor

Richard Whitley, MS
Director



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF WELFARE AND SUPPORTIVE SERVICES


Helping people. It's who we are and what we do.



Robert Thompson
Administrator

December 13, 2023

To: Aaron Frantz, Executive Branch Budget Officer II, Governor's Finance Office

From: Robert H. Thompson, Administrator, Division of Welfare and Supportive Services 

SUBJECT: **Retroactive approval of the Service Agreement between the Division of Welfare and Supportive Services (DWSS) and Social Entrepreneurs Inc. for the Youth Homeless Study.**

Per the All-State Agency Memo that was issued by the State of Nevada Purchasing Division of the Department of Administration (State Purchasing) on November 28, 2023, Agencies currently engaged in services under contracts from previous solicitation 40DHHS-S30 (colloquially referred to as "the DHHS MSA") must terminate or transition projects to a service agreement under a new statewide contract prior to December 31, 2023.

Our agency was under contract with Social Entrepreneurs, Inc. through December 31, 2023, for consulting and data analysis services through the DHHS MSA. However, due to the timing of the released memo (November 28, 2023) with the terms specified above, our agency was unable to meet either the December or January BOE deadlines.

Our agency respectfully requests that this Service Agreement be approved to be retroactively dated to January 1, 2024, to avoid a disruption in the Youth Homeless study.

Thank you for your consideration. If you have any questions, please contact Monique Pomerleau, Contract Manager, at 775-684-0678/ mpomerleau@dwss.nv.gov.

Facilities, Allocations, Audit & Contract Team (FACT Unit)

1470 East College Parkway • Carson City, Nevada 89706

775-684-0500 • Fax 775-684-0681 • dwsscontracts@dwss.nv.gov

Page 1 of 1

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: 23160	Amendment Number: 2	
	Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS
Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Contractor Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS
Agency Code: 409	Address:	4505 Maryland Parkway, MS 1055
Appropriation Unit: 3145-10	City/State/Zip	Las Vegas, NV 89154-1055
Is budget authority available?: No	Contact/Phone:	Lori M. Ciccone 702-895-1357
If "No" please explain: Approval of this contract amendment is contingent upon approval of FY24 work program #C66311 & FY25 work program C66312.	Vendor No.:	D35000813
	NV Business ID:	Governmental Entity
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.

<input checked="" type="checkbox"/> General Funds	45.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	55.00 %	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 02/2024

Retroactive? **Yes**

If "Yes", please explain
This retroactive adjustment accounts for the impact of university employee COLA adjustments.

3. Previously Approved Termination Date: **06/30/2026**

Contract term: **6 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **Training Services**

5. Purpose of contract:
This is the second amendment to the original interlocal agreement which provides ongoing development of a child welfare training infrastructure and an intensive quality training and professional development system for undergraduate and graduate social work students. This amendment increases the maximum amount from \$7,600,386 to \$8,119,111 and adjusts the deliverables budget to remove unexpended prior year contract authority, add Families First Act transition and prevention-based training curriculum and funding, and fund cost of living adjustments for university contract dedicated staff. This contract is contingent upon IFC approval of work programs #C66311 and #C66312.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$3,800,193.00	\$3,800,193.00	\$3,800,193.00	Yes - Action
a. Amendment 1:	\$3,800,193.00	\$3,800,193.00	\$3,800,193.00	Yes - Action
2. Amount of current amendment (#2):	\$518,725.00	\$518,725.00	\$518,725.00	Yes - Action

3. New maximum contract amount: \$8,119,111.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal and State requirements for training of child welfare staff who serve children that have been abused, neglected or abandoned.

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

The State does not have an in-house training program or the capacity to conduct training to child welfare staff that would meet the federal/state requirements of initial and on-going training.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: Exempt (Per statute)

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

NRS 277.180

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

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

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

III. OTHER INFORMATION

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

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

UNLV's Indirect Rate for this NPT Contract is 8%.

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

No

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

No

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

Yes If "Yes", please explain

University of Nevada, Las Vegas.

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

Yes If "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 other agencies and the Division for these specific services 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 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	rmayhall	10/25/2023 14:42:25 PM
Division Approval	hbugg	11/07/2023 10:10:23 AM
Department Approval	mwillia9	11/07/2023 13:30:58 PM
Contract Manager Approval	sknigge	12/19/2023 09:31:00 AM
Budget Analyst Approval	pokeefe	01/10/2024 09:26:12 AM
BOE Agenda Approval	nrezaie	01/10/2024 09:31:57 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

MEMORANDUM

TO: Philene O'Keefe, Executive Branch Budget Officer 1, Governor's Finance Office

THROUGH: Heather Bugg, ASO IV *Heather Bugg*

FROM: Maria Janos, Social Services Chief 3 *Maria Janos*

DATE: October 25, 2023

SUBJECT: Retroactive Contract Request, CETS #23160 - University of Nevada, Las Vegas (UNLV)
Partnership for Training Amendment #2

A retroactive contract amendment is being requested between the Division of Child and Family Services (DCFS) and UNLV effective July 1, 2023, through the term of the contract to account for Cost Of Living Adjustments (COLA) for university staff funded through this contract. University classified staffing COLA increases were approved by the 2023 Legislative Session and those increases have been extended to the university staffing dedicated to support the Nevada Partnership for Training contract.

This amendment includes COLA adjustments of 12% in SFY 2024; 4% in SFY 2025; and 4% in SFY 2026. SFY 2024 COLAs were implemented effective July 1, 2023. COLA increases for the two remaining fiscal years have yet to be finalized but the university staff have indicated the percentage increase listed above is the minimum percentage increase that will be approved.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to call me at (702) 486-4226.

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: **28550**

Agency Name: DEPARTMENT OF WILDLIFE	Legal Entity Name: STANTEC CONSULTING SERVICES, INC.
Agency Code: 702	Contractor Name: STANTEC CONSULTING SERVICES, INC.
Appropriation Unit: 4457-28	Address: 5390 KIETZKE LANE SUITE 103
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: JASON DUKES 775/741-0922
	Vendor No.: T81023418B
	NV Business ID: NV20101021081

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 %	X	Fees	50.00 % Habitat Conservation
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	50.00 % Heritage Account

Agency Reference #: 24-39

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2025**

Contract term: **1 year**

4. Type of contract: **Contract**

Contract description: **Consulting Services**

5. Purpose of contract:

This is a new contract to provide engineering designs, permitting, and planning for a permanent fish management structure at Third Creek in Incline Village.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$129,875.16**

II. JUSTIFICATION

7. What conditions require that this work be done?

A fish management structure is needed to better manage the spawning run of wild rainbow trout moving into Third Creek from Lake Tahoe, and in the future, spawning runs of Lahontan Cutthroat Trout.

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

Contractor has specialized expertise and software, as well as experience working in the Tahoe Basin.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Stantec provides engineering services unique to the success of the project and has experience working in the Tahoe Basin, in regards to permitting.

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:

Samuel Sedillo, Fisheries Biologist Ph: (775)688-1882

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	11/28/2023 08:37:43 AM
Division Approval	cbalcon	11/29/2023 14:05:42 PM
Department Approval	jneubau2	12/28/2023 08:36:37 AM
Contract Manager Approval	amedin4	01/16/2024 13:51:06 PM
Budget Analyst Approval	dspeed1	01/16/2024 16:48:09 PM
BOE Agenda Approval	vmilazz1	01/22/2024 11:55:17 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: **28674**

Agency Name: **DEPARTMENT OF WILDLIFE**
Agency Code: **702**
Appropriation Unit: **4460-07**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **BASIN ENGINEERING CORPORATION**
Contractor Name: **BASIN ENGINEERING CORPORATION**
Address: **1070 E AULTMAN ST**
City/State/Zip: **ELY, NV 89301-2507**
Contact/Phone: **Emil Almberg 775/289-9800**
Vendor No.: **T29030781**
NV Business ID: **NV20101133074**
To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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	75.00 %	Sportsmen Revenue
X Federal Funds	25.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: 24-47

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2028**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Civil Engineering**

5. Purpose of contract:

This is a new contract to provide ongoing civil engineering design, surveying, and consulting services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$178,664.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Failing facilities that need to be rehabilitated and improved.

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

With other responsibilities, scope of work is too large for the department's engineering staff and Basin Engineering has extensive experience with design in railroad and state highway rights-of way.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Extensive experience obtaining permits in railroad and state highway rights-of-ways.

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, 2015 - September 30, 2023

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

No If "Yes", please provide details of the litigation 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:

Rodd Lighthouse , Supervisor Professional Engineer Ph: (775) 688-1586

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	12/27/2023 09:46:15 AM
Division Approval	cbalcon	12/29/2023 11:09:59 AM
Department Approval	jneubau2	01/08/2024 12:00:14 PM
Contract Manager Approval	abarredo	01/08/2024 12:02:28 PM
Budget Analyst Approval	dspeed1	01/16/2024 17:32:14 PM
BOE Agenda Approval	vmilazz1	01/19/2024 18:47:21 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28316**

Agency Name: **DEPARTMENT OF WILDLIFE**
Agency Code: **702**
Appropriation Unit: **4464-13**

Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **WASHINGTON STATE UNIVERSITY**
Contractor Name: **WASHINGTON STATE UNIVERSITY**
Address: **PO BOX 647034**
City/State/Zip: **PULLMAN, WA 99164-7034**
Contact/Phone: **509/335-3373**
Vendor No.: **T11361100C**
NV Business ID: **GOVERNMENTAL ENTITY**

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 #: 24-29

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2028**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **Lab Testing**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing veterinary diagnostic services, necropsy services, and pathogen testing services from samples and tissues collected from Nevada's wildlife.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$350,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

NDOW is charged with managing Nevada's wildlife. Health monitoring and mortality investigation is part of proper management.

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

The Nevada Animal Disease Lab is not equipped to test for many of these pathogens and does not employ a board certified pathologist.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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 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:

Nate LaHue, Wildlife Health Specialist Ph: (775)688-1813

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	10/03/2023 10:58:45 AM
Division Approval	cbalcon	10/11/2023 10:43:37 AM
Department Approval	jneubau2	12/13/2023 11:41:44 AM
Contract Manager Approval	amedin4	01/16/2024 14:06:48 PM
Budget Analyst Approval	dspeed1	01/16/2024 17:41:41 PM
BOE Agenda Approval	vmilazz1	01/19/2024 18:39:15 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **23981** Amendment Number: **3**

Agency Name: **DEPARTMENT OF WILDLIFE** Legal Entity Name: **LINCOLN COUNTY CONSERVATION DISTRICT**

Agency Code: **702** Contractor Name: **LINCOLN COUNTY CONSERVATION DISTRICT**

Appropriation Unit: **4467-14** Address: **DISTRICT PO BOX 445**

Is budget authority available?: **Yes** City/State/Zip: **CALIENTE, NV 89008**

If "No" please explain: **Not Applicable** Contact/Phone: **AMANDA PIKE 775/726-3101**

Vendor No.: **T81000350**

NV Business ID: **GOVERNMENT ENTITY**

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

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

General Funds	0.00 %	X	Fees	44.00 %	Habitat Conservation
X Federal Funds	56.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: 21-49

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/12/2021**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2024**

Contract term: **3 years and 264 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Habitat Improvement**

5. Purpose of contract:

This is the third amendment to the original interlocal agreement which provides habitat improvement projects on private and public lands. This amendment increases the maximum amount from \$64,000 to \$120,500 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:	\$12,000.00	\$12,000.00	\$12,000.00	Yes - Info
a. Amendment 1:	\$35,000.00	\$35,000.00	\$47,000.00	Yes - Info
b. Amendment 2:	\$17,000.00	\$15,000.00	\$64,000.00	Yes - Info
2. Amount of current amendment (#3):	\$56,500.00	\$56,500.00	\$120,500.00	Yes - Action
3. New maximum contract amount:	\$120,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Habitat degradation within the jurisdiction of LCCD.

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

NDOW employees do not have the knowledge or certifications for much of the work such as herbicide application, use of chainsaws for PJ treatments, stream bank restoration, and relationships with private landowners where habitat degradation has occurred. NDOW 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, NDOW. All work was satisfactory and met all requirements and timelines.

14. Is the contractor currently involved in litigation with the State 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	jwilkin3	12/22/2023 08:49:46 AM
Division Approval	cbalcon	12/27/2023 10:37:10 AM
Department Approval	jneubau2	01/04/2024 07:57:22 AM
Contract Manager Approval	amedin4	01/16/2024 09:27:08 AM
Budget Analyst Approval	dspeed1	01/16/2024 13:27:10 PM
BOE Agenda Approval	vmilazz1	01/22/2024 12:03:32 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: **28591**

Agency Name: DCNR - ENVIRONMENTAL PROTECTION	Legal Entity Name: Nevada Water Environment Association, Inc.
Agency Code: 709	Contractor Name: Nevada Water Environment Association, Inc.
Appropriation Unit: 3186-34	Address: PO Box 98235
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89235
If "No" please explain: Not Applicable	Contact/Phone: Sabrina Dodos 562-810-6560
	Vendor No.: T81092793
	NV Business ID: NV19881013851

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 % Wastewater Operator
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP # 70CNR-S2479

2. Contract start date:

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

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/13/2028**

Contract term: **4 years and 44 days**

4. Type of contract: **Contract**

Contract description: **Wastewater Oper Cert**

5. Purpose of contract:

This is a new contract to provide a qualified vendor to administer the certification of wastewater treatment system operators throughout the state.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$158,525.00**

Other basis for payment: Monthly based on work completed.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 445A.425 requires the State Environmental Commission to determine and prescribe the qualifications and duties of the supervisors and technicians responsible for the operation and maintenance of plants for sewage treatment and must certify them through NDEP.

NAC445A.288 state if NDEP chooses not to operate the program for the certification of operators of plants for sewage treatment, NDEP shall enter into an agreement with an approved designee pursuant to which the designee agrees to operate the program.

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

The State would have to hire full time employees, purchase necessary materials, and create a certification board to effectively manage this program. The expense is greater than this contract.

9. Were quotes or proposals solicited? **Yes**

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

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

Columbia Southern University
CampusEAI
University of Madison WI

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #70CNR-S2479, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Division of Environmental Protection November 1, 2014 to current. They have been deemed satisfactory.

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	12/04/2023 12:49:43 PM
Division Approval	adixo1	12/04/2023 13:01:44 PM
Department Approval	adixo1	12/07/2023 08:13:57 AM
Contract Manager Approval	bbeac2	12/07/2023 08:14:15 AM
Budget Analyst Approval	rjacob3	01/16/2024 13:20:30 PM
BOE Agenda Approval	vmilazz1	01/22/2024 12:09:29 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **27878**

Agency Name: B&I - INSURANCE DIVISION	Legal Entity Name: NCS Pearson, Inc.
Agency Code: 741	Contractor Name: Pearson VUE, a business of NCS Pearson, Inc.
Appropriation Unit: 3813-04	Address: 5601 Green Valley Drive
Is budget authority available?: Yes	City/State/Zip: Bloomington, MN 55437
If "No" please explain: Not Applicable	Contact/Phone: Jennifer Cerciello 952-681-3000
	Vendor No.: PUR0000378
	NV Business ID: NV19841011933

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Fees charged to applicants

Agency Reference #: RFP # 74BAI-S2306

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

Contract overlooked due to Fiscal Unit's staffing changes.

3. Termination Date: **09/30/2027**

Contract term: **4 years and 30 days**

4. Type of contract: **Contract**

Contract description: **Insurance Test**

5. Purpose of contract:

This is a new contract to provide ongoing testing services and administration of continuing education and pre-licensing programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$460,000.00**

Other basis for payment: No cost to agency, contractor will charge applicant directly.

II. JUSTIFICATION

7. What conditions require that this work be done?

Testing is required for insurance licensure.

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 an outside vendor.

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):

Willis Towers Watson
PSI Services
CSAA Insurance

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #74BAI-S2306, 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: 03/29/2023 Anticipated re-bid date: 03/01/2027

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:

Business and Industry, Insurance Division
Satisfactory

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

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

Not Applicable

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

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

No b. If "No", please explain:

Pearson VUE is a business of NCS Pearson, Inc.

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

Yes

18. 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	jhanse4	08/30/2023 09:58:04 AM
Division Approval	jhanse4	08/30/2023 09:58:07 AM
Department Approval	jhanse4	08/31/2023 15:34:59 PM
Contract Manager Approval	jhanse4	08/31/2023 15:35:02 PM
Budget Analyst Approval	jhelto1	01/17/2024 12:05:27 PM
BOE Agenda Approval	stilly	01/22/2024 15:10:01 PM
BOE Final Approval	Pending	

STATE OF NEVADA

JOE LOMBARDO
Governor



DR. KRISTOPHER SANCHEZ
Director

PERRY FAIGIN
Deputy Director

MARCEL F. SCHAEERER
Deputy Director

DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF THE DIRECTOR
Fiscal Services Unit

MEMORANDUM

DATE: 12/20/2023

TO: Jenny Helton, Executive Branch Officer 1
Nevada Governor's Finance Office, Budget Division

FROM: Emily Cervi, ASO II
Department of Business and Industry

SUBJECT: Retroactive Approval Request: Pearson Vue Contract #27878

The purpose of this memo is to request retroactive approval of the Division of Insurance's Pearson Vue Contract #27878. This contract was submitted by the Division of Insurance to the Department's fiscal staff for approval at the September BOE. However, it was overlooked by the Fiscal Unit due to changes in staffing. Once it was discovered that the contract had been overlooked, it was sent to the GFO for approval at the February BOE. In the future, the Fiscal Unit will be calendaring all future BOE contracts to make sure contracts are not missed and that contracts are executed in a timely manner.

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: **28376**

Agency Name:	DETR - EMPLOYMENT SECURITY	Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO TRUCKEE MEADOWS COMMUNITY COLLEGE
Agency Code:	902	Contractor Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO TRUCKEE MEADOWS COMMUNITY COLLEGE
Appropriation Unit:	4770-12	Address:	TRUCKEE MEADOWS COMM COLLEGE 2601 ENTERPRISE RD
Is budget authority available?:	No	City/State/Zip	Reno, NV 89512
If "No" please explain: Contingent upon approval of Work Program C66846, scheduled for February 2024 IFC meeting.		Contact/Phone:	Julie Ellsworth Baker 775-673-7155
To what State Fiscal Year(s) will the contract be charged?		Vendor No.:	D35000812
		NV Business ID:	Governmental Entity
			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 % CAREER ENHANCEMENT PROGRAM

Agency Reference #: 3801-25-ESD

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 149 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **TMCC-STEP (CERT)**

5. Purpose of contract:

This is a new interlocal agreement to provide workshops in Emergency Management for students to pursue entry-level public safety and healthcare certifications. This interlocal agreement is contingent upon IFC approval of work program #C66846.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,347.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Truckee Meadows Community College (TMCC) Students Training for Emergency Professions (STEP) Program is designed to foster collective action among Truckee Meadows Community College (TMCC) , the Department of Employment, Training and Rehabilitation (DETR) and Emergency Management organizations and employers in the Northern Nevada Region, with the goal of enhancing the skills of emergency management professionals and provide career counseling and scholarship support.

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

DETR does not have the resources to accomplish this program alone. The program will capitalize on the existing curriculum and resources of TMCC and its partners to focus on industry-determined priorities in order to align training with industry demands.

9. Were quotes or proposals solicited? No
Was the solicitation (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?

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

3.7%

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 3704-25-ESD for TMCC ECE project which is meeting performance measures

14. Is the contractor currently involved in litigation with the State 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	kwoodwar	12/08/2023 14:36:39 PM
Division Approval	sterr2	12/08/2023 14:50:14 PM
Department Approval	sterr2	12/08/2023 14:50:17 PM
Contract Manager Approval	wcune1	12/15/2023 09:30:31 AM
Budget Analyst Approval	twollan1	01/16/2024 13:48:59 PM
BOE Agenda Approval	mranki1	01/17/2024 08:05:02 AM
BOE Final Approval	Pending	

**EMPLOYMENT SECURITY
DIVISION**



JOE LOMBARDO
Governor

CHRISTOPHER SEWELL
Director

KRISTINE NELSON
ESD Administrator

MEMORANDUM

DATE: November 3, 2023

TO: Amy Stephenson, Clerk
State Board of Examiners (BOE)

FROM: Karlene Johnson, ESD Deputy Administrator
Department of Employment, Training and Rehabilitation (DETR)

SUBJECT: Retroactive Contract for Emergency Management Training with Truckee Meadows Community College

The Department of Employment, Training and Rehabilitation (DETR) respectfully requests approval of the attached contract with Truckee Meadows Community College (TMCC) be retroactive to December 12, 2023.

Truckee Meadows Community College needs to begin to prepare for the courses to start in the Winter 2024 semester. If they must wait for the contract to be executed in January, they will not be able to offer the courses in time. TMCC will also need the additional time to set up the curriculum and ensure adequate staffing.

Thank you for your consideration of this request.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28459**

Agency Name: DETR - EMPLOYMENT SECURITY	Legal Entity Name: Nevadaworks
Agency Code: 902	Contractor Name: Nevadaworks
Appropriation Unit: 4770-00	Address: 639 Isbell Rd
Is budget authority available?: Yes	Ste 420
If "No" please explain: Not Applicable	City/State/Zip: Reno, NV 89509
	Contact/Phone: Milt Stewart 775-284-1333
	Vendor No.: T27003177
	NV Business ID: Governmental agency
To what State Fiscal Year(s) will the contract be charged?	2024-2028

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

Agency Reference #: 3805-28-ESD

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2027**

Contract term: **3 years and 334 days**

4. Type of contract: **Revenue Contract**

Contract description: **CareerHub seats**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide reimbursement of shared costs for use of space in EmployNV Career Hubs in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$170,875.48**

Payment for services will be made at the rate of \$10,679.72 per quarter

Other basis for payment: As invoiced by the state on a quarterly basis (\$10,679.72/Quarter). Total revenue contract not to exceed: \$170,875.48.

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract for reimbursement of shared costs for use of EmployNV Career Hub sites by the Local Workforce Board (Nevadaworks).

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

State employees are unable to manage the service requirements of this agreement.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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

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 ESD and DETR since June 2003.

14. Is the contractor currently involved in litigation with the State 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	sterr2	12/07/2023 14:57:16 PM
Division Approval	sterr2	12/07/2023 14:57:18 PM
Department Approval	sterr2	12/07/2023 14:57:24 PM
Contract Manager Approval	wcune1	12/15/2023 12:53:55 PM
Budget Analyst Approval	twollan1	01/16/2024 14:59:35 PM
BOE Agenda Approval	mranki1	01/17/2024 09:04:59 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28745**

Agency Name: **PUBLIC EMPLOYEES' BENEFITS PROGRAM**
Agency Code: **950**
Appropriation Unit: **1338-40**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: Sachin Jain
Contractor Name: **Carrum Health**
Address: **1212 NE 69th St**
City/State/Zip: **Seattle, WA 98115**
Contact/Phone: Brook West 650-690-5309
Vendor No.:
NV Business ID: NV20232889023

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 % Premium and Subsidy Revenue
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP# 95PEBP-S2359 tb

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2028**

Contract term: **4 years and 150 days**

4. Type of contract: **Contract**

Contract description: **Centers of Excellenc**

5. Purpose of contract:

This is a new contract to provide a network of optional bundled payments, concierge services, and travel for procedures.

6. NEW CONTRACT

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

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

II. JUSTIFICATION

7. What conditions require that this work be done?

The PEBP Board requested PEBP staff issue an RFP for this service.

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

PEBP staff do not have the network or expertise to provide this service.

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):

Trasarent

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #95PEBP-S2359, 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: 08/08/2023 Anticipated re-bid date: 08/08/2027

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

NT7 Business License Other

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

No b. If "No", please explain:

Transacting business name: Carrum Health

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mweyland	01/08/2024 13:59:16 PM
Division Approval	mweyland	01/10/2024 13:06:44 PM
Department Approval	cglover	01/10/2024 13:19:34 PM
Contract Manager Approval	mweyland	01/10/2024 13:39:14 PM
Budget Analyst Approval	mbro28	01/26/2024 15:30:49 PM
BOE Agenda Approval	stilley	01/26/2024 15:57:09 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	7 DAY DENTAL OF NEVADA, LLC DBA ANYDAY DENTAL	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing dental services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28609		
2.		VARIOUS STATE AGENCIES	BROADBENT & ASSOCIATES, INC.	OTHER: VARIOUS AGENCIES	\$11,000,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28693		
3.		VARIOUS STATE AGENCIES	CARMEL COMMUNITY LIVING CORPORATION DBA OVERTURE	OTHER: VARIOUS AGENCIES	\$12,000,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing disabilities support and supportive living arrangement services. This amendment increases the maximum amount from \$10,000,000 to \$22,000,000 due to the increased need for these services.				
		Term of Contract:	05/10/2022 - 01/31/2026	Contract # 25732		
4.		VARIOUS STATE AGENCIES	EMERALD STANTON, LLC	OTHER: VARIOUS AGENCIES	\$1,800,000	
	Contract Description:	This is a new contract to provide ongoing counseling and related mental health, social worker, and substance abuse counseling services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28701		
5.		VARIOUS STATE AGENCIES	ENVIRONMENTAL PROTECTION SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$9,750,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28695		
6.		VARIOUS STATE AGENCIES	HYDROGEOLOGIC, INC.	OTHER: VARIOUS AGENCIES	\$1,700,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28699		
7.		VARIOUS STATE AGENCIES	INDIGO-BANE, LLC DBA LO-GO-PAE-DICS	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing adult daycare, autism treatment assistance, disabilities support, early intervention, home health care, rehabilitation, speech pathology, and therapy and counseling services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28733		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
8.		VARIOUS STATE AGENCIES	ICON SPEECH & LANGUAGE THERAPY, LLC	OTHER: VARIOUS AGENCIES	\$200,000	
	Contract Description:	This is a new contract to provide ongoing speech pathology, therapy, and counseling services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28616		
9.		VARIOUS STATE AGENCIES	IN THE FLOW WORSHIP CENTER	OTHER: VARIOUS AGENCIES	\$5,300,000	
	Contract Description:	This is a new contract to provide ongoing educational tutoring and support, employment support, and group home services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28700		
10.		VARIOUS STATE AGENCIES	MCGINLEY & ASSOCIATES, INC.	OTHER: VARIOUS AGENCIES	\$11,700,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28743		
11.		VARIOUS STATE AGENCIES	MIKOLAJ PSYCHIATRY, PLLC	OTHER: VARIOUS AGENCIES	\$600,000	
	Contract Description:	This is a new contract to provide ongoing mental health and psychiatry services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28689		
12.		VARIOUS STATE AGENCIES	MOUNTAIN STATES RESTORATION, LLC	OTHER: VARIOUS AGENCIES	\$10,750,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28705		
13.		VARIOUS STATE AGENCIES	NORTHERN NEVADA HUMAN SERVICES ASSOCIATION	OTHER: VARIOUS AGENCIES	\$4,200,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing employment support services. This amendment increases the maximum amount from \$3,000,000 to \$7,200,000 due to the increased need for these services.				
		Term of Contract:	05/10/2022 - 01/31/2026	Contract # 25916		
14.		VARIOUS STATE AGENCIES	PUROIA, LLC	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28682		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
15.		VARIOUS STATE AGENCIES	RENO FAMILY EYE CARE, R. ANDREW BOREN, O.D., PROF. CORP.	OTHER: VARIOUS AGENCIES	\$900,000	
	Contract Description:	This is a new contract to provide ongoing acute medical, optometry, and rehabilitation services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28731		
16.		VARIOUS STATE AGENCIES	STEPS; SPECIALIZED TECHNIQUES EDUCATING PEOPLE WITH SPECIAL NEEDS, LLC DBA STEPS BEHAVIORAL HEALTH	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing applied behavioral analysis services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28685		
17.		VARIOUS STATE AGENCIES	THERAPY MANAGEMENT GROUP, LLC	OTHER: VARIOUS AGENCIES	\$11,500,000	
	Contract Description:	This is the first amendment to the original contract which provides assistive technology, case management, early intervention, occupational therapy, physical therapy, speech pathology, therapy and counseling, applied behavioral analysis, and autism treatment assistance program services. This amendment increases the maximum amount from \$8,500,000 to \$20,000,000 due to the increased need for these services.				
		Term of Contract:	04/12/2022 - 01/31/2026	Contract # 25692		
18.		VARIOUS STATE AGENCIES	TILTON'S THERAPY FOR TOTS, INC.	OTHER: VARIOUS AGENCIES	\$2,000,000	
	Contract Description:	This is a new contract to provide ongoing occupational therapy, physical therapy, speech pathology, and therapy and counseling services.				
		Term of Contract:	Upon Approval - 01/30/2028	Contract # 28713		
19.		VARIOUS STATE AGENCIES	WESTERN ECOSYSTEMS TECHNOLOGY, INC.	OTHER: VARIOUS AGENCIES	\$1,000,000	
	Contract Description:	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.				
		Term of Contract:	Upon Approval - 02/12/2028	Contract # 28706		

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: **28609**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: 7 Day Dental of Nevada, LLC
Agency Code: MSA	Contractor Name: 7 Day Dental of Nevada, LLC DBA AnyDay Dental
Appropriation Unit: 9999 - All Categories	Address: 2575 5th
Is budget authority available?: Yes	City/State/Zip: Elko, NV 89801
If "No" please explain: Not Applicable	Contact/Phone: Jennifer Micke 775-738-9666
	Vendor No.: T29024502
	NV Business ID: NV20041148715

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14519**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 dental services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? **No**

Was the solicitation (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 as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

No b. If "No", please explain:

vendor using a DBA

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/02/2024 11:15:54 AM
Division Approval	ldeloach	01/02/2024 11:15:56 AM
Department Approval	ldeloach	01/02/2024 11:15:59 AM
Contract Manager Approval	fdula1	01/02/2024 13:44:54 PM
Budget Analyst Approval	Iramire7	01/03/2024 14:31:03 PM
BOE Agenda Approval	stilley	01/22/2024 17:09:51 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28693**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Broadbent & Associates, Inc.
Agency Code: MSA	Contractor Name: Broadbent & Associates, Inc.
Appropriation Unit: 9999 - All Categories	Address: 5450 Louie Lane, #101
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: Doug Guerrant 775-322-7969
	Vendor No.: T80989610
	NV Business ID: NV19891031637

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate- AML Prog**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? Yes

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

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

McGinley and Associates
Mountain States Restoration
HydroGeo Logic

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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:

NDEP with numerous contracts.

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

No If "Yes", please provide details of the litigation 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:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:36:37 PM
Division Approval	ldeloach	01/08/2024 14:36:40 PM
Department Approval	ldeloach	01/08/2024 14:36:44 PM
Contract Manager Approval	nfese1	01/16/2024 10:24:06 AM
Budget Analyst Approval	Iramire7	01/16/2024 10:46:25 AM
BOE Agenda Approval	stilley	01/22/2024 18:04:04 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: 25732	Amendment Number: 1	
	Legal Entity Name: Carmel Community Living Corporation	
Agency Name: MSA MASTER SERVICE AGREEMENTS	Contractor Name: Carmel Community Living Corporation DBA Overture	
Agency Code: MSA	Address: 6121 Lakeside Dr. Suite 260	
Appropriation Unit: 9999 - All Categories	City/State/Zip: Reno, NV 89511	
Is budget authority available?: Yes	Contact/Phone: Jenelle Winger 720-402-9545	
If "No" please explain: Not Applicable	Vendor No.: T27042307A	
	NV Business ID: NV20181347045	
To what State Fiscal Year(s) will the contract be charged?	2022-2026	
What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.		
General Funds	0.00 %	Fees 0.00 %
Federal Funds	0.00 %	Bonds 0.00 %
Highway Funds	0.00 %	X Other funding 100.00 % Various Agencies
Agency Reference #:	S1737-RV	

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2026**

Contract term: **3 years and 267 days**

4. Type of contract: **MSA**

Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing disabilities support and supportive living arrangement services. This amendment increases the maximum amount from \$10,000,000 to \$22,000,000 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:	\$10,000,000.00	\$10,000,000.00	\$10,000,000.00	Yes - Action
2. Amount of current amendment (#1):	\$12,000,000.00	\$12,000,000.00	\$12,000,000.00	Yes - Action
3. New maximum contract amount:	\$22,000,000.00			

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 provided various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Multiple agencies, agencies are satisfied

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

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

Not Applicable

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

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

No b. If "No", please explain:

DBA

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/09/2024 13:14:44 PM
Division Approval	ldeloach	01/09/2024 13:14:47 PM
Department Approval	ldeloach	01/09/2024 13:14:50 PM
Contract Manager Approval	ascaffid	01/09/2024 15:52:01 PM
Budget Analyst Approval	Iramire7	01/10/2024 14:58:08 PM
BOE Agenda Approval	stilley	01/22/2024 18:11:48 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: **28701**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: EMERALD STANTON, LLC
Agency Code: MSA	Contractor Name: EMERALD STANTON, LLC
Appropriation Unit: 9999 - All Categories	Address: 2400 E Oakey Blvd
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89104
If "No" please explain: Not Applicable	Contact/Phone: Emerald Stanton 702-323-9018
	Vendor No.: T32015178
	NV Business ID: NV20201858097

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14677**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 counseling and related mental health, social worker, and substance abuse counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,800,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? **No**

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

- 15. The contractor is 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	ldeloach	01/02/2024 13:05:57 PM
Division Approval	ldeloach	01/02/2024 13:06:00 PM
Department Approval	ldeloach	01/02/2024 13:06:02 PM
Contract Manager Approval	fdula1	01/02/2024 13:46:52 PM
Budget Analyst Approval	Iramire7	01/03/2024 14:15:57 PM
BOE Agenda Approval	stilley	01/22/2024 17:12:34 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: **28695**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Environmental Protection Services, LLC
Agency Code:	MSA	Contractor Name:	Environmental Protection Services, LLC
Appropriation Unit:	9999 - All Categories	Address:	1601 Fairview Drive, Office B
Is budget authority available?:	Yes	City/State/Zip:	Carson City, NV 89701
If "No" please explain:	Not Applicable	Contact/Phone:	Brian Breiter 775-220-6687
		Vendor No.:	T29044194
		NV Business ID:	NV20151733629

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate AML Program**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$9,750,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? Yes

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

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

Western EcoSystems
Mountain States Restoration
HydroGeo Logic

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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:

MSA contract.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:41:43 PM
Division Approval	ldeloach	01/08/2024 14:41:47 PM
Department Approval	ldeloach	01/08/2024 14:41:50 PM
Contract Manager Approval	nfese1	01/16/2024 15:41:31 PM
Budget Analyst Approval	Iramire7	01/16/2024 15:46:01 PM
BOE Agenda Approval	stilley	01/22/2024 17:53:15 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28699**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: HydroGeoLogic, Inc.
Agency Code: MSA	Contractor Name: HydroGeoLogic, Inc.
Appropriation Unit: 9999 - All Categories	Address: 11107 Sunset Hills Road, Suite
Is budget authority available?: Yes	City/State/Zip: Herndon, VA 20190
If "No" please explain: Not Applicable	Contact/Phone: Drew Herrera 406-970-2575
	Vendor No.: T32011701
	NV Business ID: NV20131136509

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date **03/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **3 years and 348 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate AML Program**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,700,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? **Yes**

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

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

**Mountain States Restoration
Broadbent
Western EcoSystems**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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?

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:44:58 PM
Division Approval	ldeloach	01/08/2024 14:45:02 PM
Department Approval	ldeloach	01/08/2024 14:45:06 PM
Contract Manager Approval	nfese1	01/16/2024 15:40:58 PM
Budget Analyst Approval	Iramire7	01/16/2024 15:44:53 PM
BOE Agenda Approval	stilley	01/22/2024 17:56:38 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28733**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: INDIGO-BANE, LLC
Agency Code: MSA	Contractor Name: INDIGO-BANE, LLC DBA LO-GO-PAE-DICS
Appropriation Unit: 9999 - All Categories	Address: 305 Vandalia Street
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89106
If "No" please explain: Not Applicable	Contact/Phone: Maria Cardenas-Lugo 702-831-1714
	Vendor No.: T29048122
	NV Business ID: NV20232945137

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14745**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 adult daycare, autism treatment assistance, disabilities support, early intervention, home health care, rehabilitation, speech pathology, and 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?

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

Multiple Agencies, Agencies are satisfied.

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

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

Not Applicable

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

LLC

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

No b. If "No", please explain:

DBA

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

Yes

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

Yes

- 19. Agency Field Contract Monitor:

- 20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/05/2024 09:24:42 AM
Division Approval	ldeloach	01/05/2024 09:24:44 AM
Department Approval	ldeloach	01/05/2024 09:24:47 AM
Contract Manager Approval	fdula1	01/05/2024 13:31:00 PM
Budget Analyst Approval	Iramire7	01/08/2024 12:42:41 PM
BOE Agenda Approval	stilley	01/22/2024 17:23:45 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: **28616**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Icon Speech & Language Therapy, LLC
Agency Code:	MSA	Contractor Name:	Icon Speech & Language Therapy, LLC
Appropriation Unit:	9999 - All Categories	Address:	500 W. Plumb Lane Suite B #173
Is budget authority available?:	Yes	City/State/Zip:	Reno, NV 89509
If "No" please explain:	Not Applicable		
		Contact/Phone:	Nicole Murphy 775-464-1281
		Vendor No.:	T29047944
		NV Business ID:	NV20232705365

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV VQ14514

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 speech pathology, therapy, and counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? 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 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	ldeloach	01/02/2024 13:20:05 PM
Division Approval	ldeloach	01/02/2024 13:20:09 PM
Department Approval	ldeloach	01/02/2024 13:20:11 PM
Contract Manager Approval	fdula1	01/02/2024 13:47:50 PM
Budget Analyst Approval	Iramire7	01/04/2024 13:47:43 PM
BOE Agenda Approval	stilley	01/22/2024 15:14:52 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28700**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: In the Flow Worship Center
Agency Code: MSA	Contractor Name: In the Flow Worship Center
Appropriation Unit: 9999 - All Categories	Address: 3765 Imperial Way
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89706
If "No" please explain: Not Applicable	Contact/Phone: 7755460033
	Vendor No.: T32014112
	NV Business ID: NV20232678123

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14678**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 educational tutoring and support, employment support, and group home services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$5,300,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? **No**

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

- 15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	ldeloach	01/02/2024 13:16:07 PM
Division Approval	ldeloach	01/02/2024 13:16:09 PM
Department Approval	ldeloach	01/02/2024 13:16:20 PM
Contract Manager Approval	fdula1	01/02/2024 13:48:46 PM
Budget Analyst Approval	Iramire7	01/04/2024 13:59:04 PM
BOE Agenda Approval	stilly	01/22/2024 15:18:07 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: **28743**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: McGinley & Associates, Inc.
Agency Code: MSA	Contractor Name: McGinley & Associates, Inc.
Appropriation Unit: 9999 - All Categories	Address: 6995 Sierra Center Pkwy
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: Anthony Dimpel 775-722-2765
	Vendor No.: T81202459
	NV Business ID: NV20021218343

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate-AML Program**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,700,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? **Yes**

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

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

**Broadbent
Mountain States
HydroGeoLogic**

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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:

NDEP - vendor 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:

Nancy Feser, Purchasing Officer II Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:47:03 PM
Division Approval	ldeloach	01/08/2024 14:47:07 PM
Department Approval	ldeloach	01/08/2024 14:47:09 PM
Contract Manager Approval	nfese1	01/16/2024 15:40:17 PM
Budget Analyst Approval	Iramire7	01/16/2024 15:45:13 PM
BOE Agenda Approval	stilley	01/22/2024 17:58:59 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28689**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Mikolaj Psychiatry, PLLC
Agency Code: MSA	Contractor Name: Mikolaj Psychiatry, PLLC
Appropriation Unit: 9999 - All Categories	Address: 5470 KIETZKE LN STE 300 PMB 350
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89511
If "No" please explain: Not Applicable	Contact/Phone: 7754398913
	Vendor No.: PENDING
	NV Business ID: NV20232891429

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV VQ14662

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 mental health and psychiatry services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? 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	ldeloach	01/02/2024 10:49:15 AM
Division Approval	ldeloach	01/02/2024 10:49:17 AM
Department Approval	ldeloach	01/02/2024 10:49:20 AM
Contract Manager Approval	fdula1	01/02/2024 13:50:28 PM
Budget Analyst Approval	Iramire7	01/04/2024 14:10:57 PM
BOE Agenda Approval	stilley	01/22/2024 15:21:00 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28705**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Mountain States Restoration, LLC
Agency Code: MSA	Contractor Name: Mountain States Restoration, LLC
Appropriation Unit: 9999 - All Categories	Address: 711 S. Carson Street, Suite 4
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89701
If "No" please explain: Not Applicable	Contact/Phone: Brian Sweet 619-723-3696
	Vendor No.: T32015205
	NV Business ID: NV20201848028

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate-AML Program**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,750,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? Yes

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

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

Western EcoSystems
Broadbent
HydrogeoLogic

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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?

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

Not Applicable

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

No If "Yes", please provide details of the litigation 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:

Nancy Feser, Purchasing Office Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:51:10 PM
Division Approval	ldeloach	01/08/2024 14:51:12 PM
Department Approval	ldeloach	01/08/2024 14:51:19 PM
Contract Manager Approval	nfese1	01/08/2024 14:53:41 PM
Budget Analyst Approval	Iramire7	01/16/2024 10:04:57 AM
BOE Agenda Approval	stilley	01/22/2024 18:03:50 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **25916** Amendment Number: **1**

Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **NORTHERN NEVADA HUMAN SERVICES ASSOCIATION**

Agency Code: **MSA** Contractor Name: **NORTHERN NEVADA HUMAN SERVICES ASSOCIATION**

Appropriation Unit: **9999 - All Categories** Address: **1203 E. Winnemucca Blvd.**

Is budget authority available?: **Yes** City/State/Zip: **WINNEMUCCA, NV 89445**

If "No" please explain: **Not Applicable** Contact/Phone: **Chuck Lizer 775-304-2714**

Vendor No.: **T80206110**

NV Business ID: **NV19801006249**

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

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

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

Agency Reference #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2026**

Contract term: **3 years and 267 days**

4. Type of contract: **MSA**

Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing employment support services. This amendment increases the maximum amount from \$3,000,000 to \$7,200,000 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:	\$3,000,000.00	\$3,000,000.00	\$3,000,000.00	Yes - Action
2. Amount of current amendment (#1):	\$4,200,000.00	\$4,200,000.00	\$4,200,000.00	Yes - Action
3. New maximum contract amount:	\$7,200,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Multiple Agencies, Agencies are satisfied.

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

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

Not Applicable

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

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Ideloach	01/09/2024 13:24:41 PM
Division Approval	Ideloach	01/09/2024 13:24:44 PM
Department Approval	Ideloach	01/09/2024 13:24:47 PM
Contract Manager Approval	ascaffid	01/09/2024 15:53:20 PM
Budget Analyst Approval	Iramire7	01/10/2024 15:03:02 PM
BOE Agenda Approval	stilley	01/22/2024 17:41:14 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28682**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Puroia, LLC
Agency Code: MSA	Contractor Name: Puroia, LLC
Appropriation Unit: 9999 - All Categories	Address: 5025 Lone Wolf Avenue
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89131
If "No" please explain: Not Applicable	Contact/Phone: Sparkle Henderson 702-395-5632
	Vendor No.: T32015040
	NV Business ID: NV20222499900

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14663**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 community-based living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? **No**

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

No b. If "No", please explain:

company doing business as Puroia Homes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/02/2024 12:56:11 PM
Division Approval	ldeloach	01/02/2024 12:56:14 PM
Department Approval	ldeloach	01/02/2024 12:56:16 PM
Contract Manager Approval	fdula1	01/02/2024 13:51:05 PM
Budget Analyst Approval	Iramire7	01/05/2024 09:10:47 AM
BOE Agenda Approval	stilley	01/22/2024 15:28:43 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28731**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	RENO FAMILY EYE CARE, R. ANDREW BOREN, O.D., PROF. CORP.
Agency Code:	MSA	Contractor Name:	RENO FAMILY EYE CARE, R. ANDREW BOREN, O.D., PROF. CORP.
Appropriation Unit:	9999 - All Categories	Address:	6360 Mae Anne Ave., Suite 1
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89523
If "No" please explain:	Not Applicable	Contact/Phone:	Mariah Smith 775-787-9137
		Vendor No.:	T29047723
		NV Business ID:	NV20011343537

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV VQ14747**

2. Contract start date:

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

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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 acute medical, optometry, and rehabilitation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$900,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

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

9. Were quotes or proposals solicited? **No**

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Multiple Agencies, Agencies are satisfied.

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	ldeloach	01/05/2024 09:04:21 AM
Division Approval	ldeloach	01/05/2024 09:04:24 AM
Department Approval	ldeloach	01/05/2024 09:04:27 AM
Contract Manager Approval	fdula1	01/05/2024 13:31:26 PM
Budget Analyst Approval	Iramire7	01/08/2024 13:36:22 PM
BOE Agenda Approval	stilley	01/22/2024 17:28:09 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28685**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	STEPS; Specialized Techniques Educating People with Special Needs
Agency Code:	MSA	Contractor Name:	STEPS; Specialized Techniques Educating People with Special Needs, LLC DBA STEPS Behavioral Health
Appropriation Unit:	9999 - All Categories	Address:	401 Ryland Street, Suite 200-A
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89502
If "No" please explain:	Not Applicable	Contact/Phone:	Rivka Rosenfeld 4433539547
		Vendor No.:	PENDING
		NV Business ID:	NV20232722741

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV VQ14727

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
 Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**
 Contract term: **3 years and 364 days**

4. Type of contract: **MSA**
 Contract description: **Direct Client Srvs**

5. Purpose of contract:
This is a new contract to provide ongoing applied behavioral analysis 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.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

No b. If "No", please explain:

DBA

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

Yes

- 18. Not Applicable

- 19. Agency Field Contract Monitor:

- 20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/02/2024 11:23:16 AM
Division Approval	ldeloach	01/02/2024 11:23:18 AM
Department Approval	ldeloach	01/02/2024 11:23:20 AM
Contract Manager Approval	fdula1	01/05/2024 13:14:49 PM
Budget Analyst Approval	Iramire7	01/05/2024 14:17:46 PM
BOE Agenda Approval	stilley	01/22/2024 17:19:47 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: 25692	Amendment Number: 1	
Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: THERAPY MANAGEMENT GROUP, LLC	Contractor Name: THERAPY MANAGEMENT GROUP, LLC
Agency Code: MSA	Address: 8020 W SAHARA AVE, SUITE 160	
Appropriation Unit: 9999 - All Categories	City/State/Zip: LAS VEGAS, NV 89117-7917	
Is budget authority available?: Yes	Contact/Phone: Mark James 702-401-4017	
If "No" please explain: Not Applicable	Vendor No.: T27023183	
	NV Business ID: NV20031166309	

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

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

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

Agency Reference #: **S1737-RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/12/2022**
Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2026**

Contract term: **3 years and 295 days**

4. Type of contract: **MSA**

Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is the first amendment to the original contract which provides assistive technology, case management, early intervention, occupational therapy, physical therapy, speech pathology, therapy and counseling, applied behavioral analysis, and autism treatment assistance program services. This amendment increases the maximum amount from \$8,500,000 to \$20,000,000 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:	\$8,500,000.00	\$8,500,000.00	\$8,500,000.00	Yes - Action
2. Amount of current amendment (#1):	\$11,500,000.00	\$11,500,000.00	\$11,500,000.00	Yes - Action
3. New maximum contract amount:	\$20,000,000.00			

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 provided various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?
No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?
No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?
No If "Yes", please explain
Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?
Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:
Multiple Agencies, Agencies are satisfied.

14. Is the contractor currently involved in litigation with the State of Nevada?
No If "Yes", please provide details of the litigation and facts supporting approval of the contract:
Not Applicable

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

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

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

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

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Ideloach	01/09/2024 13:37:58 PM
Division Approval	Ideloach	01/09/2024 13:38:01 PM
Department Approval	Ideloach	01/09/2024 13:38:04 PM
Contract Manager Approval	ascaffid	01/09/2024 15:45:17 PM
Budget Analyst Approval	Iramire7	01/10/2024 15:05:06 PM
BOE Agenda Approval	stillley	01/22/2024 18:12:23 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: **28713**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Tilton's Therapy for Tots, Inc.
Agency Code: MSA	Contractor Name: Tilton's Therapy for Tots, Inc.
Appropriation Unit: 9999 - All Categories	Address: 11091 Kilkerran Court
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89141
If "No" please explain: Not Applicable	Contact/Phone: Casey Melvin 7027680491
	Vendor No.: T29038099
	NV Business ID: NV19991152392

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV VQ14741

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/30/2028**

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, and 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	ldeloach	01/02/2024 13:11:12 PM
Division Approval	ldeloach	01/02/2024 13:11:15 PM
Department Approval	ldeloach	01/02/2024 13:11:18 PM
Contract Manager Approval	fdula1	01/02/2024 13:52:34 PM
Budget Analyst Approval	Iramire7	01/05/2024 10:38:41 AM
BOE Agenda Approval	stilley	01/22/2024 16:26:26 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: **28706**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Western EcoSystems Technology, Inc.
Agency Code:	MSA	Contractor Name:	Western EcoSystems Technology, Inc.
Appropriation Unit:	9999 - All Categories	Address:	415 W. 17th Street, Suite 200
Is budget authority available?:	Yes	City/State/Zip:	Cheyenne, WY 82001
If "No" please explain:	Not Applicable	Contact/Phone:	Deby Forry 307-634-1756
		Vendor No.:	T32014079
		NV Business ID:	NV20232678627

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

2. Contract start date:

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

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/12/2028**

Contract term: **4 years and 12 days**

4. Type of contract: **MSA**

Contract description: **Bat Gate AML Program**

5. Purpose of contract:

This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation 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?

State Agencies have the need for abandoned mine lands & bat gate installation services.

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

The State does not employ abandoned mine lands & bat gate installation services for the state.

9. Were quotes or proposals solicited? Yes

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

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

Environmental Protection Services
Broadbent
HydroGeoLogic

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 99SWC-S2513 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 7 vendors selected by the 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?

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	01/08/2024 14:53:05 PM
Division Approval	ldeloach	01/08/2024 14:53:07 PM
Department Approval	ldeloach	01/08/2024 14:53:09 PM
Contract Manager Approval	nfese1	01/08/2024 14:54:16 PM
Budget Analyst Approval	Iramire7	01/16/2024 09:32:53 AM
BOE Agenda Approval	stilley	01/22/2024 15:52:17 PM
BOE Final Approval	Pending	

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	CITY OF HENDERSON	OTHER: REVENUE	\$25,472	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing access to the Automated Victim Information and Notification System.				
		Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28621		
2.	040	SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE	SHI INTERNATIONAL CORP.	GENERAL	\$12,118	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-12771 which provides cloud services. This service agreement provides data cleanup efforts and migration of legacy data to the existing business licensing system.				
		Term of Contract:	01/05/2024 - 06/30/2025	Contract # 28709		
3.	060	CONTROLLER'S OFFICE	SHI INTERNATIONAL CORP.	GENERAL	\$15,268	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-12771 which provides cloud services. This service agreement provides ongoing monitoring and disaster recovery of data.				
		Term of Contract:	12/29/2023 - 10/26/2026	Contract # 28277		
4.	070	DEPARTMENT OF ADMINISTRATION - HUMAN RESOURCE MANAGEMENT	ALL STAR TALENT, INC.	FEDERAL	\$94,450	
	Contract Description:	This is a new contract to provide marketing services and compose a hiring campaign for correctional officers.				
		Term of Contract:	12/29/2023 - 02/29/2024	Contract # 28711		
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ARBORPEST COMPANIES, LLC DBA SELECT SERVICES	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$18,693	
	Contract Description:	This is the first amendment to the original contract which provides arborist services for state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$18,692.80 to \$37,385.60 due to the increased need for these services.				
		Term of Contract:	02/08/2022 - 12/15/2025	Contract # 25306		
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ADVANCED INTEGRATED PEST MANAGEMENT	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$80,000	
	Contract Description:	This is a new contract to provide pest control management for state-owned buildings in northern Nevada.				
		Term of Contract:	12/14/2023 - 10/30/2027	Contract # 28418		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ENTERPRISE JANITORIAL, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$99,840	
	Contract Description:	This is a new contract to provide janitorial cleaning services to the Silver Sage property located in Carson City.				
		Term of Contract:	01/08/2024 - 12/31/2027	Contract # 28619		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	HILOW SERVICES, LLC	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$80,000	
	Contract Description:	This is a new contract to provide ongoing pest control services for state-owned buildings in northern Nevada.				
		Term of Contract:	12/14/2023 - 11/15/2027	Contract # 28515		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	HILOW SERVICES, LLC	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$75,000	
	Contract Description:	This is a new contract to provide ongoing deep root and weed control services for state-owned buildings in northern Nevada.				
		Term of Contract:	12/14/2023 - 11/15/2027	Contract # 28517		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	HIGH QUALITY CONCEPTS DBA BEST JANITORIAL SERVICES	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$79,200	
	Contract Description:	This is a new contract to provide ongoing janitorial services for the Lincoln and White Pine buildings at the McCarran Center located in Las Vegas.				
		Term of Contract:	11/01/2023 - 04/30/2024	Contract # 28502		
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	JMA CONSTRUCTION CO, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$21,000	
	Contract Description:	This is a new contract to provide cleaning and sealing of the wall cavities and metal studs in the basement of the Capitol Building located in Carson City.				
		Term of Contract:	12/13/2023 - 11/15/2024	Contract # 28523		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	TREE SOLUTIONS, LLC	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$18,253	
	Contract Description:	This is the first amendment to the original contract which provides arborist services for state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$18,252.97 to \$36,505.94 due to the increased need for these services.				
	Term of Contract:	02/28/2022 - 12/15/2025	Contract # 25307			
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	THE W.W. WILLIAMS COMPANY, LLC	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$73,230	
	Contract Description:	This is a new contract to provide ongoing maintenance and repair to all automatic transfer switches, generators, and fire pumps for the Grant Sawyer building, Campos building, Mineral building, White Pine building, Churchill building, and other state-owned buildings in southern Nevada.				
	Term of Contract:	12/14/2023 - 11/14/2027	Contract # 28513			
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - HEALTH AND HUMAN SERVICES CIP PROJECTS - NON-EXEC	PURCELL ELECTRICAL PROFESSIONAL CORPORATION DBA PK ELECTRICAL, INC.	BONDS	\$53,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Lakes Crossing - Interior Lighting CIP Project to include design development and construction documents for the replacement of interior light fixtures and lamps with vandal resistant LED fixtures and lighting controls: CIP Project No. 21-M02-22; SWPD Contract No. 115895.				
	Term of Contract:	12/20/2023 - 06/30/2025	Contract # 28330			
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	AINSWORTH ASSOCIATES MECHANICAL ENGINEERS	GENERAL	\$63,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Multi-Purpose Building, Warm Springs Correctional Center - HVAC Systems Renovation CIP Project to include electrical, structural, and architectural design services, cost estimating, and construction documents for the replacement of package rooftop units and the addition of a make-up air unit, including the installation of a temperature control system to control the equipment: CIP Project No. 23-M27; SPWD Contract No. 115898.				
	Term of Contract:	12/20/2023 - 06/30/2027	Contract # 28320			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERANS CIP PROJECTS - NON-EXEC	KLEINFELDER, INC.	GENERAL	\$67,187	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Las Vegas Readiness Center - Site Drainage Improvements CIP Project to include design development, construction and bid documents, and construction administration services for the construction of an alternate drainage method to the current water conveyance channel, in order to utilize the space that the drainage channel occupies for vehicle travel and parking, including the replacement of open channel with box culverts and headwalls, grading, and gravel cover: CIP Project No. 23-M21; SPWD Contract No. 116000.				
	Term of Contract:	01/03/2024 - 06/30/2027	Contract # 28416			
17.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERANS CIP PROJECTS - NON-EXEC	TATE SYNDER KIMSEY ARCHITECTS, LTD	BONDS 54% FEDERAL 46%	\$12,600	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Army National Guard - Clark County Armory Interior and Exterior Door Replacement CIP Project: CIP Project No. 21-E06; SPWD Contract No. 114473. This amendment increases the maximum amount from \$62,802 to \$75,402 due to additional construction documents, bidding services, and construction administration.				
	Term of Contract:	10/20/2021 - 06/30/2025	Contract # 25041			
18.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	AFFINITI STUDIOS (LUONG), PLLC	GENERAL	\$22,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Las Vegas Public Safety Office - Install Electric Vehicle Charging Stations CIP Project to include electrical design services, review of submittals, bidding services, construction documents, and construction administration services for the design and construction of two dual port charging stations for fleet use at the Las Vegas Fast Facility on West Sunset Road: CIP Project No. 23-S05(12b); SPWD Contract No. 115956.				
	Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28378			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	DOWL, LLC	GENERAL 77% HIGHWAY 23%	\$35,700	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Reno Nevada Highway Patrol - Pavement Maintenance and the Installation of Electric Vehicle Charging Stations CIP Projects to include design, pavement restoration, mapping, bidding assistance, and construction administration services for pavement maintenance, which includes patching, crack seal, slurry seal, and restriping, as well as the design and construction of two dual port charging stations for fleet use: CIP Project Nos. 23-S05h(1) and 23-S05(12a); SPWD Contract No. 115897.				
		Term of Contract:	12/20/2023 - 06/30/2027	Contract # 28322		
20.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	FRAME ARCHITECTURE, INC.	GENERAL	\$10,950	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Nevada Division of Forestry, Administration Building - Roofing Replacement CIP project to include architectural design services for the installation of a new asphalt shingle roof: CIP Project No. 23-S01-9; SPWD Contract No. 116070.				
		Term of Contract:	01/05/2024 - 06/30/2027	Contract # 28511		
21.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	FRAME ARCHITECTURE, INC.	GENERAL	\$26,560	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Stewart Facility, Building 17 - Roofing Replacement CIP project to include architectural design services for the installation of a single-ply membrane roofing system: CIP Project No. 23-S01-5; SPWD Contract No. 116071.				
		Term of Contract:	01/05/2024 - 06/30/2027	Contract # 28512		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES	
22.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	JVC ASSOCIATES, INC. DBA JVC ARCHITECTS	GENERAL	\$47,000	Professional Service	
		Contract Description: This is a new contract to provide professional architectural/engineering services for the Southern Nevada Child & Adolescent Services - ADA Upgrades, Building 15 CIP Project to include design services, construction documents, and construction administration services for the removal and replacement of damaged sidewalks from the handicap parking to the front entry, the design of stairs at the front entry to replace the steep sloped sidewalk, the remodel of two restrooms to meet the Americans with Disabilities Act standards, and for new signage in various areas: CIP Project No. 23-S02-3, SPWD Contract No. 115957.					
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28377			
23.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	L. R. NELSON CONSULTING ENGINEERS, LLC	HIGHWAY	\$32,000	Professional Service	
		Contract Description: This is a new contract to provide professional architectural/engineering services for the Flamingo Department of Motor Vehicles - Pavement Maintenance & Motorcycle Test Pad Upgrade CIP Project to include schematic design, design development, construction documents, bidding, and construction administration services for the patching, crack seal, slurry seal, and restriping of the pavement, as well as the replacement of the existing asphalt surface in the motorcycle test course with a concrete surface: CIP Project Nos. 23-S05h(2) and 23-S05h(4); SPWD Contract No. 116078.					
		Term of Contract:	01/04/2024 - 06/30/2027	Contract # 28507			
24.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$38,000	Professional Service	
		Contract Description: This is a new contract to provide professional architectural/engineering services for the Northern Nevada Child & Adolescent Services - ADA Upgrades Building 8 CIP Project to include design services, construction documents, bidding assistance, and construction administration services for the design and construction of the men's, women's, and single use restrooms in the north portion of Building 8 for Americans with Disabilities Act compliance, including new fixtures and finishes: CIP Project No. 23-S02(4); SPWD Contract No. 115901.					
		Term of Contract:	12/20/2023 - 06/30/2027	Contract # 28331			

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 - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$37,500	Professional Service						
							Contract Description:	This is a new contract to provide professional architectural engineering services for the Nevada Historical Society - Roofing Replacement CIP Project to include drawings, bidding assistance, and construction administration services for removal of the existing membrane roof system and installation of a new membrane roof system: CIP Project No. 23-S01-4; SPWD Contract No. 115937.				
							Term of Contract:	12/20/2023 - 06/30/2027	Contract # 28371			
26.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$39,000	Professional Service						
							Contract Description:	This is a new contract to provide professional architectural engineering services for the Bryan Building - Roofing Replacement CIP Project to include drawings, bidding assistance, and construction administration services for removal of the existing membrane roof system and installation of a new membrane roof system: CIP Project No. 23-S01-1; SPWD Contract No. 115936.				
							Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28372			
27.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$68,000	Professional Service						
							Contract Description:	This is a new contract to provide professional architectural/engineering services for the Lovelock Correctional Center - Roofing Replacement Buildings 6, 7, & 10 CIP Project to include drawings, construction documents, bidding assistance, and construction administration services for the replacement of failing roof systems with new roofing membranes: CIP Project No. 23-S01-3; SPWD Contract No. 115969.				
							Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28375			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
28.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$21,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Warm Springs Correctional Center, Administration Building #1 - Roofing Replacement CIP Project to include schematic design, design development, drawings, bidding assistance, and construction administration services for the installation of a single-ply roofing system: CIP Project No. 23-S01-11; SPWD Contract No. 116094.				
		Term of Contract:	01/05/2024 - 06/30/2027	Contract # 28526		
29.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PETTY & ASSOCIATES, INC.	GENERAL	\$75,100	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Nevada State Library and Archives - Replace Fire Suppression System CIP Project to include building plans, design development, construction documents, and bidding assistance for the replacement of the existing Halon/clean gas agent in the two historic book collection rooms with a new clean gas agent that is approved by the Environmental Protection Agency: CIP Project No. 23-S03-3; SPWD Contract No. 115960.				
		Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28374		
30.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PETTY & ASSOCIATES, INC.	GENERAL	\$44,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Stewart Facility Building 89 - Fire Sprinkler Installation CIP project to include engineering design services, cost estimating, design development, construction documents, bidding assistance, and submittal review for the installation of a new antifreeze fire sprinkler system in the Administration Building 89: CIP Project No. 23-S03-2; SWPD Contract No. 115961.				
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28393		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
31.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PETTY & ASSOCIATES, INC.	GENERAL	\$22,200	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Adult Mental Health Services - Fire Sprinkler Installation CIP project to include cost estimating, bidding assistance, submittal review, and drawings for the installation of a fire sprinkler system in the maintenance facility and offices in Building 21, which is connected to the Warehouse (Building 22) that currently has a sprinkler system: CIP Project No. 23-S03-4; SPWD Contract No. 115955.				
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28395		
32.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TANEY ENGINEERING, LLC	GENERAL 54% FEDERAL 46%	\$33,400	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Range Road Facility - Pavement Maintenance CIP Projects to include engineering services, construction administration, bidding services, and topographic survey for the cleaning, crack seal, slurry seal, and restriping of the asphalt pavement at the existing North Las Vegas Readiness Center, and the crack seal, slurry seal, and restriping of the pavement at the Clark County Readiness Center located on the Floyd Edsall Training Center site: CIP Project No. 23-S05g1 (1&3); SPWD Contract No. 115923.				
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28338		
33.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TANEY ENGINEERING, LLC	GENERAL 54% FEDERAL 46%	\$13,250	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Henderson Readiness Center - Pavement Maintenance CIP Project to include civil planning, bid documents, construction administration, record drawings, and surveying services for the crack sealing, slurry sealing, and restriping of the pavement: CIP Project No. 23-S05g1(4); SPWD Contract No. 115922.				
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28341		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
34.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.	GENERAL	\$24,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Early Intervention Services - Pavement Maintenance CIP Project to include topographic survey, civil plans, bidding, and construction administration services to patch failed pavement, construct accessible parking and access, crack seal, slurry seal, and to restripe the pavement: CIP Project No. 23-S05(9); SPWD Contract No. 115892.				
		Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28337		
35.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.	GENERAL 7% FEDERAL 93%	\$51,200	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Harry Reid Training Center - Apron Pavement Preservation CIP Project to include topographic survey, civil plans, bidding, and construction administration services for the design and construction of a crack seal, slurry, and striping of the pavement at the Army Aviation Support Facility, including removal of an existing coating on a portion of the pavement, sealing of construction joints and a back rolling of the slurry on the tarmac, and two post sweeps to manage the aggregate raveling that occurs after a slurry is applied: CIP Project No. 23-S05g2; SPWD Contract No. 115928.				
		Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28352		
36.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.	GENERAL	\$33,700	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Adult Mental Health Services (NNAMHS) and Agriculture - Pavement Maintenance CIP Projects to include topographic survey, civil plan fees, bidding, and construction administration services to provide preventative maintenance and repairs on the pavement surfaces at the Sparks Agriculture facility, and the following locations for NNAMHS: North Street, the Dini-Townsend Hospital parking lot, the parking lot associated with Building 1, and the parking lot at the Central Kitchen: CIP Project Nos. 23-S05(4&8); SPWD Contract No. 115891.				
		Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28335		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
37.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DCNR AND AGRICULTURE CIP PROJECTS - NON-EXEC	SHAW ENGINEERING, LTD.	GENERAL 85% OTHER: AGENCY FUNDED CIP 15%	\$63,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Spring Creek Fire Station - Residence and Fire Station Demolition CIP Project to include schematic design, design development, construction documents, plan checking, bid documents, and conformed sets for the demolition of two abandoned fire stations located approximately six miles apart, each having a residential structure, shop, garage, and outbuildings to store fire response vehicles and tools, with one garage at 607 Engle Drive remaining and parking sites with RV hookups being established for seasonal Forestry staff: CIP Project No. 23-C08; SPWD Contract No. 116039.				
		Term of Contract:	01/05/2024 - 06/30/2027	Contract # 28426		
38.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - CULTURAL AFFAIRS CIP PROJECTS - NON-EXEC	JP ENGINEERING, LLC	GENERAL	\$70,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Nevada State Museum, Carson City - Life Safety, Security, and Lighting Replacement CIP Project to include schematic design, design development, construction drawings, bid negotiation, and construction administration services for the replacement of the fire alarm, security system, LED lighting, and lighting controls, and installation of an access control system: CIP Project No. 23-M05; SPWD Contract No. 116018.				
		Term of Contract:	01/10/2024 - 06/30/2027	Contract # 28420		
39.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	DINTER ENGINEERING COMPANY	GENERAL 75% BONDS 25%	\$96,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Carson City Supreme Court Building - Replace Emergency Generator CIP Project to include schematic design, design development, construction and bid documents, bidding assistance, and construction administration services for the replacement of the existing emergency generator and automatic transfer switch to provide backup power for the building: CIP Project No. 23-M03-3; SPWD Contract No. 116040.				
		Term of Contract:	01/05/2024 - 06/30/2027	Contract # 28474		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
40.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	LUMOS & ASSOCIATES, INC.	GENERAL 75% BONDS 25%	\$15,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Marlette Lake Water System - Additional East Slope Catchments CIP Project to include topographic survey and mapping services for the design and construction of three additional surface water catchment basins, including vegetation clearing, grading, installation of precast concrete structures, piping connections, and reconstruction of the historic timber tunnel entrance to the Tunnel Portal: CIP Project No. 23-M03-09; SPWD Contract No. 115888.				
	Term of Contract:	12/20/2023 - 06/30/2027	Contract # 28334			
41.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	LUMOS & ASSOCIATES, INC.	GENERAL	\$93,200	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Marlette Lake Water System - East Slope Transmission Main Upgrade CIP Project to include a topographic survey for the replacement of the existing water transmission mains from East Slope Catchments to the Diversion Dam: CIP Project No. 23-M46; SPWD Contract No. 115887.				
	Term of Contract:	12/21/2023 - 06/30/2027	Contract # 28347			
42.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PAUL CAVIN ARCHITECT, LLC	GENERAL	\$97,740	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Children's Home - Demolition of Cottages CIP Project to include schematic design, design development, construction documents, and plan review and submittal for the demolition of buildings on the site except the historic gymnasium, including small ancillary buildings, sheds, tennis courts, and concrete flat work, with all siding, roofing, acoustic ceilings, and floorings that contain asbestos being removed prior to demolition: CIP Project No. 23-C19; SPWD Contract No. 115947.				
	Term of Contract:	01/03/2024 - 06/30/2027	Contract # 28387			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
43.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TANEY ENGINEERING, LLC	GENERAL	\$52,730	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Bradley Building Demolition CIP Project to include civil engineering services, bid documents, bidding assistance, construction administration, record drawings, and aerial topography for the demolition of the building, including asbestos abatement, landscaping restoration, and utility abandonment: CIP Project No. 23-C24; SPWD Contract No. 115880.				
		Term of Contract:	01/02/2024 - 06/30/2027	Contract # 28354		
44.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	BURKE CONSTRUCTION GROUP, INC.	OTHER: AGENCY FUNDED CIP	\$91,546	Professional Service
	Contract Description:	This is a new contract to provide Owner Construction Manager At-Risk services for the Southern Nevada Adult Mental Health Services - Forensics Facility Renovation (Building 3A) CIP Project: CIP Project No. 24-A009; SPWD Contract No. 116146.				
		Term of Contract:	12/19/2023 - 12/31/2026	Contract # 28539		
45.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	J.B.A. CONSULTING ENGINEERS, INC. DBA NV5 CONSULTANTS	OTHER: AGENCY FUNDED CIP	\$12,500	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the United States Property and Fiscal Office - Air Handling Unit Replacement CIP Project: CIP Project No. 23-A017; SPWD Contract No. 15338. This amendment increases the maximum amount from \$70,000 to \$82,500 due to additional architectural design and mechanical/engineering services.				
		Term of Contract:	03/30/2023 - 09/30/2026	Contract # 27326		
46.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	KITTRELL GARLOCK AND ASSOCIATES, ARCHITECTS, AIA, LTD DBA KGA ARCHITECTURE	OTHER: AGENCY FUNDED CIP	\$92,940	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Stein Hospital - Deferred Maintenance CIP Project to include schematic design, construction and bid documents, and construction administration services for various deferred maintenance projects at Building 3, including replacing exterior steps with a ramp for safety reasons, painting interior walls and ceiling, replacing exterior door systems, upgrading fire detection and alarm systems, and upgrading the electrical panel: CIP Project No. 24-A010-3; SPWD Contract No. 116043.				
		Term of Contract:	01/10/2024 - 06/30/2025	Contract # 28425		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
47.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	WELLES PUGSLEY ARCHITECTS, LLP DBA PUGSLEY SIMPSON COULTER	OTHER: AGENCY FUNDED CIP	\$13,200	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Floyd Edsall Training Center - Field Maintenance Shop 1 Remodel CIP Project: CIP Project No. 23-A008; SPWD Contract No. 115262. This amendment increases the maximum amount from \$262,100 to \$275,300 due to the addition of a Furniture, Fixtures, and Equipment consultation and report.				
	Term of Contract:	03/14/2023 - 06/30/2025	Contract # 27195			
48.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - OFFICE OF THE CHIEF INFORMATION OFFICER	GARTNER, INC.	OTHER: INTERNAL SERVICE FUNDS	\$55,348	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV21-8568 which provides research and advisory services related to information technology. This service agreement provides leadership access to advisory services.				
	Term of Contract:	01/09/2024 - 06/30/2025	Contract # 28718			
49.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES	CLARK COUNTY INFORMATION TECHNOLOGY DEPARTMENT	OTHER: REVENUE	\$24,284	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing rack space at Beaver Peak located in Washington County, Utah.				
	Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28653			
50.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES	CLARK COUNTY INFORMATION TECHNOLOGY DEPARTMENT	OTHER: REVENUE	\$24,284	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing rack space at Apex Peak located in Clark County.				
	Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28656			
51.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES	FEDERAL BUREAU OF INVESTIGATION	OTHER: REVENUE	\$32,378	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing rack space at Prospect Peak in Eureka County, Cave Mountain in White Pine County, Montezuma Mountain in Esmerelda County, and Sober Peak in Nye County.				
	Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28613			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
52.	180	OFFICE OF THE CHIEF INFORMATION OFFICER - NETWORK TRANSPORT SERVICES	NYE COUNTY SHERIFFS OFFICE	OTHER: REVENUE	\$66,707	Exempt
	Contract Description:	This is the first amendment to the original revenue interlocal agreement which provides ongoing rack space at Brock Mountain located in Nye County, Montezuma Peak located in Esmeralda County, Warm Springs located in Nye County, and Sober Peak located in Nye County. This amendment increases the maximum amount from \$104,218.24 to \$170,925.30 due to a rate increase.				
		Term of Contract:	07/01/2021 - 06/30/2025	Contract # 24791		
53.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - FEDERAL PROGRAMS AND ADMINISTRATION	SOCIAL ENTREPRENEURS, INC.	GENERAL 20% OTHER: COST ALLOCATION 80%	\$12,031	
	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 management of financial logistics and development of leadership strategies and training.				
		Term of Contract:	12/28/2023 - 01/31/2024	Contract # 28629		
54.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	EUREKA COUNTY SOCIAL SERVICES	OTHER: REVENUE	\$39,594	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28560		
55.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNICABLE DISEASES	SHI INTERNATIONAL CORP.	FEDERAL	\$30,094	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV21-8395 which provides information technology solution products and services. This service agreement provides services to facilitate the merger of servers belonging to the department and Clark County.				
		Term of Contract:	12/18/2023 - 09/29/2024	Contract # 28482		

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BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
56.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - CHRONIC DISEASE	KPS/3	FEDERAL	\$51,000	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides marketing strategies, website development, and social media campaigns for Heal Nevada.				
		Term of Contract:	12/18/2023 - 09/30/2024	Contract # 28580		
57.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNITY HEALTH SERVICES	NYE COUNTY	OTHER: REVENUE	\$67,000	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing public health services to meet the health needs of rural and frontier communities.				
		Term of Contract:	07/01/2023 - 06/30/2025	Contract # 27813		
58.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY ADMINISTRATION	WILLOW SPRINGS, LLC	FEDERAL	\$67,500	
	Contract Description:	The is a new contract to provide partial acute hospitalization and residential treatment for a youth on parole.				
		Term of Contract:	12/07/2023 - 03/06/2024	Contract # 28671		
59.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	NIGHTLIGHT CHRISTIAN ADOPTIONS	GENERAL 52% OTHER: COUNTY REIMBURSEMENT 18% FEDERAL 30%	\$24,500	
	Contract Description:	This is a new contract to provide ongoing services for federally mandated monthly visits for children placed outside the state in a residential facility.				
		Term of Contract:	12/27/2023 - 09/30/2027	Contract # 28187		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
60.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - YOUTH PAROLE SERVICES	JANELL ANDERSON, LCSW, PLLC	GENERAL 50% OTHER: COUNTY REIMBURSEMENT 50%	\$76,000	
	Contract Description:	This is a new contract to provide therapy and counseling services to youth under the supervision of the Youth Parole Bureau.				
		Term of Contract:	01/09/2024 - 06/30/2026	Contract # 28412		
61.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	ANYTIME PLUMBING, LLC	GENERAL 66% FEDERAL 34%	\$50,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing plumbing services. This amendment increases the maximum amount from \$46,000 to \$96,000 due to the increased need for these services.				
		Term of Contract:	05/17/2022 - 03/31/2026	Contract # 25909		
62.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	STING ALARM, INC.	GENERAL 66% FEDERAL 34%	\$10,000	
	Contract Description:	This is the second amendment to the original contract which provides ongoing fire equipment monitoring and annual inspections for state-owned buildings at the West Charleston Boulevard location in Las Vegas. This amendment increases the maximum amount from \$29,040 to \$39,040 due to the increased need for these services.				
		Term of Contract:	02/01/2020 - 01/31/2024	Contract # 22833		
63.	431	OFFICE OF THE MILITARY	VORTEX INDUSTRIES, INC.	GENERAL 50% FEDERAL 50%	\$95,000	
	Contract Description:	This is a new contract to provide installation, repair, and maintenance on doors at all Nevada National Guard locations.				
		Term of Contract:	01/16/2024 - 01/31/2028	Contract # 28692		
64.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	SAVAGE AND SON, INC.	GENERAL	\$74,841	
	Contract Description:	This is a new contract to provide repairs for a gas leak at the Lovelock Correctional Center.				
		Term of Contract:	06/30/2023 - 07/31/2023	Contract # 28225		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
65.	440	DEPARTMENT OF CORRECTIONS - INMATE WELFARE ACCOUNT	RELX, INC. DBA LEXIS NEXIS	OTHER: INMATE WELFARE ACCOUNT	\$26,732	
	Contract Description:	This is the third amendment to the original contract which provides ongoing access to legal materials and references for inmate law libraries. This amendment extends the termination date from December 31, 2023 to April 20, 2024 due to the continued need for these services.				
	Term of Contract:	01/01/2020 - 04/30/2024	Contract # 22548			
66.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	C&C NEVADA, LLC DBA JANI-KING OF NEVADA	OTHER: COST ALLOCATION	\$80,760	
	Contract Description:	This is a new contract to provide ongoing janitorial services for the southern Las Vegas location.				
	Term of Contract:	05/01/2024 - 04/30/2028	Contract # 28422			
67.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	KODIAK ROOFING & WATERPROOFING CO.	GENERAL	\$12,233	
	Contract Description:	This is a new contract to provide roof repair services to the Sparks headquarters location.				
	Term of Contract:	12/14/2023 - 12/31/2024	Contract # 28491			
68.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	VORTEX DOORS, LLC	GENERAL	\$45,629	
	Contract Description:	This is a new contract to provide services to install a new roll-up door at the Elko location.				
	Term of Contract:	12/14/2023 - 11/30/2024	Contract # 28417			
69.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	MCELHANEY STRUCTURAL ENGINEERS, LLC	FEE: SPORTSMEN REVENUE 50% FEDERAL 50%	\$45,000	Professional Service
	Contract Description:	This is a new contract to provide structural engineering services in the eastern, southern, and western regions of the state.				
	Term of Contract:	12/15/2023 - 11/30/2027	Contract # 28472			
70.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	PROCURIFY TECHNOLOGIES, INC.	FEE: SPORTSMEN REVENUE	\$49,998	
	Contract Description:	This is a new contract to provide an electronic service to track, approve, and monitor purchase order spending.				
	Term of Contract:	12/29/2023 - 12/31/2025	Contract # 28508			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
71.	702	DEPARTMENT OF WILDLIFE - HABITAT	NORTH EAST ELKO COUNTY CONSERVATION DISTRICT	FEE: HABITAT CONSERVATION	\$51,843	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides implementation of a variety of habitat projects including invasive weed abatement, soil health amendments, conifer removal, and meadow and wetland enhancements. This amendment extends the termination date from September 1, 2024 to April 30, 2025 and increases the maximum amount from \$99,999 to \$151,842 due to the continued need for these services.				
	Term of Contract:	04/13/2021 - 04/30/2025	Contract # 23915			
72.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	RIVERSIDE RESORT AND CASINO, INC.	GENERAL	\$31,913	
	Contract Description:	This is a new contract to provide conference rooms for training employees during the bi-annual Park Academy Conference.				
		Term of Contract:	02/26/2024 - 03/01/2024	Contract # 28581		
73.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT AND CORRECTIVE ACTION	PACIFIC STORAGE COMPANY	FEE: HAZARDOUS WASTE AND PETROLEUM FUND FEES 40% FEDERAL 60%	\$50,000	
	Contract Description:	This is a new contract to provide secure record storage, delivery, and digital index services for the Carson City office.				
	Term of Contract:	12/18/2023 - 06/30/2027	Contract # 28583			
74.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - WATER QUALITY PLANNING	UNITED STATES DEPARTMENT OF THE INTERIOR, U.S. GEOLOGICAL SURVEY	OTHER: JOINT FUNDING AGREEMENT	\$29,940	Exempt
	Contract Description:	This is the second amendment to the original interlocal agreement which provides a collection of continuous stream turbidity and temperature from two streams with significant sediment contributions to Lake Tahoe. This amendment extends the termination date from June 30, 2024 to September 30, 2024 and increases the maximum amount from \$202,002 to \$231,942 due to the continued need for these services.				
	Term of Contract:	08/09/2019 - 09/30/2024	Contract # 22144			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
75.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY - SPECIAL FUND	MESA ENERGY SYSTEMS, INC.	FEDERAL	\$68,158	
	Contract Description:	This is a new contract to provide the rental of a 200 ton cooled chiller unit in southern Nevada.				
		Term of Contract:	01/08/2024 - 12/31/2024	Contract # 27942		
76.	B005	LICENSING BOARDS AND COMMISSIONS - CHIROPRACTIC PHYSICIANS	LAW OFFICES OF LYN E. BEGGS, PLLC	FEE: LICENSURE	\$40,000	
	Contract Description:	This is a new contract to provide legal services.				
		Term of Contract:	01/16/2024 - 10/31/2024	Contract # 28429		
77.	B008	LICENSING BOARDS AND COMMISSIONS - PROFESSIONAL ENGINEERS AND LAND SURVEYORS	CASEY NEILON, INC.	FEE: LICENSURE	\$52,500	Professional Service
	Contract Description:	This is a new contract to provide ongoing audit services.				
		Term of Contract:	01/04/2024 - 11/30/2026	Contract # 28173		
78.	B036	LICENSING BOARDS AND COMMISSIONS - MASSAGE THERAPISTS	FLYNN GIUDICI GOVERNMENT AFFAIRS, LLC	FEE: LICENSURE	\$29,000	Professional Service
	Contract Description:	This is a new contract to provide consultation services regarding regulatory and statutory changes.				
		Term of Contract:	01/16/2024 - 07/31/2025	Contract # 28663		
79.	B036	LICENSING BOARDS AND COMMISSIONS - MASSAGE THERAPISTS	COLLEEN PLATT	FEE: LICENSURE	\$49,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing legal services.				
		Term of Contract:	01/16/2024 - 11/30/2025	Contract # 28645		
80.	B038	LICENSING BOARDS AND COMMISSION - APPLIED BEHAVIOR ANALYSIS	CONNIE CHRISTIANSEN DBA CHRISTIANSEN ACCOUNTING NETWORK	FEE: LICENSURE	\$12,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing audit services.				
		Term of Contract:	01/16/2024 - 06/30/2024	Contract # 28478		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
81.	B038	LICENSING BOARDS AND COMMISSION - APPLIED BEHAVIOR ANALYSIS	NUMBERS, INC.	FEE: LICENSURE	\$16,800	Professional Service
Contract Description:		This is a new contract to provide ongoing accounting and payroll services.				
		Term of Contract:	10/01/2023 - 09/30/2025	Contract # 28521		

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: **28621**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: CITY OF HENDERSON
Agency Code: 030	Contractor Name: CITY OF HENDERSON
Appropriation Unit: 1042-00	Address: HENDERSON POLICE DEPARTMENT 223 LEAD ST
Is budget authority available?: Yes	City/State/Zip: HENDERSON, NV 89015-7328
If "No" please explain: Not Applicable	Contact/Phone: Maria DiBenedetto 702/267-4754
	Vendor No.: T41033300L
	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 %	X	Fees	100.00 % REVENUE
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 **07/01/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **Yes**

If "Yes", please explain

We are requesting this contract to be retroactive to July 1, 2023 due to the Appriss Insights contract being approved late in June and the delayed turnaround time from the City of Henderson.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **VINE Systems**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing revenue for the Automated Victim Information and Notification System.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,472.09**

Other basis for payment: \$12,547.82 FY24; \$12,924.27 FY25

II. JUSTIFICATION

7. What conditions require that this work be done?

The VINE system is utilized by several counties and public safety entities. The agencies that use this system will share the cost for the operation of this system.

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

This is a revenue contract where the users are sharing in the operational costs. There is no work being required by State employees.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

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

Not Applicable

14. Is the contractor currently involved in litigation with the State 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	jhoba2	12/06/2023 14:05:54 PM
Division Approval	jhoba2	12/06/2023 14:05:56 PM
Department Approval	jhoba2	12/06/2023 14:06:00 PM
Contract Manager Approval	tlyon1	12/21/2023 15:55:49 PM
Budget Analyst Approval	vmilazz1	12/26/2023 13:57:10 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

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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, Administrative Services Officer I

Date: December 6, 2023

Subject: Retroactive Approval for Contract #28621 City of Henderson
Police Department

We are requesting this contract to be retroactive to July 1, 2023, due to the Appriss Insights contract being approved in mid-June and the delayed turn-around time for City of Henderson Police Department.

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: **28709**

Agency Name: SECRETARY OF STATE'S OFFICE	Legal Entity Name: SHI INTERNATIONAL CORP
Agency Code: 040	Contractor Name: SHI INTERNATIONAL CORP
Appropriation Unit: 1050-26	Address: 1125 17TH ST STE 730
Is budget authority available?: Yes	City/State/Zip: DENVER, CO 80202-2050
If "No" please explain: Not Applicable	Contact/Phone: Gina Sotelo 303/723-5256
	Vendor No.: PUR0001595C
	NV Business ID: NV20131129294
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 %

Agency Reference #: 040

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 176 days**

4. Type of contract: **Contract**

Contract description: **Digital Doc Svcs**

5. Purpose of contract:

This is a new service agreement under statewide contract # 99SWC-NV23-12771 which provides cloud services. This service agreement provide data cleanup efforts and migration of legacy data to the agency's existing business licensing system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,117.50**

II. JUSTIFICATION

7. What conditions require that this work be done?

We have received copies of archival data from a previous vendor that now need to be imported into the proprietary IBM system and requires specialized system experience.

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? **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

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:

The contractor has provided services for various state agencies 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:
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	01/02/2024 08:36:58 AM
Division Approval	dbowma1	01/02/2024 08:37:02 AM
Department Approval	dbowma1	01/02/2024 08:37:07 AM
Contract Manager Approval	adale	01/02/2024 10:21:13 AM
EITS Approval	ljean	01/02/2024 12:41:40 PM
Budget Analyst Approval	mranki1	01/05/2024 16:03:24 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: **28277**

Agency Name: CONTROLLER'S OFFICE	Legal Entity Name: SHI INTERNATIONAL CORP
Agency Code: 060	Contractor Name: SHI INTERNATIONAL CORP
Appropriation Unit: 1130-26	Address: 290 DAVIDSON AVE
Is budget authority available?: Yes	City/State/Zip: SOMERSET, NJ 08873-4145
If "No" please explain: Not Applicable	Contact/Phone: Gina Sotelo 775/505-4161
	Vendor No.: PUR0001595
	NV Business ID: 223009648
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 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/29/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/26/2026**

Contract term: **2 years and 301 days**

4. Type of contract: **Contract**

Contract description: **SHI / VEEAM**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV18-417 which provides cloud solutions. This service agreement provides ongoing monitoring and disaster recovery of Veeam data platform for both virtual and physical machines to VMware vSphere and Microsoft cloud environments.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,268.05**

Payment for services will be made at the rate of \$5,089.35 per Fiscal year

II. JUSTIFICATION

7. What conditions require that this work be done?

Veeam Disaster Recovery Orchestrator is built on top of Veeam Backup & Replication. Orchestrator leverages the recovery capabilities of Veeam Backup & Replication to build disaster recovery workflows, automate recovery processes and eliminate error-prone manual steps. Orchestrator also provides reporting capabilities that let enterprises document their disaster recovery plans to meet compliance requirements.

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

Orchestrator uses the failover and data recovery functionality provided by Veeam Backup & Replication to automate recovery actions. In addition, Orchestrator provides vSphere VM recovery orchestration based on replicated storage snapshots created on NetApp and HPE storage systems. Orchestration plans can be scheduled and chained to execute in sequence, and Orchestrator will automatically produce and update detailed documentation. Execution of orchestration plans is simplified to allow simultaneous management of multiple plans that contain hundreds of machines.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

No If "Yes", please provide details of the litigation 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	jtilto1	09/28/2023 11:16:10 AM
Division Approval	jsmack	09/28/2023 13:40:09 PM
Department Approval	jsmack	09/28/2023 13:40:12 PM
Contract Manager Approval	jtilto1	09/28/2023 13:45:11 PM
EITS Approval	daxtel1	12/27/2023 21:59:46 PM
Budget Analyst Approval	bmacke1	12/29/2023 14:42:50 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: **28711**

Agency Name: ADMIN - DIVISION OF HUMAN RESOURCE MANAGEMENT	Legal Entity Name: ALL STAR TALENT, INC.
Agency Code: 070	Contractor Name: ALL STAR TALENT, INC.
Appropriation Unit: 1363-15	Address: 2368 Culpepper Lane
Is budget authority available?: Yes	City/State/Zip: Lincoln, CA 95648
If "No" please explain: Not Applicable	Contact/Phone: Scott Cooper 9164129530
	Vendor No.: T32014938
	NV Business ID: PENDING

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

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/29/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/29/2024**

Contract term: **62 days**

4. Type of contract: **Contract**

Contract description: **Hiring Campaign**

5. Purpose of contract:

This is a new contract to provide marketing assets and compose a hiring campaign for correctional officers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$94,450.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Department of Corrections has reached critically low levels of Correctional Officers to staff the various facilities in the State. NDOC needs help in filling these positions.

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

Standard methods have been unsuccessful in filling numerous vital positions as Correctional Officers.

9. Were quotes or proposals solicited? **No**

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

This is a service agreement under statewide contract 99SWC-NV24-20080, MA PON3 758 230000126. The statewide contract was adopted under a solicitation by the State of Kentucky for these services.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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, from Sept. 2023-Dec. 2023 and they have been satisfied with the service.

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

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

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

PENDING

16. a. Is 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.

PENDING

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.

PENDING

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mgassawa	12/29/2023 11:39:30 AM
Division Approval	nmann	12/29/2023 11:54:56 AM
Department Approval	nmann	12/29/2023 12:15:30 PM
Contract Manager Approval	mtum1	12/29/2023 15:44:27 PM
Budget Analyst Approval	dlenzner	12/29/2023 16:24:09 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: 25306	Amendment Number: 1
Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ARBORPEST COMPANIES, LLC DBA SELECT SERVICES
Agency Code: 082	Contractor Name: ARBORPEST COMPANIES, LLC DBA SELECT SERVICES
Appropriation Unit: 1349-12	Address: 2550 CHANDLER AVE., STE. 2
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89120-4015
If "No" please explain: Not Applicable	Contact/Phone: James Knieriem 702-479-3019
	Vendor No.: T29039232
	NV Business ID: NV20101855548

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

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rent Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/08/2022**

Anticipated BOE meeting date 12/2023

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **12/15/2025**

Termination Date:

Contract term: **3 years and 311 days**

4. Type of contract: **Contract**

Contract description: **Arborist**

5. Purpose of contract:

This is the first amendment to the original contract which provides arborist services for state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$18,692.80 to \$37,385.60 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:	\$18,692.80	\$18,692.80	\$18,692.80	Yes - Info
2. Amount of current amendment (#1):	\$18,692.80	\$18,692.80	\$37,385.60	Yes - Info
3. New maximum contract amount:	\$37,385.60			

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings and Grounds requires as needed vendor to perform arborist services.

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

Buildings and Grounds lacks the expertise and equipment to perform arborist 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):

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

Select Service was one of two bids chosen. All other vendors chose to not participate in bidding.

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	slon5	11/06/2023 13:48:27 PM
Division Approval	jkidd	11/07/2023 16:08:13 PM
Department Approval	ssands	11/28/2023 10:44:46 AM
Contract Manager Approval	ssands	11/28/2023 10:46:09 AM
Budget Analyst Approval	klay0	01/08/2024 08:02:31 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: **28418**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: Advanced Integrated Pest Management
Agency Code: 082	Contractor Name: Advanced Integrated Pest Management
Appropriation Unit: 1349-12	Address: 1482 Stone Point Drive
Is budget authority available?: Yes	City/State/Zip: Roseville, CA 95661
If "No" please explain: Not Applicable	Contact/Phone: Derek Davidson 775-622-6712
	Vendor No.: T32001814C
	NV Business ID: NV20101149905

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	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 **12/14/2023**

Anticipated BOE meeting date **12/2023**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/30/2027**

Contract term: **3 years and 320 days**

4. Type of contract: **Contract**

Contract description: **Pest Control**

5. Purpose of contract:

This is a new contract to provide pest control management for state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$80,000.00**

Other basis for payment: Please view attachment CC of the contract for complete rate listing.

II. JUSTIFICATION

7. What conditions require that this work be done?

Extreme amount of pest activity due to the heavy precipitation during last winter. All state-owned properties. Squirrels are eating irrigation lines and wires and burrowing under building.

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 needed to facilitate this need.

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):

**Advanced Integrated Pest Management
HiLow
Pest Master**

b. Solicitation Waiver: **Not Applicable**

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

This is one of several vendors of the same services and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Vendor has been used by agency since 2012, agency is satisfied with vendor's 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:

Cheryl Warren, Custodial Supervisor IV Ph: 775-690-3546

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	11/01/2023 08:53:26 AM
Division Approval	jkidd	11/01/2023 13:08:43 PM
Department Approval	ssands	11/20/2023 10:49:35 AM
Contract Manager Approval	ssands	11/28/2023 10:39:04 AM
Budget Analyst Approval	klay0	12/14/2023 13:17:35 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: **28619**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ENTERPRISE JANITORIAL, INC.
Agency Code: 082	Contractor Name: ENTERPRISE JANITORIAL, INC.
Appropriation Unit: 1349-12	Address: PO BOX 19913
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89511-2559
If "No" please explain: Not Applicable	Contact/Phone: 775/291-2939
	Vendor No.: T32003728A
	NV Business ID: NV20141642364

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	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 **01/08/2024**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2027**

Contract term: **3 years and 358 days**

4. Type of contract: **Contract**

Contract description: **Janitorial Cleaning**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial cleaning services to the Silver Sage property in Carson City.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$99,840.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide ongoing janitorial cleaning services on a daily basis to the Silver Sage property in Carson City.

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 man power needed to supply this need.

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):

McNeils Cleaning
CC Cleaning
Four D Enterprises
PJM
WOW
Enterprise Janitorial

b. Solicitation Waiver: **Not Applicable**

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

Enterprise Janitorial Inc was chosen as they provided the 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:

Enterprise Janitorial Inc has been a vendor since 2015 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:

Cheryl Warren, Custodial Manager Ph: 775-684-1809

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	12/11/2023 09:22:36 AM
Division Approval	nmann	12/12/2023 11:24:50 AM
Department Approval	ssands	12/14/2023 13:10:31 PM
Contract Manager Approval	tledezma	12/14/2023 14:07:19 PM
Budget Analyst Approval	klay0	01/08/2024 16:18:19 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: **28515**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: HILOW SERVICES, LLC
Agency Code: 082	Contractor Name: HILOW SERVICES, LLC
Appropriation Unit: 1349-12	Address: 3983 S. MCCARRAN BLVD.
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-7510
If "No" please explain: Not Applicable	Contact/Phone: Leroy Heath 7753862206
	Vendor No.: T29042358
	NV Business ID: NV20191341856

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	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 **12/14/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/15/2027**

Contract term: **3 years and 337 days**

4. Type of contract: **Contract**

Contract description: **Pest Control**

5. Purpose of contract:

This is a new contract to provide ongoing pest control services for state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$80,000.00**

Payment for services will be made at the rate of \$155.00 per hour (Monday-Friday) Excluding Holidays

Other basis for payment: \$195 per hour (after hours), material cost plus 10% will be added to rate fee.

II. JUSTIFICATION

7. What conditions require that this work be done?

Contract needed for pest control and management on a continual basis to manage various 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 equipment, or the manpower needed to complete 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):

**HiLow Services
Advance IPM**

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:

Vendor is currently under contract with the agency, agency is satisfied with vendor's 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:
Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Cheryl Warren, Custodial Manager Ph: 775-690-3546

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	11/15/2023 11:09:42 AM
Division Approval	jkidd	11/29/2023 08:55:53 AM
Department Approval	ssands	12/04/2023 15:17:45 PM
Contract Manager Approval	ssands	12/04/2023 15:17:48 PM
Budget Analyst Approval	klay0	12/14/2023 14:54:43 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28517**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: HILOW SERVICES, LLC
Agency Code: 082	Contractor Name: HILOW SERVICES, LLC
Appropriation Unit: 1349-12	Address: 3983 S. MCCARRAN BLVD.
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-7510
If "No" please explain: Not Applicable	Contact/Phone: Leroy Heath 7753862206
	Vendor No.: T29042358
	NV Business ID: NV20191341856

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	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 **12/14/2023**

Anticipated BOE meeting date **01/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/15/2027**

Contract term: **3 years and 337 days**

4. Type of contract: **Contract**

Contract description: **Weed Control**

5. Purpose of contract:

This is a new contract to provide ongoing deep root and weed control services for state-owned buildings in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00**

Payment for services will be made at the rate of \$155.00 per hour (Monday-Friday) Excluding Holidays

Other basis for payment: \$195 per hour (after hours), material cost plus 10% will be added to rate fee.

II. JUSTIFICATION

7. What conditions require that this work be done?

Contract needed for deep root and weed control on a continual basis to manage the landscape and trees at various state-owned properties 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 equipment, or the manpower needed to complete 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):

**HiLow Services
Advance IPM**

b. Solicitation Waiver: **Not Applicable**

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

[Empty text box]

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:

Vendor is currently under contract with the agency, agency is satisfied with vendor's 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:
Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Cheryl Warren, Custodial Manager Ph: 775-690-3546

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	11/15/2023 11:09:17 AM
Division Approval	jkidd	11/21/2023 09:45:07 AM
Department Approval	ssands	11/21/2023 13:30:59 PM
Contract Manager Approval	ssands	12/04/2023 15:18:12 PM
Budget Analyst Approval	klay0	12/14/2023 13:39:05 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: **28502**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: High Quality Concepts, Inc. dba Best Janitorial Services
Agency Code: 082	Contractor Name: High Quality Concepts, Inc. dba Best Janitorial Services
Appropriation Unit: 1349-12	Address: 2545 Chandler Avenue, Suite 7
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89120
If "No" please explain: Not Applicable	Contact/Phone: 702-736-4795
	Vendor No.: T29044601
	NV Business ID: NV20011238130

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

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rent Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

It was necessary for services to begin prior to the execution of the contract due to agencies moving into the buildings, and it was cost prohibitive for Buildings and Grounds to use the emergency services contract.

3. Termination Date: **04/30/2024**

Contract term: **181 days**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services for the Lincoln and White Pine Buildings at the McCarran Center located in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$79,200.00**

Other basis for payment: \$6,150 per month for Lincoln Bldg & \$7,050 per month for White Pine Bldg

II. JUSTIFICATION

7. What conditions require that this work be done?

We have acquired several buildings and were given approval by the Administrator of State Purchasing to complete an agency level RFP. This is a short-term contract to provide janitorial coverage while completing the RFP. Request retroactive start date effective November 1, 2023.

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):

Xcel Maintenance
Best Janitorial
AJ Services
Valley Wide Janitorial

b. Solicitation Waiver: **Not Applicable**

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

Best quote for the 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?

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

Not Applicable

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

No If "Yes", please provide details of the litigation 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	11/20/2023 07:55:41 AM
Division Approval	nmann	12/04/2023 09:36:34 AM
Department Approval	ssands	12/04/2023 09:45:34 AM
Contract Manager Approval	ssands	12/04/2023 09:45:37 AM
Budget Analyst Approval	klay0	12/29/2023 15:56:55 PM

Joe Lombardo
Governor



Jack Robb
Director

Matthew Tuma
Deputy Director

Kent A. LeFevre
Administrator

Carson City Office:
515 East Musser Street, Suite 102
Carson City, Nevada 89701
Phone: (775) 684-4141

Buildings & Grounds Section
Phone: (775) 684-1800

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

Las Vegas Office:
2300 McLeod Street
Las Vegas, Nevada 89104
Phone: (702) 486-5115

Buildings & Grounds Section
Phone: (702) 486-4300

MEMORANDUM

DATE: December 01, 2023

TO: Kelly Lay, Executive Branch Budget Officer

FROM: Kent A. LeFevre, Administrator

A handwritten signature in black ink, appearing to be "K. LeFevre", with the initials "KAL" written below it.

SUBJECT: Retroactive Contract for Janitorial Services – McCarran Buildings

The State Public Works Division, Buildings and Grounds (B&G) Section is requesting the contract with High Quality Concepts, Inc. dba Best Janitorial Services of NV, be retroactive to November 1, 2023, to provide janitorial services in the Lincoln and White Pine Buildings. It was necessary for services to begin prior to the execution of the contract due to agencies moving into the building, and it was cost prohibitive to B&G to use the emergency services contract.

Your consideration for approval of this request is appreciated.

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: **28523**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: JMA CONSTRUCTION CO, INC.
Agency Code: 082	Contractor Name: JMA CONSTRUCTION CO, INC.
Appropriation Unit: 1349-14	Address: PO BOX 22312
Is budget authority available?: Yes	City/State/Zip: CARSON CITY, NV 89721
If "No" please explain: Not Applicable	Contact/Phone: Joseph Alotta 7758826347
	Vendor No.: T29045978
	NV Business ID: NV20031254722

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 % Buildings and Grounds Rent Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/13/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/15/2024**

Contract term: **338 days**

4. Type of contract: **Contract**

Contract description: **Basement Repairs**

5. Purpose of contract:

This is a new contract to provide cleaning and sealing of the wall cavities and metal studs in the basement of the Capitol building in Carson City.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

CAT14-FY23-003 to build back the Capitol building basement.

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? **No**

Was the solicitation (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:

Vendor is currently under contract for other projects with agency. Agency is satisfied with vendor's 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:

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:

Shawn Whitney, Facility Supervisor Ph: 7756904526

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	11/16/2023 07:39:52 AM
Division Approval	jkidd	11/28/2023 13:22:27 PM
Department Approval	ssands	12/04/2023 15:17:24 PM
Contract Manager Approval	ssands	12/04/2023 15:17:28 PM
Budget Analyst Approval	klay0	12/13/2023 11:55:14 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: **25307** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **Tree Solutions, LLC**

Agency Code: **082** Contractor Name: **Tree Solutions, LLC**

Appropriation Unit: **1349-12** Address: **2657 Windmill Parkway, Suite 687**

Is budget authority available?: **Yes** City/State/Zip: **Henderson, NV 89074**

If "No" please explain: **Not Applicable** Contact/Phone: **Pete Luna 702-309-8733**

Vendor No.: **T32011643**

NV Business ID: **NV20061662453**

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

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rent Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/28/2022**

Anticipated BOE meeting date **12/2023**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/15/2025**

Contract term: **3 years and 291 days**

4. Type of contract: **Contract**

Contract description: **Arborist**

5. Purpose of contract:

This is the first amendment to the original contract which provides arborist services for state-owned buildings in southern Nevada. This amendment increases the maximum amount from \$18,252.97 to \$36,505.94 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$18,252.97	\$18,252.97	\$18,252.97	Yes - Info
2. Amount of current amendment (#1):	\$18,252.97	\$18,252.97	\$36,505.94	Yes - Info
3. New maximum contract amount:	\$36,505.94			

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings and Grounds requires as needed vendor to perform arborist services.

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

Buildings and Grounds lacks the expertise and equipment to perform arborist services.

9. Were quotes or proposals solicited? **Yes**

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

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

b. Solicitation Waiver: **Not Applicable**

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

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

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

No

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

No

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

No If "Yes", please explain

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

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency 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:

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	11/08/2023 11:06:16 AM
Division Approval	jkidd	11/21/2023 11:56:06 AM
Department Approval	ssands	12/06/2023 13:19:07 PM
Contract Manager Approval	ssands	12/06/2023 13:19:16 PM
Budget Analyst Approval	klay0	01/08/2024 08:43:53 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: **28513**

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: WW Williams Company, LLC Contractor Name: WW Williams Company, LLC Address: 2680 Losee Rd. City/State/Zip: North Las Vegas, NV 89030 Contact/Phone: DAN MATHIS 702-399-1890 Vendor No.: T29041024A NV Business ID: NV20161487647
--	--

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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 %	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 **12/14/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/14/2027**

Contract term: **3 years and 336 days**

4. Type of contract: **Contract**

Contract description: **Generator Repair**

5. Purpose of contract:

This is a new contract to provide ongoing maintenance and repair to all automatic transfer switches, generators, and fire pumps for the Grant Sawyer Building, Campos Building, Mineral Building, White Pine Building, Churchill Building, and other various state-owned buildings in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$73,230.00**

Other basis for payment: View attachment CC (vendors response for full rates).

II. JUSTIFICATION

7. What conditions require that this work be done?

Quarterly and annual inspections needed to help prevent failures.

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):

WW Williams
Cummins
Cashman Equipment

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest bid received.

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:

Vendor was under contract with agency until October 2023. Agency is satisfied with vendors 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:

Martin Fisher, Facility Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slon5	11/14/2023 16:47:20 PM
Division Approval	ssands	12/14/2023 14:58:14 PM
Department Approval	ssands	12/14/2023 14:58:18 PM
Contract Manager Approval	ssands	12/14/2023 14:58:21 PM
Budget Analyst Approval	klay0	12/14/2023 15:24:38 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: **28330**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PURCELL ELECTRICAL PROF. CORP. DBA PK ELECTRICAL, INC.
Agency Code: 082	Contractor Name: PURCELL ELECTRICAL PROF. CORP. DBA PK ELECTRICAL, INC.
Appropriation Unit: 1535-53	Address: 681 SIERRA ROSE DR., STE. B
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89511-2060
If "No" please explain: Not Applicable	Contact/Phone: 775-826-9010
	Vendor No.: T81016802
	NV Business ID: NV19961128650

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 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115895

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 192 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 Lakes Crossing - Interior Lighting CIP Project to include design development and construction documents for the replacement of interior light fixtures and lamps with new detention rated LED fixtures and lighting controls: CIP Project No. 21-M02-22; SWPD Contract No. 115895.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$53,000.00**

Other basis for payment: Monthly progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

2021 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:

Jason Aviles, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:33:03 PM
Division Approval	nmann	12/10/2023 21:33:05 PM
Department Approval	nmann	12/10/2023 21:33:07 PM
Contract Manager Approval	lwildes	12/11/2023 07:56:25 AM
Budget Analyst Approval	klay0	12/20/2023 15:24:58 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: **28320**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: AINSWORTH ASSOCIATES MECHANICAL ENGINEERS
Agency Code: 082	Contractor Name: AINSWORTH ASSOCIATES MECHANICAL ENGINEERS
Appropriation Unit: 1550-40	Address: 1420 HOLCOMB AVE., STE. 201
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-8003
If "No" please explain: Not Applicable	Contact/Phone: 775-329-9100
	Vendor No.: T27012245A
	NV Business ID: NV20201704362

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 #: 115898

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 192 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 Multi-Purpose Building, Warm Springs Correctional Center - HVAC Systems Renovation CIP Project to include electrical, structural, and architectural design services, cost estimating, and construction documents for the replacement of package rooftop units and the addition of a make-up air unit, including the installation of a temperature control system to control the equipment: CIP Project No. 23-M27; SPWD Contract No. 115898.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$63,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Ian Kono, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:03:02 PM
Division Approval	nmann	12/10/2023 21:03:05 PM
Department Approval	nmann	12/10/2023 21:03:08 PM
Contract Manager Approval	lwildes	12/11/2023 07:57:39 AM
Budget Analyst Approval	klay0	12/20/2023 09:48:03 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: **28416**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: KLEINFELDER, INC.
Agency Code: 082	Contractor Name: KLEINFELDER, INC.
Appropriation Unit: 1577-74	Address: 6960 SMOKE RANCH ROAD, STE. 110
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89128
If "No" please explain: Not Applicable	Contact/Phone: 702-255-8100
	Vendor No.: T29046160B
	NV Business ID: NV19801004246

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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
<input type="checkbox"/> Federal Funds	0.00 %	Bonds	0.00 %
<input type="checkbox"/> Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 116000

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 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. 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 a new contract to provide professional architectural/engineering services for the Las Vegas Readiness Center - Site Drainage Improvements CIP Project to include design development, construction and bid documents, and construction administration services for the construction of an alternate drainage method to the current water conveyance channel, in order to utilize the space that the drainage channel occupies for vehicle travel and parking, including the replacement of open channel with box culvers and headwalls, grading, and gravel cover: CIP Project No. 23-M21; SPWD Contract No. 116000.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$67,187.00**

Other basis for payment: Monthly progress payments based on services provided

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: 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:

Jason Crosby, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 16:21:58 PM
Division Approval	nmann	12/13/2023 16:22:01 PM
Department Approval	nmann	12/13/2023 16:22:04 PM
Contract Manager Approval	lwildes	12/14/2023 07:59:25 AM
Budget Analyst Approval	klay0	01/03/2024 16:42:12 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: **25041** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **TSK ARCHITECTS**

Agency Code: **082** Contractor Name: **TSK ARCHITECTS**

Appropriation Unit: **1577-66** 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**

To what State Fiscal Year(s) will the contract be charged? **2022-2025** Vendor No.: **T80883470**

NV Business ID: **NV20212004081**

What is the source of funds that will be used to pay the contractor? 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	46.00 %	X Bonds	54.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 114473

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/20/2021**

Anticipated BOE meeting date: **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2025**

Contract term: **3 years and 254 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provide professional architectural/engineering services for the Nevada Army National Guard - Clark County Armory Interior and Exterior Door Replacement CIP Project: CIP Project No. 21-E06; SPWD Contract No. 114473. This amendment increases the maximum amount from \$62,802 to \$75,402 due to additional construction documents, bidding services, and construction administration.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$62,802.00	\$62,802.00	\$62,802.00	Yes - Info
2. Amount of current amendment (#1):	\$12,600.00	\$12,600.00	\$75,402.00	Yes - Info
3. New maximum contract amount:	\$75,402.00			

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	12/13/2023 20:46:28 PM
Division Approval	nmann	12/13/2023 20:46:42 PM
Department Approval	nmann	12/13/2023 20:46:55 PM
Contract Manager Approval	lwildes	12/14/2023 08:03:52 AM
Budget Analyst Approval	klay0	01/05/2024 12:01:00 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: **28378**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: AFFINITI STUDIOS, PLLC
Agency Code: 082	Contractor Name: AFFINITI STUDIOS, PLLC
Appropriation Unit: 1585-80	Address: 6040 S. DURANGO DR., STE. 110
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89113
If "No" please explain: Not Applicable	Contact/Phone: 702-338-2612
	Vendor No.: T29047371
	NV Business ID: NV20171098536

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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115956

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Las Vegas Public Safety Office - Install Electric Vehicle Charging Stations CIP Project to include electrical design services, review of submittals, bidding services, construction documents, and construction administration services for the design and construction of two dual port charging stations for fleet use at the Las Vegas Fast Facility on West Sunset Road: CIP Project No. 23-S05(12b); SPWD Contract No. 115956.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/12/2023 15:18:18 PM
Division Approval	nmann	12/12/2023 15:18:20 PM
Department Approval	nmann	12/12/2023 15:18:22 PM
Contract Manager Approval	lwildes	12/12/2023 15:18:50 PM
Budget Analyst Approval	klay0	01/02/2024 14:08:13 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: **28322**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: DOWL, LLC
Agency Code: 082	Contractor Name: DOWL, LLC
Appropriation Unit: 1585-80	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? **2024-2027**

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.

<input checked="" type="checkbox"/> General Funds	77.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
<input checked="" type="checkbox"/> Highway Funds	23.00 %	Other funding	0.00 %
Agency Reference #:	115897		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**
Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 192 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 Reno Nevada Highway Patrol - Pavement Maintenance and the Installation of Electric Vehicle Charging Stations CIP Projects to include design, pavement restoration, mapping, bidding assistance, and construction administration services for pavement maintenance, which includes patching, crack seal, slurry seal, and restriping, as well as the design and construction of two dual port charging stations for fleet use: CIP Project Nos. 23-S05h(1) and 23-S05(12a); SPWD Contract No. 115897.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,700.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:15:59 PM
Division Approval	nmann	12/10/2023 21:16:02 PM
Department Approval	nmann	12/10/2023 21:16:05 PM
Contract Manager Approval	lwildes	12/11/2023 07:57:04 AM
Budget Analyst Approval	klay0	12/20/2023 10:22:58 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: **28511**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: FRAME ARCHITECTURE, INC.
Agency Code: 082	Contractor Name: FRAME ARCHITECTURE, INC.
Appropriation Unit: 1585-73	Address: 4090 S. MCCARRAN BLVD., STE. E
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-7529
If "No" please explain: Not Applicable	Contact/Phone: 775-827-9977
	Vendor No.: T29014981
	NV Business ID: NV20031302154

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 #: 116070

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 176 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 Nevada Division of Forestry, Administration Building - Roofing Replacement CIP project to include architectural design services for the installation of a new asphalt shingle roof: CIP Project No. 23-S01-9; SPWD Contract No. 116070.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,950.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 22:04:00 PM
Division Approval	nmann	12/13/2023 22:04:10 PM
Department Approval	nmann	12/13/2023 22:04:18 PM
Contract Manager Approval	lwildes	12/14/2023 08:08:02 AM
Budget Analyst Approval	klay0	01/05/2024 14:38:56 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: **28512**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: FRAME ARCHITECTURE, INC.
Agency Code: 082	Contractor Name: FRAME ARCHITECTURE, INC.
Appropriation Unit: 1585-73	Address: 4090 S. MCCARRAN BLVD., STE. E
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-7529
If "No" please explain: Not Applicable	Contact/Phone: 775-827-9977
	Vendor No.: T29014981
	NV Business ID: NV20031302154

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 #: 116071

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 176 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 Stewart Facility, Building 17 - Roofing Replacement CIP project to include architectural design services for the installation of a single-ply membrane roofing system: CIP Project No. 23-S01-5; SPWD Contract No. 116071.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$26,560.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 22:12:30 PM
Division Approval	nmann	12/13/2023 22:12:39 PM
Department Approval	nmann	12/13/2023 22:12:48 PM
Contract Manager Approval	lwildes	12/14/2023 08:08:49 AM
Budget Analyst Approval	klay0	01/05/2024 08:10:46 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: **28377**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: JVC ASSOCIATES, INC. DBA JVC ARCHITECTS
Agency Code: 082	Contractor Name: JVC ASSOCIATES, INC. DBA JVC ARCHITECTS
Appropriation Unit: 1585-76	Address: 5385 CAMERON ST., STE. 15
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89118-6257
If "No" please explain: Not Applicable	Contact/Phone: 702-871-3416
	Vendor No.: T27007825
	NV Business ID: NV19931066659

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 #: 115957

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Child & Adolescent Services - ADA Upgrades, Building 15 CIP Project to include design services, construction documents, and construction administration services for the removal and replacement of damaged sidewalks from the handicap parking to the front entry, the design of stairs at the front entry to replace the steep sloped sidewalk, the remodel of two restrooms to meet the Americans with Disabilities Act standards, and for new signage in various areas: CIP Project No. 23-S02-3, SPWD Contract No. 115957.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$47,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Mike Rife, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/12/2023 14:56:16 PM
Division Approval	nmann	12/12/2023 14:56:19 PM
Department Approval	nmann	12/12/2023 14:56:21 PM
Contract Manager Approval	lwildes	12/12/2023 15:02:31 PM
Budget Analyst Approval	klay0	01/02/2024 15:11:19 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: **28507**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: L. R. NELSON CONSULTING ENGINEERS, LLC
Agency Code: 082	Contractor Name: L. R. NELSON CONSULTING ENGINEERS, LLC
Appropriation Unit: 1585-83	Address: 6765 W. RUSSELL RD., STE. 200
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS , NV 89118
If "No" please explain: Not Applicable	Contact/Phone: 702-798-7978
	Vendor No.: T32011394
	NV Business ID: NV20191644957

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 %
X Highway Funds	100.00 %	Other funding	0.00 %
Agency Reference #:	116078		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/04/2024**
Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**
Contract term: **3 years and 177 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 Flamingo Department of Motor Vehicles - Pavement Maintenance & Motorcycle Test Pad Upgrade CIP Projects to include schematic design, design development, construction documents, bidding, and construction administration services for the patching, crack seal, slurry seal, and restriping of the pavement, as well as the replacement of the existing asphalt surface in the motorcycle test course with a concrete surface: CIP Project Nos. 23-S05h(2) and 23-S05h(4); SPWD Contract No. 116078.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$32,000.00**
Other basis for payment: Monthly progress payments based on services provided

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: 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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 21:54:13 PM
Division Approval	nmann	12/13/2023 21:54:17 PM
Department Approval	nmann	12/13/2023 21:54:20 PM
Contract Manager Approval	lwildes	12/14/2023 10:51:10 AM
Budget Analyst Approval	klay0	01/04/2024 08:35:21 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: **28331**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PAUL CAVIN ARCHITECT, LLC
Agency Code: 082	Contractor Name: PAUL CAVIN ARCHITECT, LLC
Appropriation Unit: 1585-76	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 #: 115901

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 192 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Northern Nevada Child & Adolescent Services - ADA Upgrades Building 8 CIP Project to include design services, construction documents, bidding assistance, and construction administration services for the design and construction of the men's, women's, and the single use restrooms in the north portion of Building 8 for Americans with Disabilities Act compliance, including new fixtures and finishes: CIP Project No. 23-S02(4); SPWD Contract No. 115901.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$38,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Mike Rife, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:41:39 PM
Division Approval	nmann	12/10/2023 21:41:41 PM
Department Approval	nmann	12/10/2023 21:41:43 PM
Contract Manager Approval	lwildes	12/11/2023 07:55:41 AM
Budget Analyst Approval	klay0	12/20/2023 10:33:23 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28371**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PAUL CAVIN ARCHITECT, LLC
Agency Code: 082	Contractor Name: PAUL CAVIN ARCHITECT, LLC
Appropriation Unit: 1585-73	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 #: 115937

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 192 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 Nevada Historical Society - Roofing Replacement CIP Project to include drawings, bidding assistance, and construction administration services for the removal of the existing membrane roof system and the installation of a new membrane roof system: CIP Project No. 23-S01-4; SPWD Contract No. 115937.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$37,500.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/11/2023 21:36:02 PM
Division Approval	nmann	12/11/2023 21:36:05 PM
Department Approval	nmann	12/11/2023 21:36:09 PM
Contract Manager Approval	lwildes	12/12/2023 08:23:59 AM
Budget Analyst Approval	klay0	12/20/2023 16:12:51 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: **28372**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PAUL CAVIN ARCHITECT, LLC
Agency Code: 082	Contractor Name: PAUL CAVIN ARCHITECT, LLC
Appropriation Unit: 1585-73	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 #: 115936

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 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 Bryan Building - Roofing Replacement CIP Project to include drawings, bidding assistance, and construction administration services for the removal of the existing membrane roof system and the installation of a new membrane roof system: CIP Project No. 23-S01-1; SPWD Contract No. 115936.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$39,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/11/2023 21:43:45 PM
Division Approval	nmann	12/11/2023 21:43:48 PM
Department Approval	nmann	12/11/2023 21:43:52 PM
Contract Manager Approval	lwildes	12/12/2023 08:23:18 AM
Budget Analyst Approval	klay0	12/21/2023 08:05:38 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: **28375**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PAUL CAVIN ARCHITECT, LLC
Agency Code: 082	Contractor Name: PAUL CAVIN ARCHITECT, LLC
Appropriation Unit: 1585-73	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 #: 115969

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 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 Lovelock Correctional Center - Roofing Replacement Buildings 6, 7, & 10 CIP Project to include drawings, construction documents, bidding assistance, and construction administration services for the replacement of the failing roof systems with new roofing membranes: CIP Project No. 23-S01-3; SPWD Contract No. 115969.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/11/2023 22:00:21 PM
Division Approval	nmann	12/11/2023 22:00:30 PM
Department Approval	nmann	12/11/2023 22:00:40 PM
Contract Manager Approval	lwildes	12/12/2023 08:21:46 AM
Budget Analyst Approval	klay0	12/21/2023 09:57:45 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: **28526**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PAUL CAVIN ARCHITECT, LLC
Agency Code: 082	Contractor Name: PAUL CAVIN ARCHITECT, LLC
Appropriation Unit: 1585-73	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 #: 116094

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 176 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 Warm Springs Correctional Center, Administration Building #1 - Roofing Replacement CIP Project to include schematic design, design development, drawings, bidding assistance, and construction administration services for the installation of a single-ply roofing system: CIP Project No. 23-S01-11; SPWD Contract No. 116094.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:
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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/14/2023 12:53:57 PM
Division Approval	nmann	12/14/2023 12:54:00 PM
Department Approval	nmann	12/14/2023 12:54:03 PM
Contract Manager Approval	lwildes	12/14/2023 12:58:20 PM
Budget Analyst Approval	klay0	01/05/2024 14:12:39 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: **28374**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PETTY & ASSOCIATES, INC.
Agency Code: 082	Contractor Name: PETTY & ASSOCIATES, INC.
Appropriation Unit: 1585-77	Address: 760 MARGRAVE DR., STE. 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? **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 #: 115960

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 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 Nevada State Library and Archives - Replace Fire Suppression System CIP Project to include building plans, design development, construction documents, and bidding assistance for the replacement of the existing Halon/clean gas agent in the two historic book collection rooms with a new clean gas agent that is approved by the Environmental Protection Agency and is readily available to recharge/replace as needed: CIP Project No. 23-S03-3; SPWD Contract No. 115960.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,100.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/11/2023 21:52:13 PM
Division Approval	nmann	12/11/2023 21:52:18 PM
Department Approval	nmann	12/11/2023 21:52:21 PM
Contract Manager Approval	lwildes	12/12/2023 08:22:31 AM
Budget Analyst Approval	klay0	12/21/2023 08:32:39 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: **28393**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PETTY & ASSOCIATES, INC.
Agency Code: 082	Contractor Name: PETTY & ASSOCIATES, INC.
Appropriation Unit: 1585-77	Address: 760 MARGRAVE DR., STE. 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? **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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115961

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Stewart Facility Building 89 - Fire Sprinkler Installation CIP project to include engineering design services, cost estimating, design development, construction documents, bidding assistance, and submittal review for the installation of a new antifreeze fire sprinkler system in the Administration Building 89: CIP Project No. 23-S03-2; SWPD Contract No. 115961.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$44,500.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/12/2023 16:35:46 PM
Division Approval	nmann	12/12/2023 16:35:49 PM
Department Approval	nmann	12/12/2023 16:35:51 PM
Contract Manager Approval	lwildes	12/13/2023 07:28:43 AM
Budget Analyst Approval	klay0	01/02/2024 16:50:00 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: **28395**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PETTY & ASSOCIATES, INC.
Agency Code: 082	Contractor Name: PETTY & ASSOCIATES, INC.
Appropriation Unit: 1585-77	Address: 760 MARGRAVE DR., STE. 100
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502
If "No" please explain: Not Applicable	Contact/Phone: 775-3595777
	Vendor No.: T80580350
	NV Business ID: NV19841014622

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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
<input type="checkbox"/> Federal Funds	0.00 %	Bonds	0.00 %
<input type="checkbox"/> Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115955

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Northern Nevada Adult Mental Health Services - Fire Sprinkler Installation CIP project to include cost estimating, bidding assistance, submittal review, and drawings for the installation of a fire sprinkler system in the maintenance facility and offices in Building 21, which is connected to the Warehouse (Building 22) that currently has a sprinkler system: CIP Project No. 23-S03-4; SPWD Contract No. 115955.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,200.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 08:52:18 AM
Division Approval	nmann	12/13/2023 08:52:19 AM
Department Approval	nmann	12/13/2023 08:52:21 AM
Contract Manager Approval	lwildes	12/13/2023 09:00:43 AM
Budget Analyst Approval	klay0	01/02/2024 16:36:09 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: **28338**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: TANEY ENGINEERING, INC.
Agency Code: 082	Contractor Name: TANEY ENGINEERING, INC.
Appropriation Unit: 1585-81	Address: 6030 S. JONES BLVD., STE. 100
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89118-2659
If "No" please explain: Not Applicable	Contact/Phone: 702-362-8844
	Vendor No.: T32006658
	NV Business ID: NV20232735519

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.

<input checked="" type="checkbox"/> General Funds	54.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	46.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115923

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Range Road Facility - Pavement Maintenance CIP Projects to include engineering services, construction administration, bidding services, and topographic survey for the cleaning, crack seal, slurry seal, and restriping of the asphalt pavement at the existing North Las Vegas Readiness Center, and the crack seal, slurry seal, and restriping of the pavement at the Clark County Readiness Center located on the Floyd Edsall Training Center site: CIP Project No. 23-S05g1 (1&3); SPWD Contract No. 115923.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$33,400.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 22:19:05 PM
Division Approval	nmann	12/10/2023 22:19:08 PM
Department Approval	nmann	12/10/2023 22:19:10 PM
Contract Manager Approval	lwildes	12/12/2023 08:02:08 AM
Budget Analyst Approval	klay0	01/02/2024 12:18:38 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: **28341**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: TANEY ENGINEERING, INC.
Agency Code: 082	Contractor Name: TANEY ENGINEERING, INC.
Appropriation Unit: 1585-81	Address: 6030 S. JONES BLVD., STE. 100
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89118-2659
If "No" please explain: Not Applicable	Contact/Phone: 702-362-8844
	Vendor No.: T32006658
	NV Business ID: NV20232732519

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.

<input checked="" type="checkbox"/> General Funds	54.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	46.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115922

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Henderson Readiness Center - Pavement Maintenance CIP Project to include civil planning, bid documents, construction administration, record drawings, and surveying services for the crack sealing, slurry sealing, and the restriping of the pavement: CIP Project No. 23-S05g1(4); SPWD Contract No. 115922.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,250.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 22:29:04 PM
Division Approval	nmann	12/10/2023 22:29:06 PM
Department Approval	nmann	12/10/2023 22:29:08 PM
Contract Manager Approval	lwildes	12/12/2023 08:03:24 AM
Budget Analyst Approval	klay0	01/02/2024 11:55:06 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: **28337**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1585-80 Is budget authority available?: Yes If "No" please explain: Not Applicable	Legal Entity Name: WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC. Contractor Name: WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC. Address: 895 ROBERTA LN., STE. 104 City/State/Zip: SPARKS, NV 89431-1898 Contact/Phone: 775-359-3303 Vendor No.: T29022158 NV Business ID: NV19901023985
--	--

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.

<input checked="" type="checkbox"/> General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115892

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Northern Nevada Early Intervention Services - Pavement Maintenance CIP Project to include topographic survey, civil plans, bidding, and construction administration services to patch failed pavement, construct accessible parking and access, crack seal, slurry seal, and to restripe the pavement: CIP Project No. 23-S05(9); SPWD Contract No. 115892.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,500.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 22:07:16 PM
Division Approval	nmann	12/10/2023 22:07:19 PM
Department Approval	nmann	12/10/2023 22:07:21 PM
Contract Manager Approval	lwildes	12/11/2023 11:12:19 AM
Budget Analyst Approval	klay0	12/21/2023 15:47:46 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: **28352**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.
Agency Code:	082	Contractor Name:	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.
Appropriation Unit:	1585-82	Address:	895 ROBERTA LN., STE. 104
Is budget authority available?:	Yes	City/State/Zip:	SPARKS, NV 89431-1898
If "No" please explain:	Not Applicable	Contact/Phone:	775-359-3303
		Vendor No.:	T29022158
		NV Business ID:	NV19901023985
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.

<input checked="" type="checkbox"/>	General Funds	7.00 %	Fees	0.00 %
<input checked="" type="checkbox"/>	Federal Funds	93.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115928

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 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 Harry Reid Training Center - Apron Pavement Preservation CIP Project to include topographic survey, civil plans, bidding, and construction administration services for the design and construction of a crack seal, slurry, and striping of the pavement at the Army Aviation Support Facility, including the removal of an existing coating on a portion of the pavement, the sealing of the construction joints in the pavement and a back rolling of the slurry on the tarmac, and two post sweeps to manage the aggregate raveling that occurs after a slurry is applied: CIP Project No. 23-S05g2; SPWD Contract No. 115928.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$51,200.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 23:01:59 PM
Division Approval	nmann	12/10/2023 23:02:02 PM
Department Approval	nmann	12/10/2023 23:02:05 PM
Contract Manager Approval	lwildes	12/11/2023 11:13:45 AM
Budget Analyst Approval	klay0	12/21/2023 15:04:02 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: **28335**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.
Agency Code:	082	Contractor Name:	WALSH ODYSSEY ENGINEERING, LTD. DBA ODYSSEY ENGINEERING, INC.
Appropriation Unit:	1585-80	Address:	895 ROBERTA LN., STE. 104
Is budget authority available?:	Yes	City/State/Zip:	SPARKS, NV 89431-1898
If "No" please explain:	Not Applicable	Contact/Phone:	775-359-3303
		Vendor No.:	T29022158
		NV Business ID:	NV19901023985
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.

<input checked="" type="checkbox"/>	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115891

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**
Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Northern Nevada Adult Mental Health Services (NNAMHS) and Agriculture - Pavement Maintenance CIP Projects to include topographic survey, civil plan fees, bidding, and construction administration services to provide preventative maintenance and repairs on the pavement surfaces at the Sparks Agriculture facility, as well as the following locations for NNAMHS: North Street, the Dini-Townsend Hospital parking lot, the parking lot associated with Building 1, and the parking lot at the Central Kitchen: CIP Project Nos. 23-S05(4&8); SPWD Contract No. 115891.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$33,700.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Markus McEntee, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:58:49 PM
Division Approval	nmann	12/10/2023 21:58:51 PM
Department Approval	nmann	12/10/2023 21:58:53 PM
Contract Manager Approval	lwildes	12/11/2023 11:11:28 AM
Budget Analyst Approval	klay0	12/21/2023 15:34:41 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: **28426**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: SHAW ENGINEERING, LTD.
Agency Code: 082	Contractor Name: SHAW ENGINEERING, LTD.
Appropriation Unit: 1591-47	Address: 20 VINE ST.
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89503-5520
If "No" please explain: Not Applicable	Contact/Phone: 775-329-5559
	Vendor No.: T27036374
	NV Business ID: NV19951060977

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.

<input checked="" type="checkbox"/> General Funds	85.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	15.00 % Agency Funded CIP

Agency Reference #: 116039

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 176 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 Spring Creek Fire Station - Residence and Fire Station Demolition CIP Project to include schematic design, design development, construction documents, plan checking, bid documents, and conformed sets for the demolition of two different abandoned fire stations located approximately six miles apart, each having a residential structure, shop, garage, and outbuildings to store fire response vehicles and tools, with one garage at 607 Engle Drive remaining and parking sites with RV hookups being established for seasonal Forestry staff: CIP Project No. 23-C08; SPWD Contract No. 116039.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$63,500.00**

Other basis for payment: Monthly progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislative 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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 20:33:28 PM
Division Approval	nmann	12/13/2023 20:33:33 PM
Department Approval	nmann	12/13/2023 20:33:37 PM
Contract Manager Approval	lwildes	12/14/2023 08:02:20 AM
Budget Analyst Approval	klay0	01/05/2024 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: **28420**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1592-40 Is budget authority available?: Yes If "No" please explain: Not Applicable	Legal Entity Name: JP ENGINEERING, LLC Contractor Name: JP ENGINEERING, LLC Address: 10597 DOUBLE R BLVD., STE. 1 City/State/Zip: RENO, NV 89521-8938 Contact/Phone: 775-852-2337 Vendor No.: T29038896 NV Business ID: NV20051447455
--	--

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 #: 116018

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/10/2024**
 Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 171 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 Nevada State Museum, Carson City - Life Safety, Security, and Lighting Replacement CIP Project to include schematic design, design development, construction drawings, bid negotiation, and construction administration services for the replacement of the fire alarm, security system, LED lighting, and lighting controls, as well as the installation of an access control system: CIP Project No. 23-M05; SPWD Contract No. 116018.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$70,500.00**

Other basis for payment: Monthly progress payments based on services provided

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:

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:

Jason Aviles, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 20:12:50 PM
Division Approval	nmann	12/13/2023 20:12:53 PM
Department Approval	nmann	12/13/2023 20:12:56 PM
Contract Manager Approval	lwildes	12/14/2023 08:00:51 AM
Budget Analyst Approval	klay0	01/10/2024 15:45:03 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: **28474**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: DINTER ENGINEERING CO.
Agency Code: 082	Contractor Name: DINTER ENGINEERING CO.
Appropriation Unit: 1594-37	Address: 385 GENTRY WAY
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-4608
If "No" please explain: Not Applicable	Contact/Phone: 775-826-4044
	Vendor No.: T32005949
	NV Business ID: NV19861016365

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.

<input checked="" type="checkbox"/> General Funds	75.00 %	Fees	0.00 %
Federal Funds	0.00 %	<input checked="" type="checkbox"/> Bonds	25.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 116040

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 176 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Carson City Supreme Court Building - Replace Emergency Generator CIP Project to include schematic design, design development, construction and bid documents, bidding assistance, and construction administration services for the replacement of the existing emergency generator and automatic transfer switch to provide backup power for the building: CIP Project No. 23-M03-3; SPWD Contract No. 116040.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$96,000.00**

Other basis for payment: Monthly progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislative 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:

Jason Aviles, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 21:33:18 PM
Division Approval	nmann	12/13/2023 21:33:22 PM
Department Approval	nmann	12/13/2023 21:33:24 PM
Contract Manager Approval	lwildes	12/14/2023 08:07:04 AM
Budget Analyst Approval	klay0	01/05/2024 15:07:55 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: **28334**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: LUMOS & ASSOCIATES
Agency Code: 082	Contractor Name: LUMOS & ASSOCIATES
Appropriation Unit: 1594-37	Address: 950 SANDHILL RD., STE. 100
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89521
If "No" please explain: Not Applicable	Contact/Phone: 775-827-6111
	Vendor No.: T80912843
	NV Business ID: NV19791006982

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.

<input checked="" type="checkbox"/> General Funds	75.00 %	Fees	0.00 %
Federal Funds	0.00 %	<input checked="" type="checkbox"/> Bonds	25.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115888

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/20/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 192 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 Marlette Lake Water System - Additional East Slope Catchments CIP Project to include topographic survey and mapping services for the design and construction of three additional surface water catchment basins (Catchment No. 1, No. 2, and Tunnel Catchment), including vegetation clearing, grading, installation of precast concrete structures, piping connections, and reconstruction of the historic timber tunnel entrance to the Tunnel Portal: CIP Project No. 23-M03-09; SPWD Contract No. 115888.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Jason Crosby, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 21:49:51 PM
Division Approval	nmann	12/10/2023 21:49:54 PM
Department Approval	nmann	12/10/2023 21:49:56 PM
Contract Manager Approval	lwildes	12/11/2023 07:55:00 AM
Budget Analyst Approval	klay0	12/20/2023 08:14:35 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: **28347**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: LUMOS & ASSOCIATES, INC.
Agency Code: 082	Contractor Name: LUMOS & ASSOCIATES, INC.
Appropriation Unit: 1594-40	Address: 950 SANDHILL RD., STE. 100
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89521
If "No" please explain: Not Applicable	Contact/Phone: 775-827-6111
	Vendor No.: T80912843
	NV Business ID: NV19791006982

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 #: 115887

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/21/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 191 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 Marlette Lake Water System - East Slope Transmission Main Upgrade CIP Project to include a topographic survey for the replacement of the existing water transmission mains from East Slope Catchments to the Diversion Dam: CIP Project No. 23-M46; SPWD Contract No. 115887.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$93,200.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Jason Crosby, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/10/2023 22:52:38 PM
Division Approval	nmann	12/10/2023 22:52:42 PM
Department Approval	nmann	12/10/2023 22:52:46 PM
Contract Manager Approval	lwildes	12/11/2023 11:12:59 AM
Budget Analyst Approval	klay0	12/21/2023 10:13:36 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: **28387**

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 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. 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 a new contract to provide professional architectural/engineering services for the Northern Nevada Children's Home - Demolition of Cottages CIP Project to include schematic design, design development, construction documents, and plan review and submittal for the demolition of buildings on the site except the historic gymnasium, including small ancillary buildings, sheds, tennis courts, and unnecessary concrete flat work, with all siding, roofing, acoustic ceilings, and floorings that contain asbestos being removed prior to demolition: CIP Project No. 23-C19; SPWD Contract No. 115947.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$97,740.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/12/2023 16:02:55 PM
Division Approval	nmann	12/12/2023 16:02:59 PM
Department Approval	nmann	12/12/2023 16:03:01 PM
Contract Manager Approval	lwildes	12/13/2023 07:26:54 AM
Budget Analyst Approval	klay0	01/03/2024 14:43:40 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: **28354**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1594-32 Is budget authority available?: Yes If "No" please explain: Not Applicable	Legal Entity Name: TANEY ENGINEERING, INC. Contractor Name: TANEY ENGINEERING, INC. Address: 6030 S. JONES BLVD., STE. 100 City/State/Zip: LAS VEGAS, NV 89118-2659 Contact/Phone: 702-362-8844 Vendor No.: T32006658 NV Business ID: NV20232732519
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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 #: 115880

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/02/2024**
 Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 179 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 Bradley Building Demolition CIP Project to include civil engineering services, bid documents, bidding assistance, construction administration, record drawings, and aerial topography for the demolition of the building, including asbestos abatement, landscaping restoration, and utility abandonment: CIP Project No. 23-C24; SPWD Contract No. 115880.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$52,730.00**

Other basis for payment: Monthly progress payments based on services provided

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:

Dustin Cheney, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/11/2023 21:22:46 PM
Division Approval	nmann	12/11/2023 21:22:50 PM
Department Approval	nmann	12/11/2023 21:22:54 PM
Contract Manager Approval	lwildes	12/12/2023 08:21:09 AM
Budget Analyst Approval	klay0	01/02/2024 11:38:59 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: **28539**

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: All Appropriations	Address: 385 PILOT RD., STE. D
Is budget authority available?: No	City/State/Zip: LAS VEGAS, NV 89119-3526
If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3161, expenditure category 66,	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.

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 #: 116146

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/19/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2026**

Contract term: **3 years and 13 days**

4. Type of contract: **Contract**

Contract description: **OWNER-CMAR**

5. Purpose of contract:

This is a new contract to provide Owner Construction Manager At Risk (CMAR) services for the Southern Nevada Adult Mental Health Services - Forensics Facility Renovation (Building 3A) CIP Project: CIP Project No. 24-A009; SPWD Contract No. 116146.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$91,546.00**

Other basis for payment: Demonstrated the required expertise for work on this project.

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency submitted application - Southern Nevada Adult Mental Health Services

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:

Justus Pang, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/05/2023 14:25:10 PM
Division Approval	nmann	12/05/2023 14:25:12 PM
Department Approval	nmann	12/05/2023 14:25:17 PM
Contract Manager Approval	lwildes	12/05/2023 15:01:39 PM
Budget Analyst Approval	klay0	12/19/2023 13:36:21 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: **27326** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **JBA CONSULTING ENGINEERS, INC. DBA NV5 CONSULTANTS**

Agency Code: **082** Contractor Name: **JBA CONSULTING ENGINEERS, INC. DBA NV5 CONSULTANTS**

Appropriation Unit: **All Appropriations** Address: **5155 W. PATRICK LN., STE. 100**

Is budget authority available?: **No** City/State/Zip: **LAS VEGAS, NV 89118-2828**

Contact/Phone: **702-362-9200**

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3650, expenditure category 10, Army Facilities.

Vendor No.: **T80928382**
NV Business ID: **19661000733**

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 % Agency Funded CIP

Agency Reference #: **115338**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/30/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/30/2026**

Contract term: **3 years and 185 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 United States Property and Fiscal Office - Air Handling Unit Replacement CIP Project: CIP Project No. 23-A017; SPWD Contract No. 15338. This amendment increases the maximum amount from \$70,000 to \$82,500 due to additional architectural design and mechanical/engineering services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$70,000.00	\$70,000.00	\$70,000.00	Yes - Info
2. Amount of current amendment (#1):	\$12,500.00	\$12,500.00	\$82,500.00	Yes - Info
3. New maximum contract amount:	\$82,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application - Nevada Army National Guard

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	12/14/2023 13:17:26 PM
Division Approval	nmann	12/14/2023 13:17:34 PM

Department Approval	nmann	12/14/2023 13:17:43 PM
Contract Manager Approval	lwildes	12/14/2023 13:27:20 PM
Budget Analyst Approval	klay0	01/05/2024 10:38:29 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: **28425**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	KITTRELL GARLOCK & ASSOCIATES DBA KGA ARCHITECTURE
Agency Code:	082	Contractor Name:	KITTRELL GARLOCK & ASSOCIATES DBA KGA ARCHITECTURE
Appropriation Unit:	All Budget Accounts - Category 95	Address:	9075 W. DIABLO DR., FL. 3
Is budget authority available?:	No	City/State/Zip	LAS VEGAS, NV 89148-7604
If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3161, expenditure category 95, Deferred Maintenance.		Contact/Phone:	702-367-6900
		Vendor No.:	T80931708
		NV Business ID:	NV20201742190

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 % Agency Funded CIP

Agency Reference #: 116043

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/10/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 171 days**

4. Type of contract: **Contract**

Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Stein Hospital - Deferred Maintenance CIP Project to include schematic design, construction and bid documents, and construction administration services for various deferred maintenance projects at Building 3, including replacing exterior steps with a ramp for safety reasons, painting interior walls and ceiling, replacing exterior door systems, upgrading fire detection and alarm system, and upgrading the electrical panel: CIP Project No. 24-A010-3; SPWD Contract No. 116043.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$92,940.00**

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

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:

Heather Holmstrom, Project Manger Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/13/2023 20:22:03 PM
Division Approval	nmann	12/13/2023 20:22:09 PM
Department Approval	nmann	12/13/2023 20:22:15 PM
Contract Manager Approval	lwildes	12/14/2023 08:01:44 AM
Budget Analyst Approval	klay0	01/10/2024 13:29:32 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: **27195** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **WELLES PUGSLEY ARCHITECTS, LLP DBA PUGSLEY SIMPSON COULTER**

Agency Code: **082** Contractor Name: **WELLES PUGSLEY ARCHITECTS, LLP DBA PUGSLEY SIMPSON COULTER**

Appropriation Unit: **All Appropriations** Address: **151 E. WARM SPRINGS RD.**

Is budget authority available?: **No** City/State/Zip: **LAS VEGAS, NV 89119-4101**

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3650, expenditure category 10, Army Facilities. Contact/Phone: 702-435-1150

Vendor No.: T27038348
NV Business ID: NV20031000034

To what State Fiscal Year(s) will the contract be charged? **2023-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Agency Funded CIP

Agency Reference #: 115262

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/14/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2025**

Contract term: **2 years and 109 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 Floyd Edsall Training Center - Field Maintenance Shop 1 Remodel CIP Project: CIP Project No. 23-A008; SPWD Contract No. 115262. This amendment increases the maximum amount from \$262,100 to \$275,300 due to the addition of a Furniture, Fixtures, and Equipment consultation and report.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$262,100.00	\$262,100.00	\$262,100.00	Yes - Action
2. Amount of current amendment (#1):	\$13,200.00	\$13,200.00	\$13,200.00	Yes - Info
3. New maximum contract amount:	\$275,300.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency submitted application - Nevada Army National Guard

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	12/13/2023 21:05:33 PM
Division Approval	nmann	12/13/2023 21:05:47 PM

Department Approval	nmann	12/13/2023 21:05:59 PM
Contract Manager Approval	lwildes	12/14/2023 08:05:16 AM
Budget Analyst Approval	klay0	01/05/2024 15:35:56 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: **28718**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: GARTNER INC
Agency Code: 180	Contractor Name: GARTNER INC
Appropriation Unit: 1373-26	Address: PO BOX 911319
Is budget authority available?: Yes	City/State/Zip: DALLAS, TX 75391-1319
If "No" please explain: Not Applicable	Contact/Phone: Jay Friedman 239-561-4838
	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.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % internal service funds

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 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025**

Contract term: **1 year and 172 days**

4. Type of contract: **Other (include description): MSA Work Plan**

Contract description: **IT Research & Advis**

5. Purpose of contract:

This is a new service agreement under statewide contract # 99SWC-NV21-8568 which provides research and advisory services related to information technology. This service agreement will provide the Office of the Chief Information Officer's leadership access to advisory services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$55,348.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Office of the CIO (OCIO) continues to pursue Information Technology (IT) advancements that will have statewide benefits. To ensure OCIO stays current with rapidly advancing IT changes, Gartner has been identified as a leading resource of expertise on IT advancement in both government and private sectors. Gartner's breadth of expertise will continue to avoid false starts as the State implements cloud based services, document production, commences development of mobile applications, contemplates replacement of key enterprise software, and considers the most efficient design of future networks.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

[Empty text box]

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	vkneefel	01/02/2024 14:55:02 PM
Division Approval	ddodge	01/02/2024 15:12:44 PM
Department Approval	ddodge	01/02/2024 15:12:50 PM
Contract Manager Approval	thudder	01/03/2024 14:10:27 PM
Budget Analyst Approval	mranki1	01/09/2024 14:00:04 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: **28653**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: Clark County Information Technology
Agency Code: 180	Contractor Name: Clark County Information Technology
Appropriation Unit: 1388-00	Address: 500 S. Grand Central Pkwy
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89106
If "No" please explain: Not Applicable	Contact/Phone: Mike Borowski 702-455-5907
	Vendor No.:
	NV Business ID: Governmental 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 %
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 **07/01/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **Yes**

If "Yes", please explain

Vendor would not sign the contract until the rates were approved; upon approval of the rates, there was negotiations surrounding the contract language.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Revenue Contract**

Contract description: **Rack Space Rental**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing rack space at Beaver Peak located in Washington County, Utah.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,283.50**

Payment for services will be made at the rate of \$12,141.75 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

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency 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:

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	jbrya1	12/14/2023 15:43:39 PM
Division Approval	ccarey	12/14/2023 16:04:56 PM
Department Approval	ddodge	12/15/2023 16:23:58 PM
Contract Manager Approval	mespinos	12/19/2023 08:36:53 AM
Budget Analyst Approval	dlenzner	12/29/2023 15:41:41 PM

Joe Lombardo
Governor



Timothy D. Galluzi
Chief Information Officer
Darla J. Dodge
Deputy Administrator

**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 | citsadministration@admin.nv.gov | Fax: (775) 687-9097

MEMORANDUM

DATE: 16 August 2023
TO: Michael Rankin, Executive Branch Budget Officer
Governor's Finance Office
FROM: Timothy Galluzi, State Chief Information Officer TG
SUBJECT: Request BOE retroactive approval for attached revenue agreement

The attached revenue agreement with Clark County Information Technology has been submitted for approval to the Board of Examiners. As a result of the Office of the Chief Information Office (OCIO) rates not being published until July 13, 2023 and the approval of the OCIO working name, the second party to the agreement was not willing to sign the agreement.

This revenue agreement is a continuation of service to provide rack space to Beaver Peak in Washington/Utah. As this is a revenue agreement, we are requesting the retroactive approval date to have contractual authority between the State and Clark County Information Technology to bill for the services and receive revenue for the State of Nevada.

If the agreement is not approved with an effective date of 01 July 2023, the Office of the Chief Information Officer within the Office of the Governor Network Transport Services budget account would not receive revenue for service provided and not collect sufficient funds this fiscal year for the expenses related to this service.

We respectfully request the Board of Examiners to retroactively approve this revenue agreement with a start date of 01 July 2023.

Signature: 
Timothy Galluzi (Aug 16, 2023 12:39 PDT)

Email: 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: **28656**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: Clark County Information Technology Department
Agency Code: 180	Contractor Name: Clark County Information Technology Department
Appropriation Unit: 1388-00	Address: 500 S. Grand Central Pkwy
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89106
If "No" please explain: Not Applicable	Contact/Phone: Mike Borowski 7024555907
	Vendor No.:
	NV Business ID: Governmental 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 %
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 **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

Vendor would not sign the contract until the rates were approved; upon approval of the rates, there was negotiations surrounding the contract language.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Revenue Contract**

Contract description: **Rack Space Rental**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing rack space at Apex Peak located in Clark County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,283.50**

Payment for services will be made at the rate of \$12,141.75 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

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency 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:

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	jbrya1	12/14/2023 15:44:02 PM
Division Approval	ccarey	12/14/2023 16:04:22 PM
Department Approval	ddodge	12/15/2023 16:24:11 PM
Contract Manager Approval	mespinos	12/19/2023 08:34:27 AM
Budget Analyst Approval	dlenzner	12/29/2023 11:08:07 AM



STATE OF NEVADA
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MEMORANDUM

DATE: 16 August 2023

TO: Michael Rankin, Executive Branch Budget Officer
Governor's Finance Office

FROM: Timothy Galluzi, State Chief Information Officer TG
TG

SUBJECT: Request BOE retroactive approval for attached revenue agreement

The attached revenue agreement with Clark County Information Technology has been submitted for approval to the Board of Examiners. As a result of the Office of the Chief Information Office (OCIO) rates not being published until July 13, 2023 and the approval of the OCIO working name, the second party to the agreement was not willing to sign the agreement.

This revenue agreement is a continuation of service to provide rack space to Apex Peak in Clark County. As this is a revenue agreement, we are requesting the retroactive approval date to have contractual authority between the State and Clark County Information Technology to bill for the services and receive revenue for the State of Nevada.

If the agreement is not approved with an effective date of 01 July 2023, the Office of the Chief Information Officer within the Office of the Governor Network Transport Services budget account would not receive revenue for service provided and not collect sufficient funds this fiscal year for the expenses related to this service.

We respectfully request the Board of Examiners to retroactively approve this revenue agreement with a start date of 01 July 2023.

Signature: 
Timothy Galluzi (Aug 16, 2023 12:39 PDT)

Email: 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: **28613**

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: **FEDERAL BUREAU OF INVESTIGATN**
Contractor Name: **FEDERAL BUREAU OF INVESTIGATN**
Address: **SOUTHWEST COMMAND COLLEGE**
1787 W LAKE MEAD BLVD
City/State/Zip: **LAS VEGAS, NV 89106**
Contact/Phone: 7039853051
Vendor No.: T80489550B
NV Business ID: Governemental Agency

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 %	X	Fees	100.00 % Revenue
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 **07/01/2023**

Anticipated BOE meeting date 12/2023

Retroactive? **Yes**

If "Yes", please explain

Vendor would not sign until the rates had been approved by the State Legislature.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Revenue Contract**

Contract description: **Rack Space**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing rack space at Prospect Peak in Eureka County, Cave Mountain in White Pine County, Montezuma Mountain in Esmerelda County, and Sober Peak in Nye County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$32,378.00**

Payment for services will be made at the rate of \$4,047.25 per quarter

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?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State 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	jbrya1	12/06/2023 07:51:40 AM
Division Approval	ccarey	12/06/2023 08:07:07 AM
Department Approval	ddodge	12/11/2023 15:49:23 PM
Contract Manager Approval	mespinoz	12/11/2023 16:31:58 PM
Budget Analyst Approval	mranki1	12/21/2023 09:34:09 AM

Joe Lombardo
Governor



Timothy D. Galluzi
Chief Information Officer

Darla J. Dodge
Deputy Administrator

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 | citsadministration@admin.nv.gov | Fax: (775) 687-9097

MEMORANDUM

DATE: 22 August 2023

TO: Michael Rankin, Executive Branch Budget Officer
Governor's Finance Office

FROM: Timothy Galluzi, State Chief Information Officer TG

SUBJECT: Request BOE retroactive approval for attached revenue agreement

The attached revenue agreement with the United State Federal Bureau of Investigation has been submitted for approval to the Board of Examiners. As a result of the Office of the Chief Information Office (OCIO) rates not being published until July 13, 2023 and the approval of the OCIO working name, the second party to the agreement was not willing to sign the agreement.

This revenue agreement is a continuation of service to provide rack space at Prospect Peak in Eureka County, Cave Mountain in White Pine County, and Montezuma Mountain and Sober Peak in Nye County. As this is a revenue agreement, we are requesting the retroactive approval date to have contractual authority between the State and the United State Federal Bureau of Investigation to bill for the services and receive revenue for the State of Nevada.

If the agreement is not approved with an effective date of 01 July 2023, the Office of the Chief Information Officer within the Office of the Governor Network Transport Services budget account would not receive revenue for service provided and not collect sufficient funds this fiscal year for the expenses related to this service.

We respectfully request the Board of Examiners to retroactively approve this revenue agreement with a start date of 01 July 2023.

Signature: 
Timothy Galluzi (Aug 22, 2023 11:09 PDT)

Email: 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: **24791** Amendment Number: **1**

Agency Name: **ADMIN - ENTERPRISE IT SERVICES** Legal Entity Name: **NYE COUNTY SHERIFFS OFFICE**

Agency Code: **180** Contractor Name: **NYE COUNTY SHERIFFS OFFICE**

Appropriation Unit: **1388-00** Address: **NYE COUNTY SHERIFFS OFFICE**

Is budget authority available?: **Yes** City/State/Zip: **PAHRUMP, NV 89060**

If "No" please explain: Not Applicable Contact/Phone: **775/751-7015**

Vendor No.: **T80044560AF**

NV Business ID: **Governmental Entity**

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2025**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Rack Space Rental**

5. Purpose of contract:

This is the first amendment to the original revenue interlocal agreement which provides ongoing rack space at Brock Mountain located in Nye County, Montezuma Peak located in Esmeralda County, Warm Springs located in Nye County, and Sober Peak located in Nye County. This amendment increases the maximum amount from \$104,218.24 to \$170,925.30 due to a rate increase.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$104,218.24	\$104,218.24	\$104,218.24	Yes - Action
2. Amount of current amendment (#1):	\$66,707.06	\$66,707.06	\$66,707.06	Yes - Info
3. New maximum contract amount:	\$170,925.30			

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: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277 - 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?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State 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	jbrya1	12/20/2023 10:05:47 AM
Division Approval	ccarey	12/20/2023 10:11:05 AM
Department Approval	ddodge	12/20/2023 11:13:57 AM
Contract Manager Approval	mespinoz	12/20/2023 11:42:35 AM
Budget Analyst Approval	dlenzner	12/29/2023 08:08:39 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: **28629**

Agency Name: DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name: SOCIAL ENTREPRENEURS, INC.
Agency Code: 402	Contractor Name: SOCIAL ENTREPRENEURS, INC.
Appropriation Unit: 3151-04	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**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

<input checked="" type="checkbox"/> General Funds	20.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	80.00 % COST ALLOCATION

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/28/2023**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2024**

Contract term: **34 days**

4. Type of contract: **Other (include description): MSA Work Plan**

Contract description: **Leadership Training**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides ongoing leadership training facilitation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,031.25**

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 contract will provide leadership development in support of ADSD's leadership team in collaboratively supporting the Division's people strategy and DEI work.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise to provide 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?

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:

DHHS - since 2019 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	gjorgens	12/11/2023 12:34:08 PM
Division Approval	ecreceli	12/11/2023 16:03:43 PM
Department Approval	dschmid5	12/12/2023 12:54:29 PM
Contract Manager Approval	maceved1	12/13/2023 12:11:12 PM
Budget Analyst Approval	khal5	12/28/2023 15:00:19 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: **28560**

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name: Eureka County Social Services
Agency Code: 403	Contractor Name: Eureka County Social Services
Appropriation Unit: 3243-00	Address: PO Box 278
Is budget authority available?: Yes	City/State/Zip: Eureka, NV 89316
If "No" please explain: Not Applicable	Contact/Phone: Linda Gordon 775-237-5597
	Vendor No.: T80975988
	NV Business ID: Governmental Entity

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 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

The contract requires a retroactive start date to allow the state to collect revenue from the county for the non-federal share of medical care of indigent persons. The counties are statutorily required to pay the non-federal share of these expenses per NRS 428.285. This contract falls in line with the approved biennial budget and the counties need to be aware of the funding approved in the Legislatively Approved Budget.

3. Termination Date: **06/30/2027**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide the non-federal share for medical care of indigent persons within the Medicaid County Match Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$39,594.46**

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24: \$12,533.17; FY25-27: \$9,020.43/year

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support and relief to the poor, indigent, incompetent, and incapacitated persons who lawfully reside in the county and are not supported by other means. The County Match Program provides fiscal relief to the counties for indigent long-term care costs for these individuals.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees operate the County Match Program. DHCFP pays providers and the counties reimburse the State for the non-federal share.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHCFP since 2015 to 2023. Satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	12/13/2023 18:22:57 PM
Division Approval	laaron	12/14/2023 11:59:24 AM
Department Approval	staciew4	12/15/2023 09:23:43 AM
Contract Manager Approval	trya4	12/15/2023 09:42:54 AM
Budget Analyst Approval	nrezaie	01/09/2024 11:13:05 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: **28482**

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name: SHI International Corportion
Agency Code: 406	Contractor Name: SHI International Corportion
Appropriation Unit: 3215-24	Address: 290 Davidson Avenue
Is budget authority available?: Yes	City/State/Zip: Somerset, NJ 08873
If "No" please explain: Not Applicable	Contact/Phone: James Tagliaferro 800-527-6389
	Vendor No.: PUR0001595
	NV Business ID: NV20131129294

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 #: SA 18278

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/18/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/29/2024**

Contract term: **285 days**

4. Type of contract: **Contract**

Contract description: **Server Merge Project**

5. Purpose of contract:

This is a new service agreement under statewide contract 99SWC-NV21-8395 which provides information technology solution products and services. The service agreement will provide services to facilitate the merging of the servers belonging to the department and Clark County, into one combined server.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,094.40**

Payment for services will be made at the rate of \$134.35 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Agreement between DHHS and Clark County to migrate data and combine servers.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No employees with the ability to facilitate this contract SOW.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

- 10. a. Does the contract contain any IT components? Yes
- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Statewide contract 99SWC-NV21-8395.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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	ijanssen	12/01/2023 15:19:26 PM
Division Approval	ijanssen	12/01/2023 15:19:29 PM
Department Approval	ijanssen	12/01/2023 15:19:33 PM
Contract Manager Approval	ijanssen	12/01/2023 15:19:46 PM
EITS Approval	ljean	12/04/2023 09:52:58 AM
Budget Analyst Approval	cdavis	12/18/2023 13:28:35 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: **28580**

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name: KPS3 INC
Agency Code: 406	Contractor Name: KPS3 INC
Appropriation Unit: 3220-09	Address: 500 RYLAND ST STE 300
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-1662
If "No" please explain: Not Applicable	Contact/Phone: 775/686-7439
	Vendor No.: PUR0004720
	NV Business ID: NV19941094961

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 #: C 18281

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/18/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2024**

Contract term: **286 days**

4. Type of contract: **Contract**

Contract description: **Marketing**

5. Purpose of contract:

This is a new contract to provide marketing strategies, website development, and social media campaigns.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$51,000.00**

Other basis for payment: See cost schedule.

II. JUSTIFICATION

7. What conditions require that this work be done?

The work in the contract is an extension of the work KPS3 performed last year under a work order to promote the HEALNV.com website and 5-2-1-0 program.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

CDPHP does not have the staff with expertise to administer the social media campaign or marketing of the website and 5-2-1-0 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?

The vendor was chosen as they have expertise in this area, and they are continuing with the work they performed in FFY23 under a work order.

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:

Statewide contract 99SWC-NV23-17886

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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	ijanssen	12/07/2023 15:05:44 PM
Division Approval	ijanssen	12/07/2023 15:05:47 PM
Department Approval	ijanssen	12/07/2023 15:05:50 PM
Contract Manager Approval	ijanssen	12/07/2023 15:05:54 PM
Budget Analyst Approval	cdavis	12/18/2023 14:21:56 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: **27813**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Nye County
Agency Code:	406	Contractor Name:	Nye County
Appropriation Unit:	3224-00	Address:	1 Frankie Street, Suite A
Is budget authority available?:	Yes	City/State/Zip:	Tonoph, NV 89049
If "No" please explain:	Not Applicable	Contact/Phone:	Lorina Dellinger 775-482-8191
		Vendor No.:	
		NV Business ID:	Governmental Entitiy
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 % Revenue
Agency Reference #:	C18227		

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 02/2024

Retroactive? **Yes**

If "Yes", please explain

Contract was sent to the County first week of May 2023 and had received no response due to requiring County Supervisory signature. Secondary reason for delay was due to limited staff availability due to high staff vacancies at CHS necessary to complete and submit the contract renewals.

3. Termination Date: **06/30/2025**

Contract term: **2 years**

4. Type of contract: **Revenue Contract**

Contract description: **Public Health**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing public health services to meet the health needs of the rural and frontier communities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$67,000.00**

Payment for services will be made at the rate of \$5,583.34 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division of Public and Behavioral Health, Community Health Services has been designated to receive funding from the county in the form of a monthly assessment to provide mandated public health services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

These services are provided by Community Health Nurses (state employees) and contracted Registered Nurses when necessary.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Per NRS 430 and 441A the State is required to provide ongoing assessments to each county for the assessed cost of public health services.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current vendor with DPBH, satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ijanssen	11/02/2023 11:27:19 AM
Division Approval	ijanssen	11/02/2023 11:27:21 AM
Department Approval	ijanssen	11/02/2023 11:27:41 AM
Contract Manager Approval	ijanssen	11/02/2023 11:27:45 AM
Budget Analyst Approval	cdavis	12/18/2023 14:28:14 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: June 8, 2023

TO: Nima Rezaie, Budget Officer
Governor's Finance Office

THROUGH: Kitty DeSocio, Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: Kelli Quintero, Administrative Services Officer III
Division of Public and Behavioral Health

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL – Nye County CETS #24184 Contract C# 18227

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Contractor: Nye County
- Services to be provided: Mandatory and optional services to the public including but not limited to: public health preparedness services, STI testing and treatment, family planning services such as preconception and conception counseling, contraception, pregnancy testing and counseling, TB testing, screening, and treatment, and immunization services for individuals that are uninsured or underinsured.
- Funding source and expenditure category: BA 3224 – CAT 19
- Requested start date of work: 7/1/2023
- Expected execution date of agreement: N/A
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - The amendment to the previous contract was mailed to the county the first week of May 2023 but have not been received back from the county as these contracts are typically received by county supervisors for approval before signature.
 - CHS has experienced high staff vacancies therefore limited staff availability to complete and submit the contract renewals.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: Community Health Nursing provides essential services for the county and in turn relies on the assessments received monthly to assist with the expenses to operate clinics within rural and frontier Nevada.
 - Explain how the program/bureau will prevent future retroactive requests: The goal of Community Health Services is to ensure appropriate staffing levels to create the budgets and county contracts more timely going forward to ensure time for all levels of approvals. Program management will meet internally before the end of the calendar year prior to the contract nearing expiration to submit contracts ahead of schedule.

If you have any questions, please contact Nicole Batien at (775) 684-5022 or nibatien@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: **28671**

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name: Willow Springs, LLC
Agency Code: 409	Contractor Name: Willow Springs, LLC
Appropriation Unit: 3145-52	Address: 1240 East 9th Street
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89512
If "No" please explain: Not Applicable	Contact/Phone: Charette Godoy 775-858-4529
	Vendor No.: T27008670
	NV Business ID: NV20031045964

To what State Fiscal Year(s) will the contract be charged? **2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/07/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

Nevada Youth Parole Services currently has a youth committed in Lyon County and in need of partial hospitalization. The youth is currently being housed at Reno Behavioral Health; however, needs to be transitioned to an acute facility that will meet the youth needs. DCFS has identified Willow Springs LLC as a vendor who is willing to accept the youth immediately. The youth was denied at PRTF-North and Reno Behavioral Health is unable to provide the acute care that is needed.

3. Termination Date: **03/06/2024**

Contract term: **90 days**

4. Type of contract: **Contract**

Contract description: **Emergency Treatment**

5. Purpose of contract:

The is a new emergency retroactive contract to provide partial acute hospitalization and possible residential treatment for a youth on parole.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$67,500.00**

Payment for services will be made at the rate of \$750.00 per Day

Other basis for payment: Approximately 90 days of treatment.

II. JUSTIFICATION

7. What conditions require that this work be done?

DCFS has identified Willow Springs, LLC as a vendor who is willing to accept the youth immediately. The youth was denied at PRTF-North and Reno Behavioral Health is unable to provide the acute care that is needed. Willow Springs LLC has expertise in providing partial hospitalization and residential treatment services necessary to stabilize their 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. Other State facilities offering residential, therapeutic, and psychiatric treatment have declined to accept 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):

Willow Springs Center
Reno Behavioral Center
DCFS Psychiatric Residential Treatment Facility-North

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This 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 vendor used to be contracted with DCFS through a Provider Agreement and services were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kelsey McCann-Navarro, Social Services Chief III Ph: 775-684-4431

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	12/22/2023 12:09:37 PM
Division Approval	hbugg	12/22/2023 12:15:12 PM
Department Approval	mwillia9	12/22/2023 15:53:00 PM
Contract Manager Approval	rmille8	12/26/2023 11:00:03 AM
Budget Analyst Approval	pokeefe	12/28/2023 08:58:43 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

MEMORANDUM

DATE: December 7, 2023

TO: Philene O'Keefe, Executive Branch Budget Officer 1
Gideon Davis, Administrator, Purchasing Division

FROM: Marla McDade Williams, Administrator, Division of Child and Family Services *Marla McDade Williams*

RE: DCFS Emergency Retroactive Contract Request – Willow Springs LLC

An emergency retroactive contract is being requested between the Division of Child and Family Services (DCFS) and Willow Springs LLC to perform required partial hospitalization (PHP) and possible residential treatment for a youth on parole. The youth has been clinically accepted for treatment at Willow Springs LLC.

Nevada Youth Parole Services, operating under DCFS, currently has a youth committed in Lyon County and in need of partial hospitalization (PHP). The youth is currently being housed at Reno Behavioral Health however needs to be transitioned to an acute facility that will meet the youth needs. DCFS has identified Willow Springs LLC as a vendor who is willing to accept the youth immediately. The youth was denied at PRTF-North and Reno Behavioral Health is unable to provide the acute care that is needed.

DCFS is seeking authorization to enter into a contract with a non-Medicaid facility and is requesting a retroactive emergency services contract so Youth Parole Services can transport the youth to the facility for immediate inpatient care. The youth's Medicaid coverage has been denied as the youth is no longer eligible for coverage. The placement would be a 90-day treatment plan and the youth will be admitted once a contract is approved at the daily rate of \$750.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4459 or mmcdade@dcfs.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: **28187**

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name: NIGHTLIGHT CHRISTIAN ADOPTIONS
Agency Code: 409	Contractor Name: NIGHTLIGHT CHRISTIAN ADOPTIONS
Appropriation Unit: 3229-13	Address: 6409 S. East Street
Is budget authority available?: Yes	City/State/Zip: Indianapolis, IN 46227-7107
If "No" please explain: Not Applicable	Contact/Phone: Julie Connor 317-875-0058
	Vendor No.: T29042839
	NV Business ID: out of state vendor

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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.

<input checked="" type="checkbox"/> General Funds	52.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	30.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	18.00 % County Reimbursement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/27/2023**
Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2027**
Contract term: **3 years and 277 days**

4. Type of contract: **Contract**
Contract description: **Out of State Visits**

5. Purpose of contract:
This is a new contract to provide ongoing services for federally mandated monthly visits for children placed outside the State of Nevada in a residential facility.

6. NEW CONTRACT
The maximum amount of the contract for the term of the contract is: **\$24,500.00**
Payment for services will be made at the rate of \$500.00 per monthly visit
Other basis for payment: NTE \$500 for travel over 60 miles (GSA rate)

II. JUSTIFICATION

7. What conditions require that this work be done?
The purpose of this contract is to provide federally mandated monthly visits for a child (or children) that are placed outside the State of Nevada in a residential facility. A portion of each visit must be with the child alone and then a portion with the placement provider. This vendor will provide visitation to the facilities that accept NV Medicaid and meet the needs of Nevada youth.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
Face to face visitation with children placed in out-of-state residential facilities is required; the cost to contract with a vendor in the residential facility is more cost efficient than to fly a caseworker to perform this duty. Per Child Abuse Prevention and Treatment Act (CAPTA), these visits must be completed every calendar month.

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):

Adoption Support Center
Kids First Adoption Center
Nightlight Christian Adoptions

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor willing to provide services in Indiana for our monthly rate.

d. Last bid date: 09/05/2023 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 these services for 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 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?

No b. If "NO", please explain.

This vendor only provides services out of state.

19. Agency Field Contract Monitor:

Maria Hickey, Social Services Program Specialist Ph: 775-684-1975

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	krober10	09/11/2023 09:22:54 AM
Division Approval	hbugg	10/17/2023 16:26:29 PM
Department Approval	mwillia9	10/25/2023 07:51:58 AM
Contract Manager Approval	sknigge	12/15/2023 14:49:25 PM
Budget Analyst Approval	pokeefe	12/27/2023 11:01:08 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: **28412**

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name: Janell Anderson LCSW PLLC
Agency Code: 409	Contractor Name: Janell Anderson LCSW PLLC
Appropriation Unit: 3263-36	Address: 1515 7th St
Is budget authority available?: Yes	City/State/Zip: Elko, NV 89801
If "No" please explain: Not Applicable	Contact/Phone: Mardi Robinson 775-299-3738
	Vendor No.: T29047111
	NV Business ID: NV20201844370

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.

X General Funds	50.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	50.00 % County Reimbursement

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 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2026**

Contract term: **2 years and 172 days**

4. Type of contract: **Contract**

Contract description: **Therapy & Counseling**

5. Purpose of contract:

This is a new contract to provide therapy and counseling services to youth under the supervision of the Youth Parole Bureau.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$76,000.00**

Payment for services will be made at the rate of \$200.00 per hour

Other basis for payment: \$200 x 10 hours per month x 38 months = \$76,000

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose of this contract is to obtain critical outpatient services for follow-up mental health care for youth who return home from an out of state residential treatment center.

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 staff to provide this service.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is the only vendor that submitted a bid in response to an informal solicitation.

d. Last bid date: 10/01/2023 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 has been under contract, but services were not used.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Stephanie Henderson, Unit Manager Ph: 775-687-2263

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bdahlber	11/06/2023 16:38:44 PM
Division Approval	hbugg	12/14/2023 16:12:44 PM
Department Approval	mwillia9	12/28/2023 16:30:42 PM
Contract Manager Approval	sknigge	12/28/2023 16:44:20 PM
Budget Analyst Approval	pokeefe	01/09/2024 07:42:51 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: **25909** Amendment Number: **1**

Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES** Legal Entity Name: **ANYTIME PLUMBING, LLC**

Agency Code: **409** Contractor Name: **ANYTIME PLUMBING, LLC**

Appropriation Unit: **3646-07** Address: **4690 W POST RD STE 130**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89118-4345**

If "No" please explain: **Not Applicable** Contact/Phone: **Dee Hairston 702/362-9300**

To what State Fiscal Year(s) will the contract be charged? **2022-2026** Vendor No.: **PUR0005090A**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources. NV Business ID: **NV20222570469**

<input checked="" type="checkbox"/>	General Funds	66.00 %	Fees	0.00 %
<input checked="" type="checkbox"/>	Federal Funds	34.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/17/2022**

Anticipated BOE meeting date **12/2023**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **03/31/2026**

Contract term: **3 years and 319 days**

4. Type of contract: **Contract**

Contract description: **Plumbing Services**

5. Purpose of contract:

This is the first amendment to the original contract that provides ongoing plumbing services on an as needed basis. This amendment increases the contract maximum from \$46,000 to \$96,000 due to an increased need for plumbing services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$46,000.00	\$46,000.00	\$46,000.00	Yes - Info
2. Amount of current amendment (#1):	\$50,000.00	\$50,000.00	\$96,000.00	Yes - Info
3. New maximum contract amount:	\$96,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Plumbing services are necessary for the health and wellbeing of clients, staff and visitors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Division does not have staff with the needed expertise.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The selected vendor had the lowest rates for services as well as having familiarity with the facilities and prompt responses to calls in the past.

d. Last bid date: 01/17/2022 Anticipated re-bid date: 01/19/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been under contract with the Division since 2014. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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	prassie1	11/15/2023 16:46:50 PM
Division Approval	hbugg	12/20/2023 15:41:54 PM
Department Approval	mwillia9	12/22/2023 11:08:08 AM
Contract Manager Approval	rmille8	01/02/2024 15:28:57 PM
Budget Analyst Approval	pokeefe	01/05/2024 14:59:39 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: 22833	Amendment Number: 2
Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name: STING ALARM INC
Agency Code: 409	Contractor Name: STING ALARM INC
Appropriation Unit: 3646-07	Address: 7120 RAFAEL RIDGE WAY
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89119-4002
If "No" please explain: Not Applicable	Contact/Phone: Jaime Gomez 702/737-8464
	Vendor No.: T32008789
	NV Business ID: NV20051515364
To what State Fiscal Year(s) will the contract be charged?	2020-2024

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

<input checked="" type="checkbox"/> General Funds	66.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	34.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2020**

Anticipated BOE meeting date: 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2024**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Fire Monitoring**

5. Purpose of contract:

This is the second amendment to the original contract to provide ongoing fire equipment monitoring and annual inspections for 11 state owned buildings located at 6171 W. Charleston Blvd. in Las Vegas. This amendment increases the amount from \$29,040 to \$39,040 and modifies the scope of work to include the cost of repairs.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	
1. The max amount of the original contract:	\$29,040.00	\$29,040.00	\$29,040.00	Yes - Info
a. Amendment 1:	\$0.00	\$0.00	\$29,040.00	No
2. Amount of current amendment (#2):	\$10,000.00	\$10,000.00	\$39,040.00	Yes - Info
3. New maximum contract amount:	\$39,040.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Fire alarm systems are required by chapter 907.6.5 of the International Building Code (as adapted by the Nevada Fire Marshall) to be monitored by an approved supervising station.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No employee holds a Nevada "F" card as required by the Nevada State Fire Marshall.

- 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 renewing with the current contractor, all equipment in the 11 buildings would remain at no additional cost to the agency, whereas selecting a new vendor would add additional costs with having to purchase or lease new equipment.

d. Last bid date: 12/02/2019 Anticipated re-bid date: 11/01/2024

- 10. a. Does the contract contain any IT components? No
- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State Buildings and Grounds since 2020, 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	prassie1	12/18/2023 11:58:55 AM
Division Approval	hbugg	12/18/2023 12:15:52 PM
Department Approval	mwillia9	12/18/2023 13:15:21 PM
Contract Manager Approval	sknigge	12/19/2023 08:47:11 AM
Budget Analyst Approval	pokeefe	12/22/2023 12:03:21 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: **28692**

Agency Name: ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name: VORTEX DOORS LLC
Agency Code: 431	Contractor Name: VORTEX INDUSTRIES LLC
Appropriation Unit: 3650-07	Address: 3440 FLAIR DR LOCKBOX 846952
Is budget authority available?: Yes	City/State/Zip: EL MONTE, CA 91731
If "No" please explain: Not Applicable	Contact/Phone: GREG SIMONVICH 916-920-3667
	Vendor No.: T32015046A
	NV Business ID: NV20212315263

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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.

<input checked="" type="checkbox"/> General Funds	50.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	50.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/16/2024**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2028**

Contract term: **4 years and 16 days**

4. Type of contract: **Contract**

Contract description: **Door Repairs**

5. Purpose of contract:

This is a new contract to provide installation, repair or maintenance on all types of doors for all Nevada National Guard locations.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$95,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Need for installations, repairs and/or maintenance of doors at all Nevada National Guard locations

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 materials to complete 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):

**Vortex Doors
The Doors Guardian
Arbon**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vortex Doors came in with the lowest bid for the work needed.

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?

No b. If "No", please explain:

VORTEX DOORS LLC FALLS UNDER THE UMBERLLA OF VORTEX INDUSTRIES LLC

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada 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	12/27/2023 15:02:43 PM
Division Approval	csnido1	12/27/2023 15:02:45 PM
Department Approval	csnido1	12/27/2023 15:02:48 PM
Contract Manager Approval	csnido1	12/29/2023 10:17:06 AM
Budget Analyst Approval	twollan1	01/16/2024 16:31:58 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: **28225**

Agency Name: **DEPARTMENT OF CORRECTIONS**
Agency Code: **440**
Appropriation Unit: **3710-09**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **Savage and Son, Inc.**
Contractor Name: **Savage and Son, Inc.**
Address: **3101 Tori Avenue**
City/State/Zip: **Reno, NV 89502**
Contact/Phone: **Marlys Temen 775-828-4193**
Vendor No.: **PUR0000504A**
NV Business ID: **NV19341000063**
To what State Fiscal Year(s) will the contract be charged? **2023-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/30/2023**

Anticipated BOE meeting date 11/2023

Retroactive? **Yes**

If "Yes", please explain

Emergency gas leak needed immediate repairs.

3. Termination Date: **07/31/2023**

Contract term: **31 days**

4. Type of contract: **Contract**

Contract description: **LCC Retro Gas leak**

5. Purpose of contract:

This is a new contract to provide for emergency repairs for a gas leak in Unit 6 at Lovelock Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$74,841.40**

II. JUSTIFICATION

7. What conditions require that this work be done?

Emergency gas leak needed immediate attention.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No employee or agency is qualified to make this repair.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Only vendor willing to perform the job on short notice.

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	cjacob	11/01/2023 07:45:01 AM
Division Approval	cjacob	11/16/2023 14:08:43 PM
Department Approval	cjacob	11/16/2023 14:08:45 PM
Contract Manager Approval	blewalle	12/12/2023 07:30:10 AM
Budget Analyst Approval	klay0	12/15/2023 11:16:55 AM

Joe Lombardo
Governor

James E. Dzurenda
Director

Tim Garrett
Warden



Lovelock Correctional Center
1200 Prison Road
Lovelock, NV 89419
(775) 977-5350

MEMORANDUM

Date: September 13, 2023

To: Kristina Shea, DD Support Services
Jacob Council, Budget Analyst
Brandon Lewallen, Contracts Manager

Subject: ATF – Savage & Son – Gas Leak Repair

Recently, a natural gas leak was discovered in Housing Unit 6. The unit had to be evacuated and the gas leak repaired for obvious safety and security reasons. Savage and Son provided this service while working closely with LCC staff, Southwest Gas, and others.

Please find attached the invoice for these repairs in the Amount of \$75,232.88. The LCC budget will not support this expense. We respectfully request these funds be taken from the Director's Emergency Fund.

If any additional information is required, please don't hesitate to contact either myself or Kirsten Hertz, ASO II at LCC.

Thank you for your consideration.

A handwritten signature in blue ink, appearing to read "Tim Garrett".

Tim Garrett, Warden
Nevada Department of Corrections
Lovelock Correctional Center

A handwritten signature in blue ink, appearing to read "K Shea".

Attachment: Savage & Son Invoice # 151112

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: **22548** Amendment Number: **3**

Agency Name: **DEPARTMENT OF CORRECTIONS** Legal Entity Name: **RELX, INC. DBA LexisNexis**

Agency Code: **440** Contractor Name: **RELX, INC. DBA LexisNexis**

Appropriation Unit: **3763 - All Categories** Address: **9443 Springboro Pike**

Is budget authority available?: **Yes** City/State/Zip: **Miamisburg, OH 45342**

If "No" please explain: **Not Applicable** Contact/Phone: **Kim Shields 573-673-4230**

Vendor No.: **PUR0003527**

NV Business ID: **NV20091408274**

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Inmate Welfare Account

Agency Reference #: **RFP # 44DOC-S784-AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2020**

Anticipated BOE meeting date **12/2023**

Retroactive? **Yes**

If "Yes", please explain

The deadline was missed for the extension due unforeseen delays. This contract extension is needed to give time to complete the RFP process

3. Previously Approved Termination Date: **12/31/2023**

Contract term: **4 years and 120 days**

4. Type of contract: **Contract**

Contract description: **Legal research**

5. Purpose of contract:

This is the third amendment to the original contract for legal resources. The purpose of this amendment is to extend the contract duration by 4 months so an RFP can be completed for this service.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$357,350.00	\$357,350.00	\$357,350.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$3,606.00	\$3,606.00	\$3,606.00	No
2. Amount of current amendment (#3):	\$26,732.00	\$30,338.00	\$30,338.00	Yes - Info
3. New maximum contract amount:	\$387,688.00			
and/or the termination date of the original contract has changed to:	04/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Department of Corrections is obligated to maintain current legal materials and updates in all seven of their correctional institution law libraries.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Historically the Department has outsourced the legal resource research services to ensure prompt and current law library resources to incarcerated inmates.

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 #33DOC-S784, and in accordance with NRS 333, the selected vendor was the only vendor that submitted a proposal. An internal review was done by the Department of Corrections.

d. Last bid date: 08/12/2019 Anticipated re-bid date: 06/15/2023

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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	cjacob	12/12/2023 14:19:46 PM
Division Approval	cjacob	12/12/2023 14:19:51 PM

Department Approval	kshe1	12/28/2023 11:29:47 AM
Contract Manager Approval	kshe1	12/28/2023 11:29:51 AM
Budget Analyst Approval	vyoungb	01/08/2024 15:15:36 PM



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval #:	526 @

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information: Note: Approved copy will be sent to <u>only</u> to the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:	Department of Corrections	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Brandon Lewallen	775-977-5673	blewallen@doc.nv.gov

2	Contractor Information:	
	Contractor Name:	LexisNexis, a division of RELX Inc.
	Contact Name:	Kim Shields
	Complete Address: City, State and Zip Code	9443 Springboro Pike, Miamisburg OH, 45342-4425
	Phone Number:	573-673-4230
	Email Address:	Kim.Shields@lexisnexis.com

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):			
	Solicitation Type, if applicable:	RFP	#:	1825
	Enter CETS Number:	#10748		
	Contract Amount:	\$429,288.56		
	Contract Term:	Start Date:	7/1/2010	End Date:

Resubmission 11/20/2023

Purchasing Use Only:	
Approval #:	5260

Current Contract Information:					
4	Solicitation Type, if applicable:	RFP		#:	44DOC-S784
	Enter CETS Number:	#22548			
	Initial Contract Amount:	\$357,350.00			
	Contract Term:	Start Date:	1/01/2020	End Date:	12/31/2023

Amendment Information – List <u>all previously</u> approved amendments:				
Amd #:	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>	
5	2	Additional Services (CourtLink & Lexis Advantage)	\$3,606.00	12/31/2023
	1	Addition of Criminal Law Deskbook (Legal Encyclopedia)	\$0.00	12/31/2023

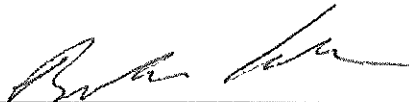
<u>Proposed</u> Amendment Information:				
Amd #:	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>	
6	3	Extend contract expiration date for current services to continue uninterrupted and allow time for an RFP to be completed by State Purchasing.	\$30,080.00	04/30/24

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	Additional time is needed to perform a new RFP for this service by State Purchasing.

8	What are the potential consequences to the State if the contract extension request is denied?
	This service will expire and inmates will no longer have access to Law Library research materials violating their rights.

Purchasing Use Only:	
Approval #:	5260

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

Brandon Lewallen

 Print Name of Agency Representative Initiating Request

11/20/2023

 Date



 Signature of Agency Head Authorizing Request

Jacob Council


 Print Name of Agency Head Authorizing Request

11/20/23

 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

11/20/23

 Date

Joe Lombardo
Governor

James E. Dzurenda
Director

Kristina Shea
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

MEMORANDUM

Date: January 2, 2023
To: Governors Finance Office
Subject: Retro Contract Request- LexisNexis

This Memo is to inform you that NDOC is asking for Contract #22548 to be approved retroactively for LexisNexis. We need the contract approved from 12/31/2023 to 4/30/2024, the deadline for the extension was missed by days caused by unforeseen delays.

Thank you,

A handwritten signature in black ink, appearing to read "Kristina Shea".

Kristina Shea

Deputy Director of Support Services
Nevada Department of Corrections
Office 775.977.5007

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: **28422**

Agency Name: DEPARTMENT OF AGRICULTURE	Legal Entity Name: C&C Nevada, LLC DBA Jani-King of Nevada
Agency Code: 550	Contractor Name: C&C Nevada, LLC DBA Jani-King of Nevada
Appropriation Unit: 4554-07	Address: PO Box 650002, Dept. 8037
Is budget authority available?: Yes	City/State/Zip: Dallas, TX 75265
If "No" please explain: Not Applicable	Contact/Phone: Robert Brame 702-737-6116
	Vendor No.: T29041296
	NV Business ID: NV20181600550

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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	26.00 %
X Federal Funds	74.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 24-08

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/01/2024**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **04/30/2028**

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 for the southern Las Vegas headquarters.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$80,760.00**

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 Department's southern Nevada headquarters must be maintained to a minimum standard of cleanliness.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not employ full-time janitorial staff at this location.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Jani-King of Nevada
Coverall
Las Vegas Janitorial Services

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was the only one to respond to a request for quotes.

d. Last bid date: 08/22/2023 Anticipated re-bid date: 08/24/2026

- 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:

Jani-King provided service to the Department of Agriculture in 2022 and services received were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Gregg Keyes, Facilities Manager Ph: 775-353-3727

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mmarkovi	11/08/2023 14:02:42 PM
Division Approval	mmarkovi	11/08/2023 14:02:48 PM
Department Approval	avigi1	11/08/2023 14:44:28 PM
Contract Manager Approval	cprasa1	11/13/2023 12:07:16 PM
Budget Analyst Approval	dspeed1	12/14/2023 15:49:29 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: **28491**

Agency Name: **DEPARTMENT OF AGRICULTURE**
 Agency Code: **550**
 Appropriation Unit: **4554-95**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **Kodiak Roofing & Waterproofing Co.**
 Contractor Name: **Kodiak Roofing & Waterproofing Co.**
 Address: **1890 Purina Way**
 City/State/Zip: **Sparks, NV 89431**
 Contact/Phone: **Robert Briggs 775-562-3800**
 Vendor No.: **T32010278**
 NV Business ID: **NV19961065244**

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 %	X	Fees	100.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 24-11

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2024**

Contract term: **1 year and 18 days**

4. Type of contract: **Contract**

Contract description: **Roof Repair**

5. Purpose of contract:

This is a new contract to provide roof repair services to the Sparks headquarters location.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,233.00**

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 current roof is not watertight and is leaking in some areas. Multiple issues were identified during an investigation last spring that need to be addressed to ensure watertightness.

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 nor the proper licensing to complete this work.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Kodiak Roofing & Waterproofing
 East Fork Roofing
 Quality First Improvements

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was the only one to provide a quote.

d. Last bid date: 10/24/2023 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:

Kodiak Roofing provided service to the State Public Works Division in 2023 and services received 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:

Gregg Keyes, Facilities Manager Ph: 775-353-3727

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mmarkovi	11/14/2023 13:21:00 PM
Division Approval	mmarkovi	11/14/2023 13:21:03 PM
Department Approval	avigi1	11/22/2023 09:48:54 AM
Contract Manager Approval	cprasa1	11/22/2023 11:39:23 AM
Budget Analyst Approval	dspeed1	12/14/2023 17:18:15 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **28417**

Agency Name: DEPARTMENT OF AGRICULTURE	Legal Entity Name: Vortex Industries, LLC
Agency Code: 550	Contractor Name: Vortex Industries, LLC
Appropriation Unit: 4554-95	Address: 20 Odyssey
Is budget authority available?: Yes	City/State/Zip: Irvine, CA 92618
If "No" please explain: Not Applicable	Contact/Phone: Greg Simonovich 916-920-3667
	Vendor No.: T27009348
	NV Business ID: NV20212315263
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 %

Agency Reference #: 24-09

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2024**

Contract term: **352 days**

4. Type of contract: **Contract**

Contract description: **Roll Up Door Install**

5. Purpose of contract:

This is a new contract to provide services to install a new roll-up door and operator at the Elko facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,629.00**

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 Elko facility is in need of a new roll-up door to replace the current door, which is outdated and no longer works. The door has been inoperable for two years. A new door will ensure proper functioning.

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 expertise to install these types of doors.

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):

Elko Overhead Door Company
McKeon Door of Nevada, Inc.
Vortex Doors
Overhead Door of Utah Valley
Incline Overhead Door

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor submitted the most affordable proposal.

d. Last bid date: 10/18/2023 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:

Vortex provided service to the Department of Wildlife in 2023 and services received were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Gregg Keyes, Facilities Manager Ph: 775-353-3727

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mmarkovi	11/13/2023 09:46:28 AM
Division Approval	mmarkovi	11/13/2023 09:46:32 AM
Department Approval	avigi1	11/13/2023 10:53:46 AM
Contract Manager Approval	cprasa1	11/14/2023 09:35:47 AM
Budget Analyst Approval	dspeed1	12/14/2023 16:19:19 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: **28472**

Agency Name: DEPARTMENT OF WILDLIFE	Legal Entity Name: MCELHANEY STRUCTURAL ENGINEERS, LLC
Agency Code: 702	Contractor Name: MCELHANEY STRUCTURAL ENGINEERS, LLC
Appropriation Unit: 4460-07	Address: 802 WEST SECOND STREET
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89503
If "No" please explain: Not Applicable	Contact/Phone: 775/853-5525
	Vendor No.: T29035980
	NV Business ID: NV2006176994

To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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	50.00 %	Sportsmen Revenue
X Federal Funds	50.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: 24-35

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/15/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2027**

Contract term: **3 years and 351 days**

4. Type of contract: **Contract**

Contract description: **Structural Engineers**

5. Purpose of contract:

This is a new contract to provide as needed structural engineering services in the eastern, southern, and western regions of the state. Services may include but not limited to structural engineering design and preparation of construction documents, structural evaluation and construction inspections.

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?

Various project requiring structural engineering needs in the eastern, southern, and western regions of the state.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Work requires specialized knowledge in structural engineering.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Not Applicable, professional services.

d. Last bid date: Anticipated re-bid date:

- 10. a. Does the contract contain any IT components? No
- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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, 2015 - current, work as 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 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:

Rodd Lighthouse, Supervising Professional Engineer Ph: (775) 688-1586

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	11/06/2023 11:15:14 AM
Division Approval	cbalcon	12/12/2023 08:15:00 AM
Department Approval	jneubau2	12/12/2023 12:24:37 PM
Contract Manager Approval	abarredo	12/12/2023 12:59:22 PM
Budget Analyst Approval	dspeed1	12/15/2023 10:23:27 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: **28508**

Agency Name: DEPARTMENT OF WILDLIFE	Legal Entity Name: Procurify Technologies Inc.
Agency Code: 702	Contractor Name: Procurify Technologies Inc.
Appropriation Unit: 4460-09	Address: 455 Granville Street
Is budget authority available?: Yes	#500
If "No" please explain: Not Applicable	City/State/Zip: Vancouver, BC V6C 1T1
	Contact/Phone: Cole Dunant 888/436-5254
	Vendor No.: F00000497
	NV Business ID: NV20232994824
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 % Sportsmen Revenue
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 24-37

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/29/2023**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2025**

Contract term: **2 years and 3 days**

4. Type of contract: **Contract**

Contract description: **Electronic PO Svcs**

5. Purpose of contract:

This is a new contract to provide an electronic service to track, approve and monitor purchase order spending.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,998.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The current purchase order system used by the Department of Wildlife consist of carbon copy paper purchase orders and excel tracking sheets. The Department is looking to update this current system to something better able to provide tracking, approvals and spending reports.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have access to a virtual program that would accomplish updating its current purchase order process with the needs requested by the Department of Wildlife.

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):

Coupa
Fraxion
Procurify
Quadient

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This contractor has experience with other government and private sector agencies and offers a system that fits the needs of the Department.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Megan Manfredi, Management Analyst Ph: (775) 688-1881

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	12/20/2023 13:25:10 PM
Division Approval	cbalcon	12/20/2023 13:26:32 PM
Department Approval	jneubau2	12/20/2023 13:28:49 PM
Contract Manager Approval	abarredo	12/20/2023 13:34:36 PM
EITS Approval	ljean	12/21/2023 12:27:42 PM
Budget Analyst Approval	dspeed1	12/29/2023 16:21:41 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: **23915** Amendment Number: **1**

Agency Name: **DEPARTMENT OF WILDLIFE** Legal Entity Name: **NORTH EAST ELKO COUNTY CONSERVATION DISTRICT**

Agency Code: **702** Contractor Name: **NORTH EAST ELKO COUNTY CONSERVATION DISTRICT**

Appropriation Unit: **4467-14** Address: **HC34 BOX 300**

Is budget authority available?: **Yes** City/State/Zip: **WELLS, NV 89835**

If "No" please explain: **Not Applicable** Contact/Phone: **SAM LOSSING 775/304-7031**

Vendor No.: **T81000968**

NV Business ID: **Governmental Entity**

To what State Fiscal Year(s) will the contract be charged? **2021-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Habitat Conservation Fee
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 21-36

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/13/2021**

Anticipated BOE meeting date 12/2023

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/01/2024**

Contract term: **4 years and 18 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Habitat Restoration**

5. Purpose of contract:

This is the first amendment to the original contract which provides for the implementation of a variety of habitat projects including invasive weed abatement, soil health amendments, conifer removal, meadow and wetland enhancements, etc. This amendment extends the termination date from September 1, 2024 to April 30, 2025 and increases the maximum amount from \$99,999 to \$151,842 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$99,999.00	\$99,999.00	\$99,999.00	Yes - Action
2. Amount of current amendment (#1):	\$51,843.00	\$51,843.00	\$51,843.00	Yes - Info
3. New maximum contract amount:	\$151,842.00			
and/or the termination date of the original contract has changed to:	04/30/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

These conservation projects will benefit native wildlife. The conservation concerns that will be addressed include habitat fragmentation, stream degradation, fire, invasive plants, soil degradation and other negative impacts to habitat for sage grouse, mule deer, and other sagebrush obligates.

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 proper supplies or resources to accomplish these goals.

9. Were quotes or proposals solicited? No

Was the solicitation (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?

Interlocal agreement pursuant to NRS 277.180.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Department of Wildlife - 09/07/2017 to 10/12/2023 - Work was verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	11/02/2023 08:02:40 AM
Division Approval	cbalcon	11/02/2023 08:22:42 AM
Department Approval	jneubau2	12/06/2023 10:28:14 AM
Contract Manager Approval	jwilkin3	12/08/2023 11:41:27 AM
Budget Analyst Approval	dspeed1	12/14/2023 17:43:46 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: **28581**

Agency Name: **DCNR - PARKS DIVISION**
 Agency Code: **704**
 Appropriation Unit: **4162-30**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **LAUGHLIN, DONALD J DBA**
 Contractor Name: **LAUGHLIN, DONALD J DBA**
 Address: **RIVERSIDE RESORT & CASINO
 1650 S CASINO DR PMB 500
 LAUGHLIN, NV 89029-1512**
 City/State/Zip: **LAUGHLIN, NV 89029-1512**
 Contact/Phone: **702/298-2535**
 Vendor No.: **T29046174**
 NV Business ID: **NV19741002382**

To what State Fiscal Year(s) will the contract be charged? **2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/26/2024**

Anticipated BOE meeting date 01/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **03/01/2024**

Contract term: **4 days**

4. Type of contract: **Contract**

Contract description: **Parks Academy 2024**

5. Purpose of contract:

This is a new contract to provide conference rooms for training during NDSP bi-annual Park Academy Conference for Nevada State Parks employees.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$31,912.74**

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada State Parks require a central location to provide training.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

We do not have a facility large enough to

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):

Harrah's Laughlin
 Don Laughlin's Riverside Hotel
 Edgewater Casino
 Golden Nugget Casino
 Aquarius Casino

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

[Empty text box]

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	12/01/2023 08:50:39 AM
Division Approval	ethick1	12/01/2023 08:51:07 AM
Department Approval	ethick1	12/01/2023 08:51:09 AM
Contract Manager Approval	ethick1	12/01/2023 08:51:13 AM
Budget Analyst Approval	rjacob3	12/18/2023 08:50:13 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: **28583**

Agency Name: DCNR - ENVIRONMENTAL PROTECTION	Legal Entity Name: Pacific Storage Company
Agency Code: 709	Contractor Name: Pacific Storage Company
Appropriation Unit: 3187-75	Address: PO Box 334
Is budget authority available?: Yes	City/State/Zip: Stockton, CA 95201
If "No" please explain: Not Applicable	Contact/Phone: Richard Steed 916-649-7312
	Vendor No.: T29047932A
	NV Business ID: NV20212229724

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 %	X	Fees	40.00 % Hazardous Waste and Petroleum Fund fees
X Federal Funds	60.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: DEP 24-019

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/18/2023**

Anticipated BOE meeting date 12/2023

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027**

Contract term: **3 years and 194 days**

4. Type of contract: **Contract**

Contract description: **Records Storage**

5. Purpose of contract:

This is a new contract to provide secure record storage, delivery, and digital index services for the Bureau of Corrective Actions, Carson City office.

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?

Limited space prevents storage of approximately 950-960 banker boxes containing physical records managed by the Bureau of Corrective Actions Carson City office. Following retention schedules these records are to be digitized under the NDEP records modernization initiative for digital access to public records.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Limited storage space at our Carson City office prevents the 950-960 banker boxes from being housed onsite.

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?

Location, services provided, and overall cost savings to the State.

d. Last bid date: 11/06/2023 Anticipated re-bid date: 01/04/2027

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:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mfrien1	12/04/2023 14:28:14 PM
Division Approval	jcollin5	12/04/2023 14:37:10 PM
Department Approval	jcollin5	12/04/2023 14:37:15 PM
Contract Manager Approval	kvalde1	12/04/2023 15:18:59 PM
Budget Analyst Approval	rjacob3	12/18/2023 09:04:50 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: 22144	Amendment Number: 2
Agency Name: DCNR - ENVIRONMENTAL PROTECTION	Legal Entity Name: United States Department of the Interior, U.S. Geological Survey
Agency Code: 709	Contractor Name: United States Department of the Interior, U.S. Geological Survey
Appropriation Unit: 3193-06	Address: 2730 N. Deer Run Road
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89701
If "No" please explain: Not Applicable	Contact/Phone: 775/887-7655
	Vendor No.: PUR0000332D
	NV Business ID: Governmental Entitiy

To what State Fiscal Year(s) will the contract be charged? **2020-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Joint Funding Agreement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/09/2019**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **06/30/2024**

Termination Date:

Contract term: **5 years and 54 days**

4. Type of contract: **Other (include description): Joint Funding Agreement**

Contract description: **Turbidity Monitoring**

5. Purpose of contract:

This is the 2nd amendment to the original interlocal agreement which provides a collection of continuous stream turbidity and temperature from two streams with significant sediment contributions to Lake Tahoe. The amendment changes the termination date from June 30, 2024 to September 30, 2024 and increases the total amount from \$202,002.00 to \$231,942.00 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$99,400.00	\$99,400.00	\$99,400.00	Yes - Action
a. Amendment 1:	\$102,602.00	\$102,602.00	\$102,602.00	Yes - Action
2. Amount of current amendment (#2):	\$29,940.00	\$29,940.00	\$29,940.00	Yes - Info
3. New maximum contract amount:	\$231,942.00			
and/or the termination date of the original contract has changed to:	09/30/2024			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Federal Clean Water Act and the Nevada Water Pollution Control Law (NRS 445A) requires the State to Monitor and assess waterbodies to ensure maintenance and protection of designated beneficial uses.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The NDEP Bureau of Water Quality Planning has Environmental Scientists on staff who monitor water quality across the state. However NDEP does not install, operate or maintain a network of stream gages across the state.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Since 1980's as part of the Lake Tahoe Interagency Monitoring Program (LTIMP) the United States Geological Survey (USGS) has monitored streamflow, nutrients, and suspended sediment concentration (SSC) at 7 primary stream inflow sites to Lake Tahoe. In 2016 monitoring was expanded to include continuous turbidity and water temperature at 5 of 7 primary monitoring sites. For efficiency and consistency USGS is the best choice to install and maintain the remaining two sites.

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	ahanso1	01/03/2024 09:07:02 AM
Division Approval	jkuchnic	01/03/2024 10:41:55 AM
Department Approval	jkuchnic	01/03/2024 10:42:04 AM
Contract Manager Approval	mhilk1	01/03/2024 10:47:54 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: **27942**

Agency Name: DETR - EMPLOYMENT SECURITY	Legal Entity Name: MESA ENERGY SYSTEMS INC DBA
Agency Code: 902	Contractor Name: MESA ENERGY SYSTEMS INC DBA
Appropriation Unit: 4771-11	Address: EMCOR SERVICES MESA ENERGY INC
Is budget authority available?: Yes	6295 S PEARL ST STE 1400
If "No" please explain: Not Applicable	City/State/Zip: LAS VEGAS, NV 89120-6280
	Contact/Phone: Randy Alvarado 702/597-0314
	Vendor No.: T27027115B
	NV Business ID: NV20071267110

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 % ARPA FUNDS

Agency Reference #: **3768-25-OM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/08/2024**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2024**

Contract term: **358 days**

4. Type of contract: **Contract**

Contract description: **Chiller Rental**

5. Purpose of contract:

This is a new contract to provide an as-needed rental of a 200 Ton Cooled Chiller unit on a semi-trailer to any DETR location in Southern Nevada in the event that an air conditioning system fails.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,158.00**

Other basis for payment: Inital: \$31,321 (deliver, setup and pickup), 4-week Rental: \$12,279/4-week period. Maximum of 12-week rental authorized. Invoices payable only upon authorization by the State. Contract not to exceed: \$68,158.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

The St Louis building is undergoing issues with their air conditioning unit. These issues have caused the building air conditioning unit to fail which has resulted in excessive heat. This is a unit that DETR was advised by Public Works to go into contract to allow the building to continue work if the unit continues to fail.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the qualification to conduct 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):

MESA ENERGY dba EMCOR
UNITED RENTALS
SUNBELT RENTALS

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only vendor to supply an adequate bid.

d. Last bid date: 10/02/2023 Anticipated re-bid date: 08/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has provided satisfactory to DETR since 2014 and other state agencies since 2011.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Miles Bruinekool, Facilities Manager Ph: 775-684-3854

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rhernan3	11/30/2023 15:48:15 PM
Division Approval	sterr2	11/30/2023 15:58:47 PM
Department Approval	sterr2	11/30/2023 15:58:51 PM
Contract Manager Approval	wcune1	12/01/2023 18:08:14 PM
Budget Analyst Approval	twollan1	01/08/2024 16:31:12 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: **28429**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Law Offices of Lyn E Beggs, PLLC
Agency Code: BDC	Contractor Name: Lyn Beggs, Esq.
Appropriation Unit: B005 - All Categories	Address: 316 California Ave., Suite 863
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89509
If "No" please explain: Not Applicable	Contact/Phone: Lyn Beggs 775-432-1918
	Vendor No.:
	NV Business ID: NV20141323721

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 %	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 **01/16/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/31/2024**

Contract term: **288 days**

4. Type of contract: **Contract**

Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide legal services related to an administrative disciplinary matter.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Payment for services will be made at the rate of \$225.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is in receipt of a complaint against an existing Board member, which requires outside legal representation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is a conflict of interest for the Board's existing legal counsel to prosecute an existing Board member.

9. Were quotes or proposals solicited? No

Was the solicitation (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 attorney possesses the expertise to provide the necessary analysis of the disciplinary case.

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?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jstrand1	11/13/2023 12:20:54 PM
Division Approval	jstrand1	11/13/2023 12:20:57 PM
Department Approval	jstrand1	11/13/2023 12:20:59 PM
Contract Manager Approval	jstrand1	11/13/2023 12:21:01 PM
Budget Analyst Approval	stilly	01/16/2024 15:33:11 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: **28173**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Casey Neilon, Inc.
Agency Code: BDC	Contractor Name: Casey Neilon, Inc.
Appropriation Unit: B008 - All Categories	Address: 503 N Division Street
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89703
If "No" please explain: Not Applicable	Contact/Phone: Nicola Neilon 775-283-5555
	Vendor No.:
	NV Business ID: NV20061293367

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 %	X	Fees	100.00 % Application & Renewal
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/04/2024**

Anticipated BOE meeting date **12/2023**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2026**

Contract term: **2 years and 331 days**

4. Type of contract: **Contract**

Contract description: **Audit Services**

5. Purpose of contract:

This is a new contract to provide ongoing audit services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$52,500.00**

Other basis for payment: **FY23 \$16,500 / FY24 \$17,500 / FY25 \$18,500**

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes (NRS) 218G.400 requires an independent audit be conducted of the Board's financial statements and position. Results of the audit must be provided to the Legislative Counsel Bureau.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

An audit must be conducted by an Independent Certified Public Accountant in accordance with Governmental Auditing Standards. An employee would not be able to meet these requirements.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

n/a

d. Last bid date: Anticipated re-bid date:

- 10. a. Does the contract contain any IT components? No
- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada State Board of Accountancy, Nevada State Board of Medical Examiners, Nevada State Board of Optometry, and other professional boards.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vwind1	11/29/2023 16:16:20 PM
Division Approval	vwind1	11/29/2023 16:16:22 PM
Department Approval	vwind1	11/29/2023 16:16:25 PM
Contract Manager Approval	vwind1	11/29/2023 16:16:27 PM
Budget Analyst Approval	stilley	01/04/2024 16:37:10 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: **28663**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Flynn Giudici Government Affairs, LLC
Agency Code: BDC	Contractor Name: Flynn Giudici Government Affairs, LLC
Appropriation Unit: B036 - All Categories	Address: 708 N Center Street, Suite 200
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89501
If "No" please explain: Not Applicable	Contact/Phone: Daniel Giudici 775.200.9682
	Vendor No.:
	NV Business ID: NV20212145952

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 **01/16/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2025**

Contract term: **1 year and 196 days**

4. Type of contract: **Contract**

Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide assistance with regulatory and statutory changes.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$29,000.00**

Other basis for payment: \$1,000 per month upon approval of BOE, for months during session fee is \$3,000 per month.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board requires legislative and government affairs services, including consulting and reporting through the 2025 legislative session.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of expertise and ability to attend daily legislative session meetings and hearings.

9. Were quotes or proposals solicited? No

Was the solicitation (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?

[Empty box]

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:

State of Nevada - Board of Examiners for Social Workers
State of Nevada - Governor's Office of Economic Development
Truckee Meadows Community College

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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	elisaba9	12/20/2023 07:53:13 AM
Division Approval	elisaba9	12/20/2023 07:53:16 AM
Department Approval	elisaba9	12/20/2023 07:53:19 AM
Contract Manager Approval	elisaba9	12/20/2023 07:53:22 AM
Budget Analyst Approval	stilley	01/16/2024 17:09:31 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: **28645**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Colleen Platt
Agency Code: BDC	Contractor Name: Platt Law Group
Appropriation Unit: B036 - All Categories	Address: PLATT LAW GROUP 11025 BONDSHIRE DR RENO, NV 89511-6234
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89511-6234
If "No" please explain: Not Applicable	Contact/Phone: Colleen Platt 775/848-2810
	Vendor No.: T32003750
	NV Business ID: NV20151428689

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 **01/16/2024**

Anticipated BOE meeting date 02/2024

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2025**

Contract term: **1 year and 319 days**

4. Type of contract: **Contract**

Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide ongoing legal services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,000.00**

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?

Office of the Attorney General has very high workloads. This contract will assist the DAGs assigned to the Board by providing additional legal resources for the Board while maintaining the working relationship with the DAGs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Work loads and agency assignments are high.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

Platt Law Group has provided legal counsel to the Board in the past. They are familiar with our statutes, processes, and issues with human trafficking.

d. Last bid date: Anticipated re-bid date:

- 10. a. Does the contract contain any IT components? No
- b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Business and Industry Housing Division and Board of Alcohol Drug and Gambling Counselors. Yes, both agencies have verified the 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:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

sole proprietor doing business as Platt Law Group.

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	elisaba9	12/13/2023 15:06:39 PM
Division Approval	elisaba9	12/13/2023 15:06:45 PM
Department Approval	elisaba9	12/13/2023 15:06:49 PM
Contract Manager Approval	elisaba9	12/13/2023 15:06:54 PM
Budget Analyst Approval	stillley	01/16/2024 17:03:54 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: **28478**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Connie Christiansen
Agency Code: BDC	Contractor Name: Christiansen Accounting Network
Appropriation Unit: B038 - All Categories	Address: PO Box 33875
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89533
If "No" please explain: Not Applicable	Contact/Phone: Connie Christiansen 775-413-4084
	Vendor No.:
	NV Business ID: NV20201790297

To what State Fiscal Year(s) will the contract be charged? **2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Licensure
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/16/2024**

Anticipated BOE meeting date **02/2024**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2024**

Contract term: **165 days**

4. Type of contract: **Contract**

Contract description: **ABA Audit Svs**

5. Purpose of contract:

This is a new contract to provide ongoing audit services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,000.00**

Other basis for payment: Upon invoice at completion and acceptance.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 218G.400 requires an audit of 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 a CPA.

9. Were quotes or proposals solicited? **No**

Was the solicitation (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?

The vendor is a licensed CPA, the proposal met the needs of the Board, was cost effective and the vendor has experience conducting Board audits.

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?

No b. If "No", please explain:

Sole Proprietorship dba Christiansen Accounting Network

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	lp310000	11/06/2023 15:08:18 PM
Division Approval	lp310000	11/06/2023 15:08:23 PM
Department Approval	lp310000	11/06/2023 15:08:28 PM
Contract Manager Approval	lp310000	11/06/2023 15:08:42 PM
Budget Analyst Approval	stilley	01/16/2024 16:57:44 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: **28521**

Agency Name: BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name: Numbers, Inc.
Agency Code: BDC	Contractor Name: Numbers, Inc.
Appropriation Unit: B038 - All Categories	Address: 1285 Baring Blvd. #309
Is budget authority available?: Yes	City/State/Zip: Sparks, NV 89434
If "No" please explain: Not Applicable	Contact/Phone: Carol Woods 775-742-2962
	Vendor No.:
	NV Business ID: NV20031345377

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 **10/01/2023**

Anticipated BOE meeting date 02/2024

Retroactive? **Yes**

If "Yes", please explain

There was an unforeseen delay in the processing of the contract and review by the Office of Boards, Commissions and Councils Standards. Request retroactive contract to October 1, 2023.

3. Termination Date: **09/30/2025**

Contract term: **2 years**

4. Type of contract: **Contract**

Contract description: **Accounting Svs**

5. Purpose of contract:

This is a new contract to provide ongoing accounting and payroll services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$16,800.00**

Payment for services will be made at the rate of \$700.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required to maintain their own financial and payroll systems. The Board is funded entirely by licensing fees and is not part of the state financial or payroll systems. NRS 641D

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board does not have staff with the expertise necessary to perform these functions.

9. Were quotes or proposals solicited? No

Was the solicitation (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 has provided accounting and payroll services to the Board and those services have been 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:

Board of Applied Behavior Analysis - - verified as satisfactory
Board of Occupational Therapy - verified as satisfactory
Funeral and Cemetery Services Board - verified as satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lp310000	11/20/2023 12:25:50 PM
Division Approval	lp310000	11/20/2023 12:25:55 PM
Department Approval	lp310000	11/20/2023 12:25:58 PM
Contract Manager Approval	lp310000	11/20/2023 12:26:03 PM
Budget Analyst Approval	stilley	01/16/2024 16:52:23 PM



November 6, 2023

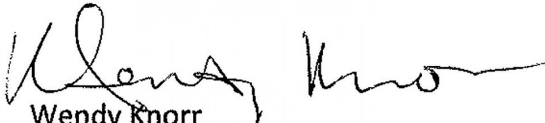
Governor's Finance Office

Re: Contract – Numbers Inc.

The Board of Applied Behavior Analysis is requesting retroactive status to October 1, 2023 for the above referenced contract for accounting and payroll services. The need for retroactive status is due to an unforeseen delay in processing the contract resulting in an effective date prior to approval.

If you have any questions, please do not hesitate to contact me.

Sincerely,


Wendy Knorr
Executive Director

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 | Fax: (775) 684-0260

Date: January 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

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 second quarter of fiscal year 2024 for the period beginning October 1, 2023 and ending December 31, 2023.

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 second quarter of fiscal year 2024 for the period beginning October 1, 2023 and ending December 31, 2023 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: _____

Department of Motor Vehicles
Complete Streets: Monthly Report FY24
Report Date: 1/8/2024
 Reporting Period: December 2023

County	July		August		September		October		November		December		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$ 1,270.00	3.72%	\$ 1,202.00	3.44%	\$ 1,162.00	3.49%	\$ 1,120.00	3.50%	\$ 996.00	3.37%	\$ 1,134.00	3.76%	\$6,884.00	3.55%
Clark	\$ 25,674.00	75.26%	\$ 26,696.00	76.50%	\$ 25,614.00	76.99%	\$ 24,364.00	76.09%	\$ 22,532.00	76.31%	\$ 23,196.00	76.97%	\$148,076.00	76.34%
Douglas	\$ 1,250.00	3.66%	\$ 1,242.00	3.56%	\$ 1,184.00	3.56%	\$ 1,236.00	3.86%	\$ 1,112.00	3.77%	\$ 1,218.00	4.04%	\$7,242.00	3.73%
Washoe	\$ 5,920.00	17.35%	\$ 5,756.00	16.49%	\$ 5,308.00	15.96%	\$ 5,300.00	16.55%	\$ 4,888.00	16.55%	\$ 4,588.00	15.22%	\$31,760.00	16.37%
Total	\$34,114.00	100.00%	\$34,896.00	100.00%	\$33,268.00	100.00%	\$32,020.00	100.00%	\$29,528.00	100.00%	\$30,136.00	100.00%	\$ 193,962.00	100%

DMV Commission (1%)														
County	July		August		September		October		November		December		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$12.70	3.72%	\$12.02	3.44%	\$11.62	3.49%	\$11.20	3.50%	\$9.96	3.37%	\$11.34	3.76%	\$68.84	3.55%
Clark	\$256.74	75.26%	\$266.96	76.50%	\$256.14	76.99%	\$243.64	76.09%	\$225.32	76.31%	\$231.96	76.97%	\$1,480.76	76.34%
Douglas	\$12.50	3.66%	\$12.42	3.56%	\$11.84	3.56%	\$12.36	3.86%	\$11.12	3.77%	\$12.18	4.04%	\$72.42	3.73%
Washoe	\$59.20	17.35%	\$57.56	16.49%	\$53.08	15.96%	\$53.00	16.55%	\$48.88	16.55%	\$45.88	15.22%	\$317.60	16.37%
Total	\$341.14	100.00%	\$348.96	100.00%	\$332.68	100.00%	\$320.20	100.00%	\$295.28	100.00%	\$301.36	100.00%	\$1,939.62	100%

Distributions														
County	July		August		September		October		November		December		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$1,257.30	3.72%	\$1,189.98	3.44%	\$1,150.38	3.49%	\$1,108.80	3.50%	\$986.04	3.37%	\$ 1,122.66	3.76%	\$6,815.16	3.55%
Clark	\$25,417.26	75.26%	\$26,429.04	76.50%	\$25,357.86	76.99%	\$24,120.36	76.09%	\$22,306.68	76.31%	\$ 22,964.04	76.97%	\$146,595.24	76.34%
Douglas	\$1,237.50	3.66%	\$1,229.58	3.56%	\$1,172.16	3.56%	\$1,223.64	3.86%	\$1,100.88	3.77%	\$ 1,205.82	4.04%	\$7,169.58	3.73%
Washoe	\$5,860.80	17.35%	\$5,698.44	16.49%	\$5,254.92	15.96%	\$5,247.00	16.55%	\$4,839.12	16.55%	\$ 4,542.12	15.22%	\$31,442.40	16.37%
Total	\$33,772.86	100.00%	\$34,547.04	100.00%	\$32,935.32	100.00%	\$31,699.80	100.00%	\$29,232.72	100.00%	\$29,834.64	100.00%	\$192,022.38	100.00%

- Note:
- DMV began accepting contributions on 12/15/14.
 - DMV began accepting Douglas County contributions on 5/9/16.

**Department of Motor Vehicles
Complete Streets Report: Donations
2024**

County	July	August	September	October	November	December	Year To Date
Carson City							
Donations	635	601	581	560	498	567	3,442
Registrations	4,405	4,519	4,279	4,171	3,877	4,012	25,263
Percent that Donated	14.42%	13.30%	13.58%	13.43%	12.84%	14.13%	13.62%
Clark							
Donations	12,837	13,348	12,807	12,182	11,266	11,598	74,038
Registrations	78,165	83,992	78,019	76,518	71,768	73,741	462,203
Percent that Donated	16.42%	15.89%	16.42%	15.92%	15.70%	15.73%	16.02%
Douglas							
Donations	625	621	592	618	556	609	3,621
Registrations	5,085	5,277	4,886	4,847	4,331	4,371	28,797
Percent that Donated	12.29%	11.77%	12.12%	12.75%	12.84%	13.93%	12.57%
Washoe							
Donations	2,960	2,878	2,654	2,650	2,444	2,294	15,880
Registrations	22,974	23,854	21,876	21,623	19,838	20,026	130,191
Percent that Donated	12.88%	12.07%	12.13%	12.26%	12.32%	11.46%	12.20%

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.

Kathy Lewis
Chief Financial Officer

www.douglascountynv.gov
775-782-6202



1594 Esmeralda Avenue
Minden, Nevada 89423

PO Box 218
Minden, NV 89423

FINANCE DEPARTMENT

January 16, 2024

Vince Young-Brown
Executive Branch Budget Officer I
Governor's Finance Office
209 E. Musser St. Suite 200
Carson City, NV 89701

Dear Ms. Lay,

To date Douglas County has received \$5,964 in Complete Streets Program funds for the fiscal year 2024 (5 months). We are currently accumulating the FY20-FY24 funds (\$63,177 to date) for future projects. We intend to use the funds 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,

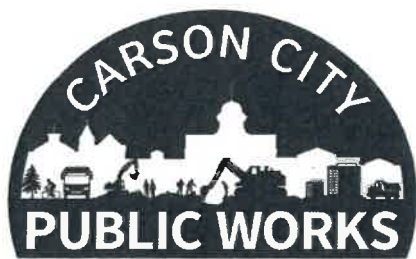
Caroline Chieffo
Senior Accountant
Douglas County Finance Division
Ph: 775-783-6451 Fax: 775-782-6271

Via Email Only, No Hard Copy Will Be Mailed

REGIONAL TRANSPORTATION COMMISSION OF WASHOE COUNTY

Complete Streets Program Revenue

Account ID	Account Name	Organization ID	Organization Name	Project ID	Project Name	Fiscal Year	Period	Month	Amount
407-9-00	Misc. Non-Transp'n. Rev.	1.01.13	STREET & HIGHWAY PROGRAM	8131070	DMV Complete St Plates	2024	4	OCT	(5,254.92)
407-9-00	Misc. Non-Transp'n. Rev.	1.01.13	STREET & HIGHWAY PROGRAM	8131070	DMV Complete St Plates	2024	5	NOV	(5,247.00)
407-9-00	Misc. Non-Transp'n. Rev.	1.01.13	STREET & HIGHWAY PROGRAM	8131070	DMV Complete St Plates	2024	6	DEC	(4,839.12)
Fiscal Year Q2 2024 - Total									(15,341.04)
PROJECT - FYTD Total									(32,497.74)
Jan 11, 2024									10:39:21 AM
1									



CARSON CITY NEVADA
Consolidated Municipality and State Capital
PUBLIC WORKS

January 10, 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 had no expenses during FY24 Q2 October – December 2023.

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.

Respectfully,

A handwritten signature in blue ink that reads "Chris Martinovich".

Chris Martinovich, PE
Transportation Manger
Carson City Public Works



600 S. Grand Central Pkwy., Suite 350, Las Vegas, NV 89106-4512

January 8, 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

COMPLETE STREETS FUND -Fiscal Year 2024 -2nd 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 the first and second quarter of RTC Fiscal Year 2024, the RTC received a total of \$149,715.72 in CSP funds from the DMV as follows:

7/14/2023	\$	26,084.52
8/9/2023	\$	25,417.26
9/15/2023	\$	26,429.04
10/19/2023	\$	25,357.86
11/15/2023	\$	24,120.36
12/14/2023	\$	22,306.68
	\$	149,715.72

The attached spreadsheet will provide details of encumbrances and expenditures from January 2015 through December 31, 2023. Below is a summary of the projects and their status:

1. RTC 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	\$ 0.00
Balance	\$ 325,000.00
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.

Contract Date	October 13, 2022
Contract Amount	\$ 300,000.00
Amount Spent	\$ 23,390.89
Balance	\$ 276,609.11
Contract Closed	TBD

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

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
John Penuelas, Senior Director of Engineering
Lance Olsen, Director of Public Works, City of Henderson
Travis Anderson, Director of Public Works, City of Mesquite
Dale Daffern, 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
Jamie Curreri, Director of Public Works, City of Boulder City

COMPLETE STREETS FUND QUARTERLY REPORT - January 1, 2024

Month	COLLECTIONS											
	Annual 2015 1/15 to 6/15	Fiscal Year 2016 7/1/16 to 6/30/16	Fiscal Year 2017 7/1/16 to 6/30/17	Fiscal Year 2018 07/01/17 - 06/30/18	Fiscal Year 2019 07/01/18 - 06/30/19	Fiscal Year 2020 7/1/2020 - 6/30/21	Fiscal Year 2021 7/1/2021 - 6/30/22	Fiscal Year 2022 7/1/22 - 6/30/23	Fiscal Year 2023 7/1/23 - 6/30/24	Fiscal Year 2024 7/1/24 - 6/30/25	Fiscal Year 2025 7/1/25 - 6/30/26	Fiscal Year 2027 7/1/26 - 6/30/27
July		\$ 5,528.16	\$ 20,358.36	\$ 22,055.32	\$ 22,249.26	\$ 31,029.32	\$ 27,308.18	\$ 26,606.84	\$ 25,437.26	\$ 26,084.52		
August		\$ 20,974.14	\$ 21,574.08	\$ 22,065.70	\$ 23,061.06	\$ 31,060.25	\$ 27,442.80	\$ 26,298.36	\$ 25,437.26			
September		\$ 20,344.50	\$ 21,869.10	\$ 22,070.04	\$ 23,396.38	\$ 21,988.30	\$ 27,747.72	\$ 28,763.46	\$ 26,429.04			
October		\$ 19,972.26	\$ 20,855.34	\$ 21,107.76	\$ 22,396.38	\$ 25,133.72	\$ 27,532.10	\$ 26,815.14	\$ 25,357.86			
November		\$ 19,085.18	\$ 19,232.82	\$ 20,326.64	\$ 21,845.34	\$ 20,932.56	\$ 26,355.78	\$ 25,458.84	\$ 24,120.36			
December		\$ 16,400.34	\$ 17,742.78	\$ 18,122.94	\$ 19,643.58	\$ 19,435.78	\$ 24,785.64	\$ 23,930.28	\$ 22,306.68			
January	\$ 2,090.88	\$ 16,934.94	\$ 17,560.62	\$ 18,241.74	\$ 19,744.56	\$ 20,623.68	\$ 24,413.40	\$ 24,787.62	\$ 22,306.68			
February	\$ 5,128.20	\$ 18,532.80	\$ 19,619.82	\$ 21,627.54	\$ 22,894.74	\$ 23,373.90	\$ 27,921.96	\$ 27,605.16	\$ 25,437.26			
March	\$ 4,623.30	\$ 19,590.12	\$ 19,772.28	\$ 20,659.34	\$ 19,944.54	\$ 20,429.64	\$ 24,629.22	\$ 24,148.08	\$ 23,696.64			
April	\$ 5,547.96	\$ 23,409.54	\$ 25,304.40	\$ 26,719.16	\$ 26,755.74	\$ 29,324.41	\$ 29,351.52	\$ 28,557.54	\$ 28,098.18			
May	\$ 5,231.16	\$ 21,504.78	\$ 22,292.82	\$ 23,326.38	\$ 25,132.14	\$ 16,065.72	\$ 23,894.64	\$ 24,653.18	\$ 24,429.24			
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	\$ 24,451.12			
TOTAL COLLECTIONS	\$ 27,811.08	\$ 223,633.08	\$ 249,295.82	\$ 259,247.34	\$ 271,068.94	\$ 264,170.61	\$ 325,080.36	\$ 316,009.98	\$ 311,960.88	\$ 149,715.72	\$ -	\$ 2,397,997.81

PROJECT NUMBER	PROJECT ALLOCATIONS												
	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	Fiscal Year 2026	Fiscal Year 2027
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)				\$ 259,247.23									
191F-CSF (CC)													
191G-CSF (BC)													
191H-CSF (MES)													
191I-CSF (BC)													
191K-CSF (LV)													
191L-CSF (COH)													
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	\$ 135,270.47	\$ 147,292.18	\$ 411,462.79	\$ 396,645.71	\$ 322,655.69	\$ 334,616.57	\$ 159,332.29	\$ 159,332.29	\$ -	\$ 159,332.29
Available													\$ 159,332.29

Amount Spent	PROJECT EXPENDITURES												
	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	Fiscal Year 2026	Fiscal Year 2027
	\$ -	\$ 130,119.66	\$ 130,119.66	\$ 241,414.09	\$ 259,247.23	\$ 411,462.79	\$ 396,645.71	\$ 314,754.90	\$ 24,557.36	\$ 318,976.07	\$ -	\$ -	\$ 1,537,056.41
as of 1-1-2024													\$ 1,537,056.41



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701- 4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: January 8, 2024

To: Amy Stephenson, Clerk of the Board
Governor's Finance Office

From: Shayne Powell, Management Analyst 3
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

FISCAL YEAR 2023 – 1st QUARTER OVERTIME REPORT

Agenda Item Write-up:

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. This report covers the period of July 1, 2023 through September 30, 2023.

Additional Information:

As of the 1st quarter of fiscal year 2024, year-to-date overtime pay and accrued compensatory leave accounted for a total of approximately \$29.9 million, or 10.5% of total pay, a 3.7% increase from fiscal year 2023.

The 5 agencies with the highest dollar amount of overtime and accrued comp time for the quarter accounted for 92% of the total:

1. Department of Corrections – \$13.5 million
2. Department of Health and Human Services – \$6.5 million
3. Department of Public Safety – \$3.7 million
4. Department of Transportation – \$2.1 million
5. Department of Conservation and Natural Resources – \$1.4 million

The 5 agencies with the highest percentage of overtime and accrued comp time as a share of total pay for the 1st quarter of FY24 were:

1. Department of Corrections – 30.6%
2. Department of Public Safety – 16.7%
3. Department of Veterans Services – 16.2%
4. Department of Conservation and Natural Resources – 11.1%
5. Adjutant General – 9.1%

The Department of Corrections' overtime and comp time increased by \$2.76 million or 25.6% from the prior quarter and continued to be driven by correctional centers and medical personnel. Overtime and comp time for the 1st quarter of FY24 were highest at these 6 locations, in addition to medical care expenses, which accounted for 91.4% of the total overtime for the department:

1. High Desert State Prison – \$4.1 million
2. Southern Desert Correctional Center – \$1.97 million
3. Northern Nevada Correctional Center – \$1.7 million
4. Ely State Prison – \$1.51 million
5. Lovelock Correctional Center – \$1.46 million
6. McClure Women's Correctional Center – \$1.31 million
7. Prison Medical Care - \$323 thousand

By event code, the highest four causes accounted for 87.7% of the overtime:


1. Annual and Military Leave Coverage – \$6.1 million
2. Muster Pay – \$3.08 million
3. No OT Code – \$2.01 million
4. Fire Time – \$698 thousand

The Department of Health and Human Services' overtime of \$6.46 million for the 1st quarter of FY24 is a composite of its six divisions:

1. Welfare and Supportive Services – \$2.52 million
2. Public and Behavioral Health – \$1.79 million
3. Child and Family Services – \$1.44 million
4. Aging and Disability Services – \$628 thousand
5. Health Care, Financing and Policy – \$65 thousand
6. Director's Office – \$25 thousand

By event code, the highest four causes accounted for 76.5% of the overtime at the department level:

1. Backlog Reduction – \$1.74 million
2. No OT Code – \$1.48 million
3. Vacancy Coverage – \$1.16 million
4. 24-Hour Coverage – \$555 thousand

REVIEWED: 
INFO ITEM: _____

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2024 SUMMARY (QTR 1)
NEVADA DEPARTMENT OF ADMINISTRATION

Thursday, December 28, 2023



CUMULATIVE STATEWIDE TOTALS (QTR 1)

	2022	2023	2024
BASE PAY	\$237,527,009	\$234,508,672	\$255,374,505
OVERTIME PAY + ACCRUED COMP	\$19,661,027	\$17,027,551	\$29,852,018
TOTAL PAY	\$257,188,036	\$251,536,223	\$285,226,523
OT/COMP AS A SHARE OF TOTAL PAY	7.64%	6.77%	10.47%

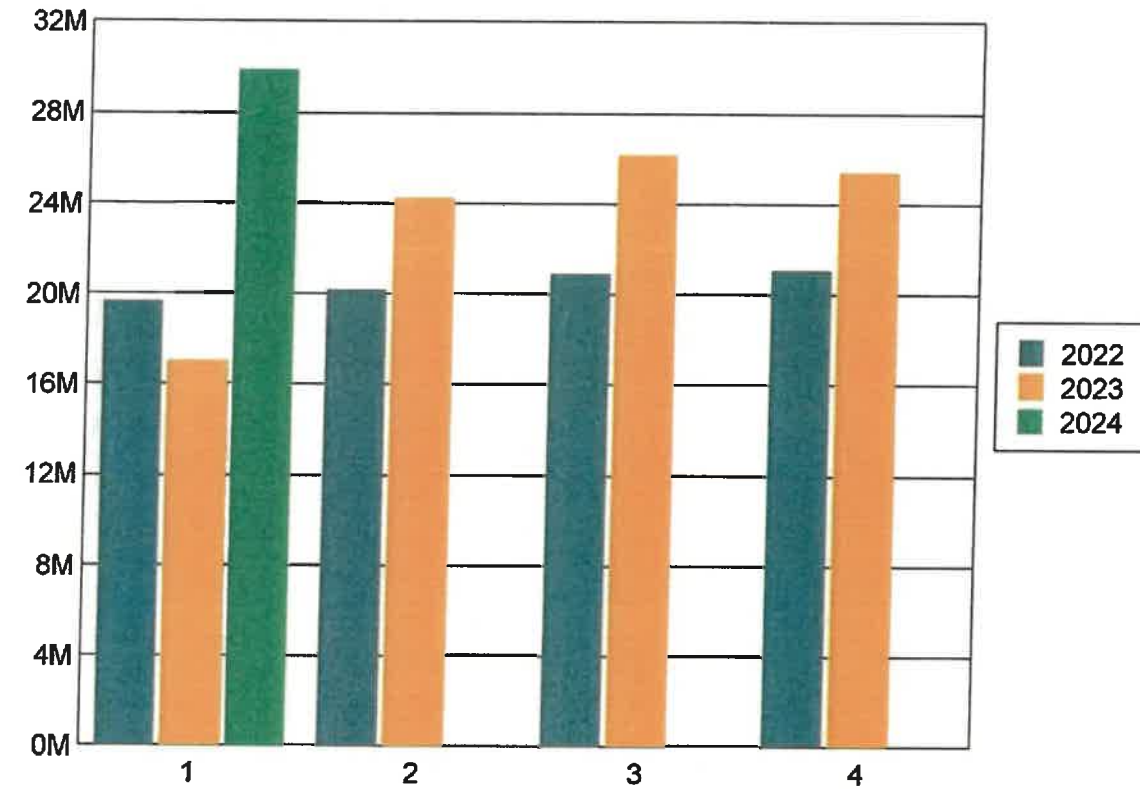
Highest OT/Comp expenditures in dollars

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$13,540,561	30.64%
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$6,463,025	7.63%
65	DEPARTMENT OF PUBLIC SAFETY	\$3,733,547	16.66%
80	DEPARTMENT OF TRANSPORTATION	\$2,135,352	7.30%
70	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,430,070	11.13%

Highest percentages of OT/Comp as a share of Total Pay

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$13,540,561	30.64%
65	DEPARTMENT OF PUBLIC SAFETY	\$3,733,547	16.66%
24	DEPARTMENT OF VETERANS SERVICE	\$516,502	16.16%
70	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,430,070	11.13%
43	ADJUTANT GENERAL	\$212,174	9.11%

Statewide OT/Comp Distribution by Quarter



	Q1 Base Pay	Q2 Base Pay	Q3 Base Pay	Q4 Base Pay
2022	\$237,527,009	\$275,957,225	\$242,439,759	\$287,700,196
2023	\$234,508,672	\$277,150,317	\$245,331,610	\$294,509,855
2024	\$255,374,505	\$0	\$0	\$0

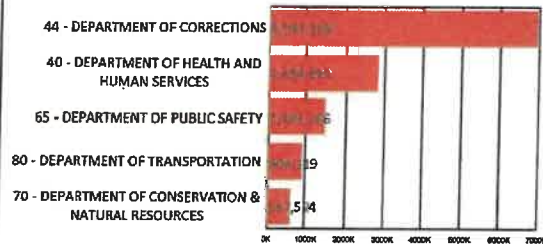
OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2024 QUARTERLY ANALYSIS vs FY2023
 NEVADA DEPARTMENT OF ADMINISTRATION
 Thursday, December 28, 2023

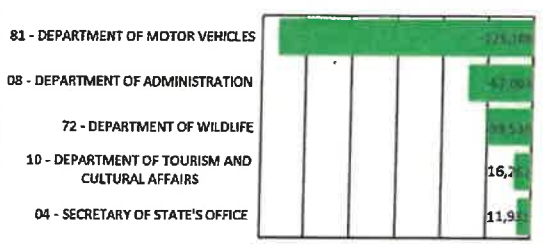


FY2024 - QTR1

Greatest increases in OT/Comp expenditures vs FY2023



Greatest reductions in OT/Comp expenditure vs FY2023



FY2024 - QTR2

Greatest increases in OT/Comp expenditures vs FY2023

No Data Available

Greatest reductions in OT/Comp expenditure vs FY2023

No Data Available

FY2024 - QTR3

Greatest increases in OT/Comp expenditures vs FY2023

No Data Available

Greatest reductions in OT/Comp expenditure vs FY2023

No Data Available

FY2024 - QTR4

Greatest increases in OT/Comp expenditures vs FY2023

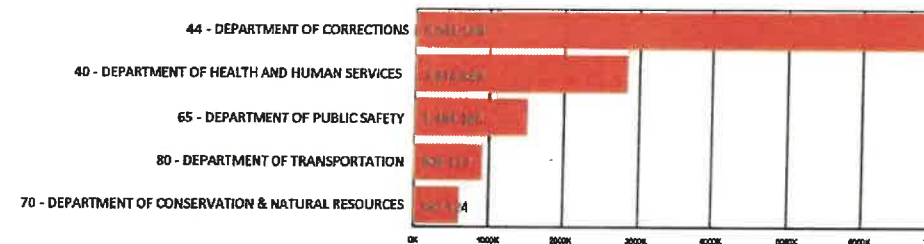
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Greatest reductions in OT/Comp expenditure vs FY2023

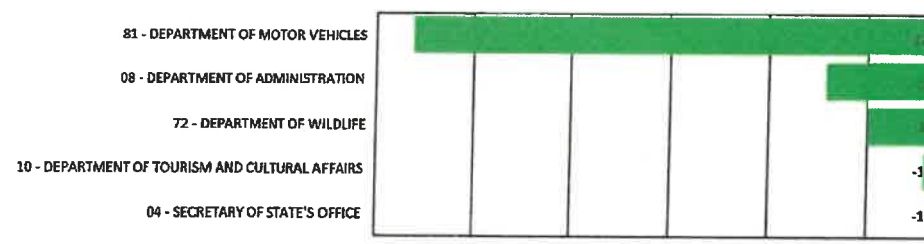
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FY2024 - YEAR-TO-DATE TOTALS

Greatest increases in OT/Comp expenditures vs FY2023



Greatest reductions in OT/Comp expenditure vs FY2023



OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2024 QUARTERLY DETAILED ANALYSIS

NEVADA DEPARTMENT OF ADMINISTRATION

Thursday, December 28, 2023



	FY2024QTR1				FY2024 QTR1-QTR1			
	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2023	Overtime Pay and Accrued Comp (YTD)	Total Pay (YTD)	OT/Comp as a Share of Total Pay (YTD)	Difference in OT Pay/Comp versus FY2023 (YTD)
01 - GOVERNOR'S OFFICE	\$115,985	\$5,459,150	2.12%	\$40,178	\$115,985.29	\$5,459,150.46	2.12%	\$40,178
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$136,272	0.00%	\$0	\$0.00	\$136,271.78	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$101,533	\$6,921,337	1.47%	\$76,200	\$101,532.76	\$6,921,337.27	1.47%	\$76,200
04 - SECRETARY OF STATE'S OFFICE	\$29,909	\$1,748,920	1.71%	\$-11,931	\$29,909.22	\$1,748,919.55	1.71%	\$-11,931
05 - TREASURER'S OFFICE	\$20,568	\$742,125	2.77%	\$16,902	\$20,567.68	\$742,124.60	2.77%	\$16,902
06 - CONTROLLER'S OFFICE	\$31,594	\$733,682	4.31%	\$-1,685	\$31,593.56	\$733,682.26	4.31%	\$-1,685
08 - DEPARTMENT OF ADMINISTRATION	\$80,672	\$5,261,193	1.53%	\$-57,093	\$80,672.39	\$5,261,193.34	1.53%	\$-57,093
09 - JUDICIAL BRANCH	\$0	\$0		\$-11,692	\$0.00	\$0.00		\$-11,692
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$9,022	\$1,548,928	0.58%	\$-16,262	\$9,021.93	\$1,548,927.70	0.58%	\$-16,262
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$236,564	0.00%	\$0	\$0.00	\$236,564.24	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$672,878	0.00%	\$-100	\$0.00	\$672,878.16	0.00%	\$-100
13 - DEPARTMENT OF TAXATION	\$54,387	\$4,571,357	1.19%	\$17,037	\$54,387.23	\$4,571,356.59	1.19%	\$17,037
15 - COMMISSION ON ETHICS	\$0	\$107,588	0.00%	\$0	\$0.00	\$107,588.40	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$81,229	0.00%	\$0	\$0.00	\$81,228.80	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$135,947	0.00%	\$0	\$0.00	\$135,947.20	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$123	\$241,145	0.05%	\$-555	\$122.65	\$241,144.65	0.05%	\$-555
24 - DEPARTMENT OF VETERANS SERVICES	\$516,502	\$3,197,093	16.16%	\$89,045	\$516,502.30	\$3,197,093.37	16.16%	\$89,045
27 - CANNABIS COMPLIANCE BOARD	\$34,380	\$1,228,738	2.80%	\$-5,323	\$34,379.79	\$1,228,737.62	2.80%	\$-5,323
30 - DEPARTMENT OF EDUCATION	\$42,580	\$2,941,565	1.45%	\$-4,681	\$42,579.92	\$2,941,565.33	1.45%	\$-4,681
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$5,455	\$470,584	1.16%	\$-5,958	\$5,455.02	\$470,584.14	1.16%	\$-5,958
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$6,463,025	\$84,677,136	7.63%	\$2,834,889	\$6,463,025.07	\$84,677,136.30	7.63%	\$2,834,889
43 - ADJUTANT GENERAL	\$212,174	\$2,329,454	9.11%	\$98,642	\$212,174.47	\$2,329,453.53	9.11%	\$98,642
44 - DEPARTMENT OF CORRECTIONS	\$13,540,561	\$44,196,020	30.64%	\$6,941,169	\$13,540,561.05	\$44,196,019.97	30.64%	\$6,941,169
50 - COMMISSION ON MINERAL RESOURCES	\$7,749	\$216,111	3.59%	\$4,211	\$7,748.80	\$216,111.35	3.59%	\$4,211
55 - DEPARTMENT OF AGRICULTURE	\$39,669	\$2,158,554	1.84%	\$21,617	\$39,669.43	\$2,158,553.62	1.84%	\$21,617
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,898,846	0.00%	\$0	\$0.00	\$1,898,845.64	0.00%	\$0
61 - GAMING CONTROL BOARD	\$161,741	\$6,256,990	2.58%	\$31,714	\$161,740.65	\$6,256,989.73	2.58%	\$31,714
65 - DEPARTMENT OF PUBLIC SAFETY	\$3,733,547	\$22,409,406	16.66%	\$1,494,266	\$3,733,547.19	\$22,409,405.71	16.66%	\$1,494,266
69 - COLORADO RIVER COMMISSION	\$5,505	\$704,594	0.78%	\$1,472	\$5,504.60	\$704,594.20	0.78%	\$1,472
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,430,070	\$12,854,416	11.13%	\$587,524	\$1,430,069.99	\$12,854,415.62	11.13%	\$587,524
72 - DEPARTMENT OF WILDLIFE	\$66,775	\$3,783,769	1.76%	\$-39,536	\$66,775.15	\$3,783,769.09	1.76%	\$-39,536
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$113,434	\$9,017,224	1.26%	\$15,055	\$113,433.99	\$9,017,224.44	1.26%	\$15,055
80 - DEPARTMENT OF TRANSPORTATION	\$2,135,352	\$29,254,463	7.30%	\$908,119	\$2,135,352.41	\$29,254,462.70	7.30%	\$908,119
81 - DEPARTMENT OF MOTOR VEHICLES	\$228,113	\$13,589,385	1.68%	\$-225,108	\$228,113.16	\$13,589,384.80	1.68%	\$-225,108
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$665,199	\$14,783,220	4.50%	\$23,865	\$665,199.24	\$14,783,220.07	4.50%	\$23,865
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$5,550	\$321,465	1.73%	\$3,104	\$5,549.74	\$321,465.26	1.73%	\$3,104
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$843	\$339,175	0.25%	\$-618	\$843.40	\$339,175.32	0.25%	\$-618
Total	\$29,852,018	\$285,226,523	10.47%	\$12,824,467	\$29,852,018	\$285,226,523	10.47%	\$12,824,467

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2024 COMPARATIVE YEAR-TO_DATE ANALYSIS (QTR1-QTR1) VS FY2022-FY2023
 NEVADA DEPARTMENT OF ADMINISTRATION

Thursday, December 28, 2023



	FY 2022 QTR1-QTR1				FY 2023 QTR1-QTR1				FY 2024 QTR1-QTR1			
	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year
01 - GOVERNOR'S OFFICE	\$33,650	\$2,161,778	1.56%	\$-71,758	\$75,808	\$2,354,082	3.22%	\$42,158	\$115,985	\$5,459,150	2.12%	\$40,178
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$57,581	0.00%	\$0	\$0	\$112,196	0.00%	\$0	\$0	\$136,272	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$37,615	\$6,346,049	0.59%	\$-14,546	\$25,332	\$6,158,926	0.41%	\$-12,282	\$101,533	\$6,921,337	1.47%	\$76,200
04 - SECRETARY OF STATE'S OFFICE	\$3,932	\$1,525,564	0.26%	\$3,712	\$41,841	\$1,569,615	2.67%	\$37,909	\$29,909	\$1,748,920	1.71%	\$-11,931
05 - TREASURER'S OFFICE	\$3,304	\$660,588	0.50%	\$618	\$3,666	\$603,842	0.61%	\$362	\$20,568	\$742,125	2.77%	\$16,902
06 - CONTROLLER'S OFFICE	\$46,075	\$625,323	7.37%	\$25,615	\$33,279	\$677,390	4.91%	\$-12,796	\$31,594	\$733,682	4.31%	\$-1,685
08 - DEPARTMENT OF ADMINISTRATION	\$79,759	\$7,065,846	1.13%	\$-43,750	\$137,765	\$7,126,040	1.93%	\$58,006	\$80,672	\$5,261,193	1.53%	\$-57,093
09 - JUDICIAL BRANCH	\$5,867	\$6,899,109	0.09%	\$5,453	\$11,692	\$7,530,154	0.16%	\$5,825	\$0	\$0		\$-11,692
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$7,411	\$1,213,810	0.61%	\$1,280	\$25,284	\$1,325,599	1.91%	\$17,873	\$9,022	\$1,548,928	0.58%	\$-16,262
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$399,089	0.00%	\$0	\$0	\$368,852	0.00%	\$0	\$0	\$236,564	0.00%	\$0
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$644,385	0.00%	\$0	\$100	\$644,119	0.02%	\$100	\$0	\$672,878	0.00%	\$-100
13 - DEPARTMENT OF TAXATION	\$34,976	\$3,983,496	0.88%	\$17,344	\$37,350	\$4,081,133	0.92%	\$2,374	\$54,387	\$4,571,357	1.19%	\$17,037
15 - COMMISSION ON ETHICS	\$0	\$108,430	0.00%	\$0	\$0	\$110,768	0.00%	\$0	\$0	\$107,588	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$62,563	0.00%	\$0	\$0	\$68,366	0.00%	\$0	\$0	\$81,229	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$101,283	0.00%	\$0	\$0	\$120,855	0.00%	\$0	\$0	\$135,947	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$0	\$228,696	0.00%	\$0	\$678	\$215,430	0.31%	\$678	\$123	\$241,145	0.05%	\$-555
24 - DEPARTMENT OF VETERANS SERVICES	\$583,685	\$3,096,187	18.85%	\$32,804	\$427,457	\$2,765,619	15.46%	\$-156,228	\$516,502	\$3,197,093	16.16%	\$89,045
27 - CANNABIS COMPLIANCE BOARD	\$10,032	\$695,554	1.44%	\$-21,519	\$39,703	\$1,041,410	3.81%	\$29,671	\$34,380	\$1,228,738	2.80%	\$-5,323
30 - DEPARTMENT OF EDUCATION	\$57,599	\$2,487,527	2.32%	\$-1,491	\$47,261	\$2,631,047	1.80%	\$-10,338	\$42,580	\$2,941,565	1.45%	\$-4,681
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$15,990	\$364,052	4.39%	\$5,414	\$11,413	\$414,998	2.75%	\$-4,577	\$5,455	\$470,584	1.16%	\$-5,958
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$4,800,635	\$72,777,840	6.60%	\$1,514,849	\$3,628,136	\$72,442,343	5.01%	\$-1,172,499	\$6,463,025	\$84,677,136	7.63%	\$2,834,889
43 - ADJUTANT GENERAL	\$230,281	\$2,100,814	10.96%	\$141,921	\$113,533	\$1,993,676	5.69%	\$-116,748	\$212,174	\$2,329,454	9.11%	\$98,642
44 - DEPARTMENT OF CORRECTIONS	\$6,597,593	\$37,259,107	17.71%	\$1,966,924	\$6,599,393	\$34,007,451	19.41%	\$1,800	\$13,540,561	\$44,196,020	30.64%	\$6,941,169
50 - COMMISSION ON MINERAL RESOURCES	\$13,836	\$215,092	6.43%	\$9,336	\$3,538	\$176,600	2.00%	\$-10,298	\$7,749	\$216,111	3.59%	\$4,211
55 - DEPARTMENT OF AGRICULTURE	\$15,158	\$1,815,549	0.83%	\$-18,640	\$18,052	\$1,908,008	0.95%	\$2,894	\$39,669	\$2,158,554	1.84%	\$21,617
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,817,162	0.00%	\$0	\$0	\$1,753,008	0.00%	\$0	\$0	\$1,898,846	0.00%	\$0
61 - GAMING CONTROL BOARD	\$134,705	\$5,781,487	2.33%	\$59,449	\$130,027	\$5,711,226	2.28%	\$-4,679	\$161,741	\$6,256,990	2.58%	\$31,714
65 - DEPARTMENT OF PUBLIC SAFETY	\$2,256,121	\$19,654,584	11.48%	\$58,497	\$2,239,281	\$18,952,980	11.81%	\$-16,839	\$3,733,547	\$22,409,406	16.66%	\$1,494,266
69 - COLORADO RIVER COMMISSION	\$1,183	\$617,144	0.19%	\$-1,138	\$4,032	\$678,813	0.59%	\$2,850	\$5,505	\$704,594	0.78%	\$1,472
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,403,252	\$11,664,125	12.03%	\$-114,171	\$842,546	\$11,102,952	7.59%	\$-560,706	\$1,430,070	\$12,854,416	11.13%	\$587,524
72 - DEPARTMENT OF WILDLIFE	\$84,233	\$3,465,047	2.43%	\$3,943	\$106,311	\$3,595,660	2.96%	\$22,078	\$66,775	\$3,783,769	1.76%	\$-39,536
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$34,720	\$8,075,809	0.43%	\$-93,338	\$98,379	\$7,971,069	1.23%	\$63,658	\$113,434	\$9,017,224	1.26%	\$15,055
80 - DEPARTMENT OF TRANSPORTATION	\$1,545,100	\$26,668,396	5.79%	\$817,421	\$1,227,233	\$25,434,267	4.83%	\$-317,867	\$2,135,352	\$29,254,463	7.30%	\$908,119
81 - DEPARTMENT OF MOTOR VEHICLES	\$666,899	\$12,759,048	5.23%	\$586,711	\$453,221	\$12,345,700	3.67%	\$-213,677	\$228,113	\$13,589,385	1.68%	\$-225,108
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$957,417	\$13,090,186	7.31%	\$-440,684	\$641,334	\$12,891,860	4.97%	\$-316,083	\$665,199	\$14,783,220	4.50%	\$23,865
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$0	\$368,486	0.00%	\$0	\$2,446	\$324,637	0.75%	\$2,446	\$5,550	\$321,465	1.73%	\$3,104
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$331,248	0.00%	\$-1,806	\$1,462	\$325,532	0.45%	\$1,462	\$843	\$339,175	0.25%	\$-618
Total	\$19,661,027	257,188,036.23	7.64%	\$4,428,447	\$17,027,551	251,536,222.76	6.77%	\$-2,633,476	\$29,852,018	285,226,522.81	10.47%	\$12,824,467

Overtime Analysis by Event Date
 Overtime Analysis Settings
 Agency:
 DOC 24Q1 BA

440 DEPARTMENT OF CORRECTIONS

Code	Organization	Base Pay	Accr Comp Hrs	Comp Dollars	Pd OT Hours	Pd OT Dollars	Total Curr Hrs	Total Curr Dollars	Total Prior Hrs	Total Prior Dollars	Difference
3706	HR-PRISON MEDICAL CARE	\$3,873,194.93	615:10:00	\$24,870.90	4674:10:00	\$297,864.16	5289:20:00	\$322,735.06	6838:08:00	\$375,492.37	\$ (52,757.31)
3708	HR-OFFENDERS' STORE FUND	\$541,049.58	7:30	\$371.18	52:30:00	\$2,175.40	60:00:00	\$2,546.58	203:39:00	\$8,294.01	\$ (5,747.43)
3710	HR-DIRECTOR'S OFFICE	\$2,409,751.15	543:39:00	\$20,405.69	4237:39:00	\$283,061.97	4781:18:00	\$303,467.66	4453:07:00	\$240,888.16	\$ 62,579.50
3711	HR-CORRECTIONAL PROGRAMS	\$1,260,811.47	108:43:00	\$3,225.41	338:05:00	\$19,472.43	446:48:00	\$22,697.84	313:00:00	\$12,587.26	\$ 10,110.58
3715	HR-SO NEVADA CORRECTIONAL CTR	\$23.69	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	15:30	\$819.57	\$ (819.57)
3716	HR-WARM SPRINGS CORRECTNL CTR	\$180,204.72	232:18:00	\$9,603.07	1001:45:00	\$69,491.69	1234:03:00	\$79,094.76	2564:52:00	\$128,922.87	\$ (49,828.11)
3717	HR-NO NEVADA CORRECTNL CENTER	\$3,239,225.51	2556:44:00	\$88,122.25	29538:17	\$1,608,053.81	32095:01	\$1,696,176.06	32625:58	\$1,420,899.06	\$ 275,277.00
3718	HR-NEVADA STATE PRISON	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	\$0.00
3719	HR-PRISON INDUSTRY	\$220,347.12	0:00	\$0.00	986:55:00	\$62,291.41	986:55:00	\$62,291.41	589:30:00	\$30,313.26	\$ 31,978.15
3722	HR-STEWART CONSERVATION CAMP	\$163,187.12	83:32:00	\$3,008.11	825:55:00	\$50,496.38	909:27:00	\$53,504.49	874:47:00	\$43,994.62	\$ 9,509.87
3723	HR-PIOCHE CONSERVATION CAMP	\$207,669.76	12:00	\$445.68	1029:50:00	\$58,095.61	1041:50:00	\$58,541.29	767:30:00	\$34,383.78	\$ 24,157.51
3724	HR-NO NV TRANSITIONAL HOUSING	\$175,236.80	0:00	\$0.00	583:00:00	\$38,471.31	583:00:00	\$38,471.31	491:00:00	\$26,583.68	\$ 11,887.63
3725	HR-THREE LAKES VLY CNSRVTN CMP	\$232,391.69	374:36:00	\$14,707.99	1923:59:00	\$110,681.96	2298:35:00	\$125,389.95	1978:20:00	\$90,586.57	\$ 34,803.38
3727	HR-PRISON RANCH	\$55,482.72	0:00	\$0.00	189:50:00	\$8,085.19	189:50:00	\$8,085.19	200:00:00	\$7,410.92	\$ 674.27
3738	HR-SO DESERT CORRECTIONAL CTR	\$3,036,651.76	4052:21:00	\$146,866.21	32802:27	\$1,824,838.98	36854:48	\$1,971,705.19	37065:25	\$1,598,500.54	\$ 373,204.65
3739	HR-WELLS CONSERVATION CAMP	\$163,277.60	222:13:00	\$7,605.69	766:35:00	\$41,415.61	988:48:00	\$49,021.30	672:26:00	\$23,671.78	\$ 25,349.52
3741	HR-HUMBOLDT CONSERVATION CAMP	\$101,587.76	146:16:00	\$5,663.33	1007:00:00	\$64,192.97	1153:16:00	\$69,856.30	1345:15:00	\$66,736.64	\$ 3,119.66
3747	HR-ELY CONSERVATION CAMP	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	346:26:00	\$24,969.29	\$ (24,969.29)
3748	HR-JEAN CONSERVATION CAMP	\$144,330.32	120:32:00	\$5,039.57	949:41:00	\$51,704.61	1070:13:00	\$56,744.18	1078:31:00	\$46,378.78	\$ 10,365.40
3749	HR-SILVER SPRNGS CONSERVATION	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	\$0.00
3751	HR-ELY STATE PRISON	\$2,254,989.30	3009:51:00	\$109,592.28	22188:14	\$1,397,690.11	25198:05	\$1,507,282.39	24000:11	\$1,173,846.62	\$ 333,435.77
3752	HR-CARLIN CONSERVATION CAMP	\$121,508.56	48:00:00	\$1,697.76	1678:55:00	\$106,579.58	1726:55:00	\$108,277.34	1777:45:00	\$93,155.92	\$ 15,121.42
3754	HR-TONOPAH CONSERVATION CAMP	\$77,183.92	0:00	\$0.00	184:53:00	\$10,003.29	184:53:00	\$10,003.29	56:00:00	\$1,668.00	\$ 8,335.29
3759	HR-LOVELOCK CORRECTIONAL CTR	\$2,256,823.43	1374:41:00	\$51,701.35	23440:21	\$1,413,040.57	24815:02	\$1,464,741.92	25926:24	\$1,254,403.32	\$ 210,338.60
3760	HR-CASA GRANDE TRANS HOUSING	\$448,199.27	301:00:00	\$11,680.07	1605:00:00	\$93,982.60	1906:00:00	\$105,662.67	1859:28:00	\$86,076.89	\$ 19,585.78
3761	HR-F MCCLURE WOMENS COR CTR	\$2,348,648.40	3473:18:00	\$131,349.33	20749:47	\$1,176,451.27	24223:05	\$1,307,800.60	21587:09	\$941,515.68	\$ 366,284.92
3762	HR-HIGH DESERT STATE PRISON	\$6,853,975.30	7941:36:00	\$289,507.78	68368:08	\$3,814,601.81	76309:44	\$4,104,109.59	68799:38	\$3,035,784.51	\$ 1,068,325.08
3763	HR-INMATE WELFARE ACCOUNT	\$289,707.04	0:00	\$0.00	260:40:00	\$11,086.57	260:40:00	\$11,086.57	241:41:00	\$8,797.49	\$ 2,289.08
		\$30,655,458.92		\$925,463.65		\$12,613,829.29		\$13,539,292.94		\$10,776,681.59	\$ 2,762,611.35 25.6%

Top 7 Correctional Centers (including Prison Medical)											
3762	HR-HIGH DESERT STATE PRISON	\$ 6,853,975.30	7941:36:00	\$ 289,507.78	68368:08	\$ 3,814,601.81	76309:44	\$ 4,104,109.59		\$4.10 Million	
3738	HR-SO DESERT CORRECTIONAL CTR	\$ 3,036,651.76	4052:21:00	\$ 146,866.21	32802:27	\$ 1,824,838.98	36854:48	\$ 1,971,705.19		\$1.97 Million	
3717	HR-NO NEVADA CORRECTNL CENTER	\$ 3,239,225.51	2556:44:00	\$ 88,122.25	29538:17	\$ 1,608,053.81	32095:01	\$ 1,696,176.06		\$1.70 Million	
3751	HR-ELY STATE PRISON	\$ 2,254,989.30	3009:51:00	\$ 109,592.28	22188:14	\$ 1,397,690.11	25198:05	\$ 1,507,282.39		\$1.51 Million	
3759	HR-LOVELOCK CORRECTIONAL CTR	\$ 2,256,823.43	1374:41:00	\$ 51,701.35	23440:21	\$ 1,413,040.57	24815:02	\$ 1,464,741.92		\$1.46 Million	
3761	HR-F MCCLURE WOMENS COR CTR	\$ 2,348,648.40	3473:18:00	\$ 131,349.33	20749:47	\$ 1,176,451.27	24223:05	\$ 1,307,800.60		\$1.31 Million	
3706	HR-PRISON MEDICAL CARE	\$ 3,873,194.93	615:10:00	\$ 24,870.90	4674:10:00	\$ 297,864.16	5289:20:00	\$ 322,735.06		\$0.32 Million	
								\$ 12,374,550.81		91.4%	

Overtime Analysis by Event Date

Overtime Analysis Settings

Agency: ALL

DHHS Pivot 24Q1 Pivot

DEPT OF HEALTH AND HUMAN SERV

Row Labels	Sum of Dollars12
BACKLOG REDU	\$ 1,739,558.84
(BLANK)	\$ 1,483,353.95
COVER-VACANT	\$ 1,164,432.30
COVER-24 HR	\$ 554,478.68
AGENCY DEFINE	\$ 451,829.68
WORKLOAD	\$ 319,234.85
COVER-HOL/WK	\$ 198,144.39
CLIENT SVCS	\$ 125,292.75
COVER-SICK	\$ 75,658.12
COVER-ALMIL	\$ 60,492.87
TRAVEL	\$ 57,514.90
TRAINING	\$ 52,482.40
PROGRAM DEAD	\$ 34,573.79
EMERGENCIES	\$ 20,107.63
INVESTIGATE	\$ 19,019.07
CLIENT MEET	\$ 17,131.11
OFFICE SPVRT	\$ 15,433.97
SPECIAL EVNT	\$ 11,994.92
ACCT/FISCAL	\$ 8,362.42
SITE REPAIR	\$ 8,275.45
BUDGET PREP	\$ 6,868.07
MEETINGS	\$ 5,515.60
ADMIN SUPPRT	\$ 4,634.08
STAFF MEET	\$ 4,631.40
COVER-TRAIN	\$ 4,126.15
WORKSHOPS	\$ 3,474.39
CONFERENCES	\$ 3,471.49
TRAIN-PERSON	\$ 3,036.65
COVER-INJURY	\$ 2,586.88
ACCIDENTS	\$ 2,413.45
PERSONNEL	\$ 1,962.86
ADMIN	\$ 1,368.70
COVID-19	\$ 1,076.24
COURT	\$ 172.65
(blank)	
SHIFT TRADE	\$ -
Grand Total	\$ 6,462,710.70

1 BACKLOG REDU	1,739,558.84
2 (BLANK)	1,483,353.95
3 COVER-VACANT	1,164,432.30
4 COVER-24 HR	554,478.68
	4,941,823.77
	76.5%

Row Labels	Sum of Dollars5
407 - DIV OF WELFARE&SUPPORTIVE SVCS	\$ 2,517,941.99
HR-WELFARE FIELD SERVICES	\$ 2,365,750.63
HR-WELFARE ADMINISTRATION	\$ 117,185.78
HR-ENERGY ASSISTANCE - WELFARE	\$ 28,113.71
HR-CHILD CARE ASSIST & DEVEL	\$ 6,396.69
HR-CHILD SPVRT ENFORCEMENT PRG	\$ 495.18
(blank)	
406 -PUBLIC AND BEHAVIORAL HEALTH	\$ 1,786,585.13
HR-SO NEV ADULT MENTAL HEALTH	\$ 1,171,334.38
HR-FAC FOR MENTAL OFFENDER	\$ 445,150.02
HR-NNV ADULT MENTAL HEALTH SVC	\$ 54,777.90
HR-OFF OF STATE HEALTH ADMIN	\$ 43,691.07
HR-HEALTH CARE FACILITY REG	\$ 21,898.62
HR-MATERNAL CHILD HEALTH SRVC	\$ 9,997.58
HR-BEHAVORIAL HEALTH PREV & TR	\$ 8,500.54
HR-RADIATION CONTROL PROGRAM	\$ 8,408.71
HR-EMERGENCY MEDICAL SERVICES	\$ 6,901.94
HR-ENVIRONMENTAL HEALTH SRVCS	\$ 3,878.07
HR-CANCER CONTROL REGISTRY	\$ 3,393.74
HR-HEALTH STATISTICS&PLANNING	\$ 2,727.40
HR-HEALTH ALERT NETWORK	\$ 1,963.36
HR-COMMUNITY HEALTH SERVICES	\$ 1,919.74
HR-COMMUNICABLE DISEASES	\$ 1,388.25
HR-HHS HD BIOSTATS & EPIDMLG	\$ 404.69
HR-HHS DPBH RURAL CLINICS	\$ 249.12
HR-BEHAVORIAL HLTH INFO SYSTM	\$ -
HR- MED MARIJUANA ESTABLISHMEN	\$ -
HR-WIC FOOD SUPPLEMENT	\$ -
HR-BEHAVORIAL HEALTH ADMINSTR	\$ -
HR- MARIJUANA HEALTH REGISTRY	\$ -
HR-CHILD CARE SERVICES	\$ -
HR-PREVTREAT OF PROBLEM GAMBL	\$ -
HR-OFFICE OF MINORITY HEALTH	\$ -
(blank)	
HR-IMMUNIZATION PROGRAM	\$ -
HR-EARLY INTERVENTION SVCS	\$ -
HR-CHRONIC DISEASE	\$ -
409 - CHILD AND FAMILY DIVISION	\$ 1,440,677.22
HR-NEVADA YOUTH TRAINING CTR	\$ 366,904.91
HR-SO NEV CHILD & ADLSCNT SVCS	\$ 340,616.92
HR-SUMMIT VIEW YOUTH CENTER	\$ 244,330.80
HR-RURAL CHILD WELFARE	\$ 163,462.08
HR-CALIENTE YOUTH CENTER	\$ 160,960.29
HR-NO NEV CHILD & ADLSCNT SVCS	\$ 71,798.79
HR-CHILDRENYOUTH/FAMILY ADMIN	\$ 45,228.02
HR-YOUTH PAROLE SERVICES	\$ 30,123.37
HR-INFORMATION SERVICES	\$ 7,642.39
HR-COMMUNITY JUV JUSTICE PRG	\$ 7,038.95
HR-FAMILY SUPPORT PROGRAM	\$ 2,570.70
HR-VICTIMS OF CRIME	\$ -
HR-CHILD CARE SERVICES	\$ -
(blank)	
402 - AGING AND DISABILITY SERVICES	\$ 627,742.90
HR-DESERT REGIONAL CENTER	\$ 483,138.53
HR-COMMUNITY BASED SERVICES	\$ 54,134.80
HR-ADULT PROTECTIVE SVCS & LO	\$ 43,516.26
HR-AGING FEDERAL PRG & ADMIN	\$ 24,101.20
HR-SIERRA REGIONAL CENTER	\$ 10,658.94
HR-PLANNING ADVOCACY AND COMM	\$ 4,009.54
HR-AUTISM TREATMENT PROGRAM	\$ 3,053.02
HR-COMMUNICATION ACCESS SRVCS	\$ 2,568.81
HR-RURAL REGIONAL CENTER	\$ 1,828.60
HR-EARLY INTERVENTION SVCS	\$ 733.20
(blank)	
HR-FOCIS AND MFP	\$ -
HR-HR HOME/MAKER	\$ -
HR-STATE INDEPENDENT LIVING CO	\$ -
HR-SENIOR RX AND DISABILITY RX	\$ -
HR-TOBACCO SETTLEMENT PROGRAM	\$ -
HR-HHS DO CONSUMER HEALTH ASSI	\$ -
HR-HOME&COMMUNITY BASED PRG	\$ -
HR-SR CITIZEN PROP TAX ASSIST	\$ -
403 - HEALTH CARE FINANCING & POLICY	\$ 65,068.89
HR-HEALTH CARE FIN & POLICY	\$ 65,068.89
(blank)	
HR-NEVADA MEDICAID	\$ -
HR-NEVADA CHECK-UP PROGRAM	\$ -
400 - DEPT OF HEALTH AND HUMAN SERV	\$ 24,694.57
HR-IDEA PART C COMPLIANCE	\$ 13,476.84
HR-DEVELOPMENTAL DISABILITIES	\$ 5,136.17
HR-GRANTS MANAGEMENT UNIT	\$ 3,275.17
HR-ADMINISTRATION	\$ 2,709.22
HR-DATA ANALYTICS	\$ 97.17
HR-DISABILITY SERVICES	\$ -

3235	HR-EMERGENCY MEDICAL SERVICES	\$77,746.32	15:00	\$530.10	13:20	\$6,371.84	4:20	\$6,901.94	0:00	0:00	\$0.00	72:10:00	\$2,648.20	72:10:00	\$2,648.20
3245	HR-FAC FOR MENTAL OFFENDER	\$1,471,897.28	6:50	\$67,074.34	23:37	\$378,075.88	6:27	\$445,150.02	0:00	0:00	\$0.00	35:15:00	\$2,178.51	35:15:00	\$2,178.51
3648	HR-HHS DRPH RURAL CLINICS	\$1,485,594.76	0:00:00	\$0.00	10:00:00	\$249.12	10:00:00	\$0.00	0:46	\$1,120.68	\$1,120.68	0:00	\$0.00	0:00	\$0.00
4943	HR-MED MARIJUANA ESTABLISHMEN	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	103:15:00	\$4,442.28	\$4,442.28	436:56:00	\$24,920.18	540:13:00	\$29,352.46
4547	HR-MARIJUANA HEALTH REGISTRY	\$43,904.80	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	13:30	\$550.14	\$550.14	11:15	\$989.74	0:45	\$1,139.88
30	WORKLOAD	\$1,222.09	4:30	\$1,222.09	168:30:00	\$7,634.72	1058:17:00	\$8,856.81	207:57:00	\$8,579.49	\$8,579.49	842:20:00	\$50,427.12	1058:17:00	\$59,006.61
31	WORKSHOPS	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
32	SHIFT TRADE	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
33	COVID-19	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
52	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
53	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
59	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
60	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
62	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
63	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
70	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	114:08:00	\$4,634.36	\$4,634.36	125:15:00	\$8,069.06	238:21:00	\$12,703.42
71	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
72	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
73	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
74	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
75	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	1:11	\$39,878.13	\$39,878.13	4:15	\$222,170.53	5:26	\$262,048.66
76	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	12:00	\$466.44	\$466.44	8:00	\$466.44	20:00	\$932.88
77	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
78	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
80	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
83	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
86	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
88	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
89	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
96	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
97	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
98	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
99	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
100	(BLANK)	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
									7665:32:00	\$381,111.80	\$381,111.80	7665:32:00	\$381,111.80	7665:32:00	\$381,111.80

3228	HR-WELFARE ADMINISTRATION	\$3,092,773.91	3:31	\$3,936.37	1732:10:00	\$113,247.41	1855:41:00	\$117,185.78	0:00	0:00	\$0.00	6:00	\$153.09	6:00	\$153.09
3233	HR-WELFARE FIELD SERVICES	\$18,653,987.89	0:00	\$0.00	\$2,379.44	\$2,395,750.63	52379:44	\$2,365,750.63	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00
3238	HR-CHILD SPRT ENFORCEMENT PRG	\$1,176,184.52	0:00	\$0.00	0:00	\$495.18	8:00:00	\$495.18	0:00	0:00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
3267	HR-CHILD CARE ASSIST & DEVEL	\$161,122.00	0:00	\$0.00	23:15	\$6,396.69	23:15	\$6,396.69	0:00	0:00	\$0.00	18:00	\$769.64	18:00	\$769.64
4862	HR-ENERGY ASSISTANCE - WELFARE	\$207,885.88	0:00	\$0.00	609:10:00	\$28,113.71	609:10:00	\$28,113.71	0:00	0:00	\$0.00	38288:27	\$1,733,509.19	38288:27	\$1,733,509.19
7	BUDGET PREP	0:00	0:00	\$0.00	13:30:00	\$452.78	13:30:00	\$452.78	0:00	0:00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
8	CLIENT MEET	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
9	CONFERENCES	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
10	COURT	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
11	COVER-ALMIL	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
12	COVER-24 HR	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
13	COVER-HOLAWK	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
15	COVER-SICK	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
16	COVER-TRAIN	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
17	COVER-VACANT	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
18	EMERGENCIES	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
19	INVESTIGATE	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
20	MEETINGS	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
21	OFFICE SPRT	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
22	PERSONNEL	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
23	PROGRAM DEAD	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
24	SITE REPAIR	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
25	SPECIAL EVNT	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
26	STAFF MEET	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
27	TRAINING	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
28	TRAIN-PERSON	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
29	TRAVEL	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
30	WORKLOAD	34:31:00	0:00	\$1,123.30	12:35	\$51,598.10	0:00:00	\$52,721.40	0:00	0:00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
31	WORKSHOPS	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
32	SHIFT TRADE	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
50	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
51	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
52	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
53	AGENCY DEFINI	17:00	0:00	\$2,815.07	0:00:00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
54	AGENCY DEFINI	0:00:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
59	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
60	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
62	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
63	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
64	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:00	\$0.00	0:00:00	\$0.00
83	AGENCY DEFINI	0:00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00:00	\$0.00	\$0.00	0:00:			

	Basis	Dollars	Dollars3	Totals	Dollars#0	Dollars#2
400	\$967,159.85	\$4,638.75	\$18,057.82	\$24,694.37	\$18,057.82	\$24,694.37
402	\$15,844,615.77	\$31,250.05	\$690,327.85	\$627,742.90	\$596,492.85	\$627,742.90
403	\$4,812,887.53	\$1,233.89	\$93,835.00	\$65,068.89	\$65,635.00	\$65,068.89
406	\$20,402,390.03	\$233,842.49	\$1,552,742.64	\$1,786,585.13	\$233,842.49	\$1,786,585.13
407	\$23,291,964.30	\$3,938.37	\$2,514,003.62	\$2,517,941.99	\$2,514,003.62	\$2,517,941.99
409	\$12,590,891.32	\$96,501.26	\$1,344,175.96	\$1,440,677.22	\$96,501.26	\$1,440,677.22

SUMMARY - BA AND RSN TOTALS SHOULD MATCH