Governor Joe Lombardo Chairman

Amy Stephenson Clerk of the Board



Attorney General Aaron D. Ford Member

Secretary of State Francisco V. Aguilar

Member

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:** March 12, 2024, 10:00 AM

**Location:** Old Assembly Chambers of the Capitol Building

101 North Carson Street Carson City, Nevada 89701

Video Conference Location: 1 Harrahs Court, Governor's Conference Room

Las Vegas, Nevada 89119

This meeting may be viewed on YouTube.
The video live stream begins at 10:00 am.
<a href="https://www.youtube.com/watch?v=U48mrZNEHOs">https://www.youtube.com/watch?v=U48mrZNEHOs</a>

#### **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 953 583 632#. 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 February 13, 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 Public Safety – Investigation Division	1	\$35,883
Department of Conservation and Natural Resources – Division of State Parks	7	\$1,719,142

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

#### A. Department of Employment, Training and Rehabilitation

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Naveen Yelamanchili to perform information security for the Department of Employment, Training and Rehabilitation through statewide contract #99SWC-NV19-2461 with Guidesoft, Inc. DBA Knowledge Services.

#### **B.** Department of Public Safety

Pursuant to NRS 333.705, subsection 1, Department of Administration, Purchasing Division requests authority to contract with former employee Ryan Miller to manage divisional operations and provide training for the Department of Public Safety, 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 Mohamed Rouas to provide construction engineering services with CMWorks, Inc.

## 6. Request for Approval of Payment to the U.S. Treasury (For possible action)

#### Office of the Controller

Pursuant to Senate Bill 511 of the 2023 Legislative Session, the State Controller requests approval of a payment to the U.S. Treasury in an amount not to exceed \$367,714 from the General Fund. This is the highest possible liability payment for 2023. Payment to the U.S. Treasury is required by March 29, 2024.

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

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

This revision to SAM increases a state agencies' limit to accept gifts or grants to \$200,000 without Interim Finance approval and allows agencies to accept gifts or grants in any amount without Interim Finance approval in non-executive budget accounts.

a. SAM Chapter 2526 Authority to Accept Gifts and Grants

# 8. Request for Exception to State Administrative Manual Policy (For possible action)

Department of Health and Human Services – Division of Child and Family Services – Rural Child Welfare

Pursuant to NRS 353.040 and State Administrative Manual (SAM) 0006, the division requests an exception to SAM 0224 State Sponsored Credit Cards for Official Travel Only and SAM 0226 Claims and Payments When Credit Cards Have Been Used.

# 9. 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:

# A. Nevada System of Higher Education

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2977	NSHE - Special Projects	\$975
2980	University of Nevada, Reno	\$305,943
2982	UNR School of Medicine	
		\$46,004
2983	Intercollegiate Athletics - UNR	\$300
2985	Statewide Programs - UNR	\$6,599
2986	NSHE System Administration	\$6,532
2987	University of Nevada, Las Vegas	\$462,263
2988	Intercollegiate Athletics - UNLV	\$5,671
2989	Agricultural Experiment Station – UNR	\$3,309
2990	Cooperative Extension Service	\$16,572
2991	System Computing Center	\$27,462
2992	UNLV Law School	\$17,028
2994	Great Basin College	\$18,666
2996	University Press	\$450
3001	Statewide Programs – UNLV	\$2,603
3002	UNLV Dental School	\$14,571
3003	Business Center North	\$3,970
3004	Business Center South	\$2,470
3005	Nevada State University	\$22,964
3010	Desert Research Institute	\$10,645
3011	College of Southern Nevada	\$246,494
3012	Western Nevada College	\$24,541
3014	UNLV School of Medicine	\$12,363
3018	Truckee Meadows Community College	\$74,193
3221	Health Laboratory and Research	\$5,423
	Total	\$1,338,011

# B. Nevada System of Higher Education

D. 4.11		GENERAL FUND
BA#	BUDGET ACCOUNT NAME	ADJUSTMENT
3011	College of Southern Nevada	\$133,824
	Total	\$133,824

#### **C.** Department of Corrections

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3710	NDOC Director's Office	\$317,443
3716	Warm Springs Correctional Center	\$48,162
3717	Northern Nevada Correctional Center	\$1,733,866
3723	Pioche Conservation Camp	\$112,527
3724	Northern Nevada Transitional Housing	\$53,198
3725	Three Lakes Valley Conservation Camp	\$133,104
3738	South Desert Correctional Center	\$1,651,486
3739	Wells Conservation Camp	\$66,393
3741	Humboldt Conservation Camp	\$41,298
3752	Carlin Conservation Camp	\$91,032
3754	Tonopah Conservation Camp	\$32,927
3759	Lovelock Correctional Center	\$1,573,037
3760	Casa Grande Transitional Housing	\$186,011
	Florence McClure Women	\$1,109,122
3761	Correctional Center	
3762	High Desert State Prison	\$3,606,510
	Total	\$10,756,116

### 10. Request for Designation of Bad Debt (For possible action)

#### **Department of Business and Industry – Division of Industrial Relations**

Pursuant to NRS 232.605, subsection 2, the Advisory Council to the Department of Business and Industry, Division of Industrial Relations requests that the Board of Examiners designate a total of \$558,344.14 as bad debts, as they have been determined to be uncollectible.

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

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

Claimant: Lewis Stewart
Claim No: TC20944
Settlement Amount: \$3,400,000
Date of Loss: March 2, 2017

- 12. Approval of Proposed Leases (For possible action)
- 13. Approval of Proposed Contracts (For possible action)
- 14. Approval of Proposed Master Service Agreements (For possible action)

#### 15. 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 January 17, 2024 through February 13, 2024.

## 16. Information Item Reports

# A. Department of Conservation and Natural Resources – Division of State Lands – Fiscal Year 2024, 2nd Quarter

Pursuant to NRS 321.5954, subsection 4, the State Land Registrar is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. This report covers the period of October 1, 2023 through December 31, 2023.

### B. Statewide Quarterly Overtime Report – Fiscal Year 2024, 2nd Quarter

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. This report covers the period of October 1, 2023 through December 31, 2023.

17. 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 953 583 632#. 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.

## 18. 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: <a href="https://notice.nv.gov">https://notice.nv.gov</a>
- 3. Internet: https://budget.nv.gov/Meetings/Board\_of\_Examiners/2023/2023BOE/

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

#### **MEETING MINUTES**

**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

#### **MEMBERS PRESENT:**

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

#### STAFF PRESENT:

Amy Stephenson, Clerk of the Board

#### 1. Call to Order / Roll Call

**Governor:** We will call to order the State of Nevada Board of Examiners meeting scheduled for today, February 13, 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:** Here.

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

Governor: Thank you.

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.

**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 727 299 298#.

Do we have any public comment there in Carson City?

**Clerk of the Board:** Not in person, sir, but we do on the phone.

**Governor:** Was the caller disconnected?

Clerk of the Board: I'm told the caller is connected but nobody is speaking.

**Governor:** With that, there is a second opportunity for public comment later in the meeting.

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

We will close this first item for public comment.

## 3. Approval of the January 9, 2024 Meeting Minutes (For possible action)

**Governor:** Agenda item number 3, *Approval of the January 9, 2024 Meeting Minutes*. Are there any questions of any Board Members? Hearing none.

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

**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 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

Governor: Agenda item number 4, State Vehicle Purchases.

**Clerk of the Board:** Thank you, sir. There are five requests under agenda item number 4. The first request is from the Department of Agriculture, Division of Measurement Standards. The division requests approval to purchase six replacement vehicles for a total amount not to exceed \$328,197.

The second request is from the Department of Agriculture, Division of Measurement Standards. The department requests approval to purchase one replacement vehicle for a total amount not to exceed \$68,308.

The third request is from the Department of Conservation and Natural Resources, Division of Environmental Protection. The division requests approval to purchase one replacement vehicle for a total amount not to exceed \$45,452.

The fourth request is from the Department of Conservation and Natural Resources, Division of State Parks. The division requests approval to purchase two new vehicles for a total amount not to exceed \$82,477.

The fifth request is from the Department of Veterans Services. The department requests approval to purchase one replacement vehicle for a total amount not to exceed \$33,394. Are there any questions on these items?

**Governor:** Do we have any questions? Ms. Stephenson, on the Department of Agriculture item, my understanding is the request already went to the Interim Finance Committee (IFC).

Clerk of the Board: Yes, sir. The work program was approved at the February 8th IFC.

Governor: Alright, thank you. I will accept a motion.

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

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

# 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.

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

**Clerk of the Board:** There are five requests under this agenda item.

There are 3 items under agenda item number 5. The first item, number 5.A, from the Department of Administration, Hearings Division, has been withdrawn by the agency.

The next request is from the Department of Health and Human Services, Division of Child and Family Services, through the Department of Administration, Purchasing Division. The division intends to contract with a former employee from February 13, 2024 through August 8, 2024 on a part-time basis through Manpower.

The last request is from the Department of Transportation. The department intends to contract with a former employee from February 14, 2024 through February 13, 2026 on a full-time basis through Diversified Consulting Services. Are there any questions on these items?

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

**Secretary of State:** Motion to approve 5-B and 5-C.

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

# 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

**Governor:** Agenda item number 6, Request for the Allocation and Disbursement of Funds for Salary Adjustments.

**Clerk of the Board:** The 2023 Legislature, through Assembly Bill 522, appropriated Salary Adjustment funds to the Board of Examiners to cover cost-of-living adjustments (COLA) effective July 1, 2023, which were not included in agency salary budgets.

An agency whose actual salaries exceeded their budgeted amount due to these COLAs is allowed to request salary adjustment dollars from the Board of Examiners.

This item requests access to those funds by various institutions and accounts within the Nevada System of Higher Education in the amount of \$38,967,864 in General Funds. Are there any questions on this item?

**Governor:** Are there any questions?

Secretary of State: No questions.

Attorney General: None here. Move approval.

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

### 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.

**Governor:** Agenda item number 7, *Travel Policy Change Request.* 

**Clerk of the Board:** The first request is from the Gaming Control Board. Pursuant to State Administrative Manual, section 0006, the board requests an exception to SAM 210 for the reimbursement rate for specified lodging by employees of the board.

The second request is from the 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. Are there any questions on these items?

Attorney General: None here. Move approval.

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

### 8. Approval of Proposed Leases (For possible action)

Governor: Agenda item number 8, Approval of Proposed Leases.

**Clerk of the Board:** There are 4 leases under agenda item number 8 for approval by the Board today. Are there any questions on any of these leases?

**Governor:** Are there any questions?

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

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

# 9. Approval of Proposed Contracts (For possible action)

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

**Clerk of the Board:** There are 56 contracts under agenda item number 9 for approval by the Board. Are there any questions on any of these contracts?

**Governor:** Are there any questions?

Attorney General: Move approval.

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

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

Governor: Agenda item number 10, Approval of Proposed Master Service Agreements.

**Clerk of the Board:** There are 19 Master Service Agreements under agenda item number 10 for approval by the Board. Are there any questions on these items?

**Governor:** Are there any questions?

**Attorney General:** If you're ready for a motion, I move approval.

**Governor:** Yes, we have a motion for approval. All those in favor, say aye. The motion passes unanimously.

#### 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.

**Governor:** Agenda item number 11, *Information Item – Clerk of the Board Contracts.* 

**Clerk of the Board:** There are 81 contracts over \$10,000 and under the \$100,000 threshold that were approved by the Clerk of the Board between December 13, 2023 through January 16, 2024. This item is informational. Are there any questions on these items?

**Governor:** On contract number 76, did we receive a response as to why we were going to outside legal representation versus internal?

Clerk of the Board: We will have to follow up. We will get an answer to you.

**Governor:** Alright, I'd appreciate it.

Are there any other questions under this item?

Secretary of State: No, no questions.

**Secretary of State:** No, sir. No questions.

**Governor:** We will close this item.

### 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.

**Governor:** Agenda item number 12, *Information Item Reports.* 

**Clerk of the Board:** There are two reports under agenda item number 12. The first report is for the 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. Are there any questions on this item?

**Governor:** Are there any questions on 12.A? Hearing none.

The second report is from the Department of Administration, Division of Human Resource Management and is the Statewide Quarterly Overtime Report for 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. This report covers the period of July 1, 2023 through September 30, 2023. Are there any questions on this item?

**Governor:** Are there any questions? Hearing no questions. We will close this agenda item.

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.

**Governor:** Agenda item number 13, *Public Comment*. This is the second opportunity for public comment. Do we have anyone for public comment there in Carson City or do we have anyone on the telephone for public comment?

**Clerk of the Board:** Sir, we don't have anyone here or on the telephone for public comment.

**Governor:** Alright, do we have anyone in Las Vegas here for public comment? Hearing none. We will close this item.

### 14. Adjournment (For possible action)

**Governor:** Agenda item number 14, *Adjournment*.

Secretary of State: Motion to adjourn.

**Governor:** All those in favor, signify by saying aye. The motion passes unanimously. Thank you everyone.



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Curtis Palmer Administrator

**Amy Stephenson** 

David Johnson Deputy Director

Director

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

Date:

February 13, 2024

To:

Amy Stephenson, Clerk of the Board

Governor's Finance Office

From:

Kirk Hawkins, 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 PUBLIC SAFETY – INVESTIGATION DIVISION**

#### 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 \$35,883.

#### Additional Information:

The division is requesting to purchase one replacement vehicle used for both undercover and tribal liaison activities. The authorization for the tribal liaison activities vehicle was approved in the 2023 Legislative Session. The approved funding is requested to be combined with an insurance payout for an existing crashed vehicle to purchase a single vehicle.

#### **Statutory Authority:**

NRS 334.010

REVIEWED:	
ACTION ITEM:	

Joe Lombardo
Governor



George Togliatti

Director

Ryan Miller
Division Chief

555 Wright Way
Carson City, Nevada 89711-0525
Telephone (775) 684-7400 • Fax (775) 684-7450

## Memorandum

DATE:

January 30, 2024

TO:

Kirk Hawkins, Executive Branch Budget Officer

FROM:

Ryan Miller, Chief

Department of Public Safety, Investigation Division

SUBJECT:

Request to Purchase Vehicle / Combine Funding Source

Attached are the forms and backup documentation as required by the Board of Examiner's, to request approval to purchase one state vehicle pursuant to NRS 334.010. This funding was appropriated during the 82<sup>nd</sup> Nevada Legislative Session for the Department of Public Safety, Investigation Division (DPS ID) received funding for a new Tribal Liaison position (AB125). As part of this funding, the Division was authorized for \$17,638.00 to purchase a new vehicle for this position. It was later determined that this was not enough money to purchase a new vehicle.

Separately, DPS ID received a settlement from State Farm Insurance following the total loss of a state-owned vehicle due to an accident. A check was issued in the amount of \$18,813.25 to the Division to replace the state-owned vehicle. Unfortunately, this was also not enough money to replace the lost vehicle.

In an effort to obtain at least one vehicle, rather no vehicles, DPS ID is requesting to combine the vehicle funding related to the Tribal Liaison position with the funding received from the State Farm Insurance settlement to purchase one vehicle. The total combined of the two funding sources would be \$36,451.25.

If approved, this vehicle will be part of the Division fleet and support the needs of the DPS ID and the needs of the Tribal Liaison position. Work program C66655 is pending this approval. The total cost to replace this vehicle is \$35,882.25 to include DMV Title, DRS Fees, and the replacement of related equipment. This will leave an excess of \$569.00. Purchase of the vehicle is contingent upon BOE approval.

If you have any questions please contact the Division's Administrative Services Officer, Connie Chambers at 775-684-7443.

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

Agency Name: Nevada Department of Public	Budget Account #: 3743
Safety, Investigation Division	TE 1 1 NY 1 MMM COA MAAG
Contact Name: Connie Chambers	Telephone Number: 775-684-7443
Pursuant to NRS 334.010, agencies must receive pricapplies to all new and used vehicles. Please provide Number of vehicles requested: 1 Amount of the Is the requested vehicle(s) new or used:	the following information request: \$35882.25
Type of vehicle(s) purchasing e.g. compact sedan,	
SUV	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Mission of the requested vehicle(s): Undercover/ T	ribal Liasion
Were funds legislatively approved for the request?	If yes, please provide the decision unit number:  AB125 & WORK PROGRAM # 6 66655
Yes No Yes AB125	If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing	ng fleet or replacement vehicle(s):
This vehicle will be an addition per AB125 and will al	so replace one vehicle that was totaled (Unit 159).
X Addition(s) X Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way	" or "Smart Way Elite" requirements pursuant to
SAM 1314? If not, please explain.	
No, law enforcement exception	
Please Complete for Replacement Vehicles Only:	Does this request meet the replacement schedule
(For type of vehicle, i.e., compact sedan,	criteria pursuant to SAM 1316? If no, explain why
intermediate sedan, SUV, pick up, etc.)	the vehicle is being replaced.
Current Vehicle Information:	No, this vehicle was involved in an accident to which it was
Vehicle #1 Model Year: 2015	determined to be a complete loss by State Farm Insurance.
Toyota Venza	(September 2023)
Odometer Reading: 71,919	The state of the s
Type of Vehicle: SUV	If the replacement vehicle is an upgrade to the
The state of the s	existing vehicle, explain the need for the upgrade.
Vehicle #2 Model Year:	
Odometer Reading:	
Type of Vehicle:	
ADDOING AUTHODITY DDDOYAL.	
APPOINTING AUTHORITY APPROVAL:	, ,
Chi	ief 1/31/24
Agency Appointing Authority Title	Date
BOARD OF EXAMINERS' APPROVAL:	
DOARD OF EARIMINERS 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.:	Vin – TBD 2024 Hyundai Tucson SEL							
Dealer Name:	Carson C	Carson City Hyundai						
<b>Delivery Location</b> :	Carson City, Nevada							
Vehicle Colors:	Exterior: White Interior: Black			erior: Black	• Cloth			
	4	Quanti	ty	Unit Cost	Total Cost			
BASE PRICE (Reno, Carson City or Las Vegas de	elivery)	1		\$32,685.00	\$32,685.00			
					\$			
					-			
Doc Fee				\$ 399.00				
				\$				
Rebate				\$(1,500.00)				
				\$				
				\$				
DELIVERY COST: (If other than Reno\Carson or Las \	/egas)			\$	\$			
Total purchase price with options				\$31,584.00				
DMV Title and DRS Fee's				\$28.25	\$ 28.25			
GRAND TOTAL:					\$31,612.25			

Registered Owner:	Agency Name & Address: DPS- Investigation Division 107 Jacobsen Way Bldg. C Carson City, NV 89701
Legal Owner:	Agency Name & Address: DPS- Investigation Division 107 Jacobsen Way Bldg. C Carson City, NV 89701
County Vehicle Based In:	
Name & Phone of Person to contact when vehicle is ready for delivery:	

# **NEVADA MOTOR VEHICLE BUYER'S ORDER**

#### CUST# 145901

Date: 01/26/20	024										
Buyer Name and Address			Co-B	Buyer Name and	Address		Seller Name and Address				
STATE OF NEVADA 107 JACOBSEN WAY CARSON CITY, NV 89701		N/A			CARSON CITY HYUNDAI 3659 S CARSON ST CARSON CITY, NV 89701						
Email: CMCCANN@DPS.STATE.NV.US Phone: (775) 400-0821 Cell: (775) 400-0821			Email: N/A Phone: N/A Cell: N/A			Salesperson: GREGORY DEPHILIPPIS  Deal Number: 26857				i	
X NEW	USED	DEMO		EXECUTIVE	□CAR		TRUCK		THER		
Year	Make	Model		Туре	Trim		Color	Milea	ge s	Stock #	#
2024	HYUNDAI	TUCSO	IM.	WAGON 4 DR.	SEL	BERENE	TY WHITE PEARL	8		HY298	9
A DESCRIPTION OF THE PARTY OF T		RECORD 1	naves.	WAGON 4 DIK.	VIN						
YA MAKE		MODEL		TYPE	5NMJBCDE	EORH3	70612				
N/A N/A	N/A	- V 1000 - 1000	N/		Base Price of V	ehicle			32,68	5 00	1
N/A	N/A		N/A		Additional Equip	pment (	Options)				2
N/A					N/A	-	4		-depter	N/A	3
WA STATE SHE	LIEN INFO	DRMATION	THE STREET	A TOTAL	NA					N/A	4
PAYOFF TO		ACCI			N/A					N/A	5
N/A N/A		N/A			NIA		6				
N/A	· Amazon · A		N/A	data pasa si summinga summananana	N/A	-				N/A	7
ADDRESS N/A			POKE WIT	гн	N/A			_		N/A	8
AMOUNT	GOOD TELL	VE	ERIFIÉD E	ğγ	Dealer Installed	Option	s	-		-	9
N/A	N/A		I/A	TO NEW YORK OF	N/A			-		N/A	10
YP MAKE	I RADE IN	MODEL		TYPE	N/A			_		N/A	11
N/A N/A	N/A		N/A		- N/A	-		-+		N/A	12
COLOR N/A	N/A		N/A	GE.	Documentary Fe	00	_	-	399		13
AB4	13.33.	- 1000	1 100		Documentary Fe	00		-	395	00	14
N/A	LIEN INFO	DMATION	10.75	SINK SULVEY	Total Cook Dries	- /	. 441	-			15
PAYOFF TO:	EICH IN C	ACCT.	and said	District District	Total Cash Price	* ( ) tint	, <del>-</del>		33,084	1.0	-
N/A LIENHOLDER		N/A	PHONE		Less Trade-In	40	\$			WA.	16
N/A			N/A		Difference (15 m		<u> </u>		33,084	1	17
ADDRESS			OKE WIT	H	Emissions Inspe					V/A	18
AMOUNT	GOODTEL	VE.	A RIFIED B	Y *	Total Taxable An				33,084	.00	19
N/A	N/A		/A		Plus Balance Ov	wed	\$			V/A	20
INSURANCE CO.	INSURANCE II	NFORMATION AGENT NAME	N	THE MARKET	-		1.				21
N/A		N/A			Sales Tax		\$			I/A	22
ADDRESS N/A		PHONE *			Titling Fee				28	.25	23
CONTACTED			EFFECT	VE DATE	Registration Fee	·			į.	I/A	24
N/A VERIFIED BY			N/A								25
N/A		1	/A								

THIS AGREEMENT DOES NOT INCLUDE INSURANCE COVERAGE FOR BODILY INJURY AND/OR PROPERTY DAMAGE CAUSED TO OTHERS.

All warranties, if any, by a Manufacturer or supplier other than	NA	1	N/A	26
Dealer are theirs, not Dealer's. Only such Manufacturer or other supplier shall be liable for performance under such warranties, unless Dealer furnishes Buyer with a separate written warranty			W/A	27
	NA	1	V/A	28
	NA	1	N/A	29
or service contract made by Dealer on its own behalf. Dealer	Other			30
neither assumes nor authorizes any person to assume for it any				31
liability in connection with the sale of any products.	Total Taxes and Fees (22 thru 31)	28	25	32
	-			33
Unless Dealer makes a written warranty on its own behalf, or			***************************************	34
enters into a service contract within 90 days from the date of this				35
Agreement, Dealer makes no warranties, express or implied, on	Total (20 plus 32 thru 35)	33,112	25	36
the vehicle, and there will be no implied warranties of	Deposit (Cash Downpayment)	1	VΙΑ	37
merchantability or fitness for a particular purpose. This provision does not affect any warranties covering the vehicle that the	Rebate	1,500	00	38
Manufacturer or supplier may provide.	Other			39
management of copping that provides	Balance Due on Delivery (36 minus 37 thru 39)	31,612	25	40

For your protection, request a receipt for all payments you make.

This Agreement is not binding upon either Dealer or Buyer until signed by an authorized Dealer representative.

If Buyer is buying this Vehicle in a credit sale transaction evidenced by a retail installment sale contract, this Agreement is binding when the retail installment contract is signed, but will not remain binding if a third party finance source does not agree to purchase the retail installment contract executed by Buyer and Dealer based on this Agreement on the terms as submitted. See paragraph 13 on page 3 of this Agreement, which shall survive the termination of this agreement for any reason.

Buyer agrees that this Agreement includes all of the terms and conditions on all pages of this Agreement hereof, that this Agreement cancels and supersedes any prior agreement including oral agreements, and as of the date below comprises; together with any retail installment sale contract the complete and exclusive statement of the terms of the agreement relating to the subject matters covered by this Agreement. Buyer, by signing this Agreement, acknowledges that Buyer has read and agrees to its terms and has received a true copy of this Agreement.

BUYER SIGNS X	DATE 01/26/2024
CO-BUYER SIGNS X N/A	_ DATE N/A
MANAGER'S APPROVAL (Must Be Accepted By An American Research of the Design)	
X	DATE 01/26/2024

#### **SALES QUOTE**



Sales Quote No: 5Q10311

Date: 1/26/24

Account No: NI00

Bill To: Nevada Investigations Division

Attn: Sgt Coley McCann 555 Wright Way Carson City, NV 89711 Ship To: Nevada Investigations Division

Attn: Sgt Coley McCann 555 Wright Way Carson City, NV 89711

Sales Person	P.O. Number	Ship Method	Payment Terms	Quote Expires On
Joel Christle		Installed Equipment	Net 30	2/25/24
		Notes		

Item No	Description	Quantity	UM	Price	Disc	Amoun
QT-0609	Quantum Interior Front Lightbar   Universal	1.00	EA	\$649.00	0.00	\$649.00
ETSA461HPP	NERGY 400 Series Handheld Siren	1.00	EΑ	\$415.00	0.00	\$415.00
QSM-8101	QUAD Surface Mount- 4 in Rear WIndow, 2 in Grille	6.00	EA	\$100.00	0.00	\$600.00
Q-4016	QSM & FSM Single L-Bracket	6.00	EA	\$9.00	0.00	\$54.00
454562	700/800MHz Undercover Antenna	1.00	EA	\$110.00	0.00	\$110.00
SSCB100	Stinger 100amp Circuit Breaker	1.00	EA	\$35.00	0.00	\$35.00
MAXFH8	8gā Maxi In-Line Fuse	1.00	EA	\$5.00	0.00	\$5.00
ATCFH12	12ga In-Line Fuse	1.00	EA	\$2.00	0.00	\$2.00
518785	Micro 2 Fuse Tap	1.00	EA	\$5.00	0.00	\$5.00
380830	75A Relay- SPST, 12v	1.00	EA	\$45.00	0.00	\$45.00
Freight	Feniex Freight Charges	1.00	EA	\$25.00	0.00	\$25.00
INS-FLAT - Installation	Installation of lighting and customer supplied Harris radio, siren speaker and gunlocks.	1.00	EA	\$2,000.00	0.00	\$2,000.00
X0014	6 Gang Fuse Block	1.00	EA	\$20.00	0.00	\$20.00
48843	TNC Male- RG58 Crimp	1.00	EA	\$5.00	0.00	\$5.00
			1			

Subtotal	\$3,970.00
Discount	\$0.00
Freight	\$0.00
Sales Tax	\$0.00
Sales Order Total	\$3,970.00



OFFICE: SUN KING WINDOW TINTING 213 Sage Street, No. 10 Carson City, Nevada 89706 (775) 885-7024  1569 Hwy. 395, Unit C Minden, Nevada 89423 (775) 782-4510  Specificaitions: The complete	BID# 2173/2  Date: 1-26-74  Customer Name: DPS Investigations  Phone# 775-684-7440 (Alicia)  Shade:  Price: \$300.00
+ front w/s	
- Jan	
This bid is good for thirty days from dat	e listed above.
Bidder's Signature: ////////////////////////////////////	MM/



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson
Deputy Director

Curtis Palmer Administrator

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

Date:

February 8, 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 seven new vehicles for a total amount not to exceed \$1,719,142.

#### Additional Information:

The division is requesting to purchase three new water trucks and four new dump trucks to perform maintenance projects within State Parks. The vehicles will be placed in the Southern, Western, and Eastern regions.

# Statutory Authority: NRS 334.010

REVIEWED:

ACTION ITEM:\_\_\_\_

Joe Lombardo

JAMES A. SETTELMEYER

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 ARPA funding sub granted from DCNR Director's Office via work program C66264 approved during December IFC. Agency would like to request the purchase of 7 new vehicles, water trucks and dump trucks, to be used at various parks around the state in maintenance projects. The total request for the 7 vehicles totals \$1,719,141.28.

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: 4 Amount of the request: \$980,113.00							
Is the requested vehicle(s) new or used: New	NAME OF THE OWNER OW						
Type of vehicle(s) purchasing e.g. compact sedan, inter- 4 Dump Trucks	mediate sedan, SUV, pick up, etc.:						
Mission of the requested vehicle(s):							
4 dump trucks, one each for the Southern, Western regions and	two for the Eastern Region for use on maintenance projects.						
Were funds legislatively approved for the request?	If yes, please provide the decision unit number:						
☐ Yes ■ No	If no, please explain how the vehicles will be funded?						
	ARPA Funding						
Is the requested vehicle(s) an addition to an existing fle	et or replacement vehicle(s):						
4 Addition(s)Replacement(s)							
Does the requested vehicle(s) comply with "Smart Way SAM 1308? If not, please explain.	" or "Smart Way Elite" requirements pursuant to						
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	Does this request meet the replacement schedule criteria						
sedan, SUV, pick up, etc.)	pursuant to SAM 1309? If no, explain why the vehicle is being replaced.						
Current Vehicle Information:	• .						
Vehicle #1 Model Year:	N/A						
Odometer Reading:							
Type of Vehicle:	***						
Valiala #0 Madal Varia	If the replacement vehicle is an upgrade to the existing						
Vehicle #2 Model Year: Odometer Reading:	vehicle, explain the need for the upgrade.						
Type of Vehicle:	N/A						
Please attach an additional sheet if necessary							
APPOINTING AUTHORITY APPROVAL:							
	ninistrator 2-22-24						
Agency Appointing Authority Title	Date						
BOARD OF EXAMINERS' APPROVAL:							
Approved for Purchase Not Approved for Purch	hase						
Board of Examiners Date							
Late							

# **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.:	2025 Kenv	2025 Kenworth T880				
Dealer Name:	Pape Kenv	Pape Kenworth				
Delivery Location:	Sparks, NV	Sparks, NV				
Vehicle Colove	Exterior: \	White	Inte	erior:	×	Cloth
Vehicle Colors:					0	Vinyl
		Quantit	.у	Unit Cost	Total (	Cost
BASE PRICE (Reno, Carson City or Las Vegas d	elivery)	4		\$ 245,000.00	\$ 980,	000.00
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 opti	ons		\$ 980,000.00		
DMV Title and DRS Fee's	-20-21		\$ 113.00		
GRAND TOTAL:			\$ 980,113.00		
Registered Owner:	Agency Name & Addre Nevada State Parks 901 S Stewart St, S Carson City, NV 897	uite 5005			
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701				
County Vehicle Based In:	Clark, Lincoln, Churchill				
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Villanueva 775-684-2773				
ready for delivery:					



# PAPÉ KENWORTH

KENWORTH

# CUSTOMER TRUCK SALES ORDER

Page 1 of 2

SIC Code:

INVOICE ADDRESS	Buyer Name NEVADA STATE PARKS		DELIVERY ADDRESS	Name Pape Kenwo	rth	
Address			Address 8640	Canyon River Dr		
City	State Zij	•	City Sparks	State NV	Zip	89434
Phone	Fax		Phone 775-35	3-2828 Fax		
PO No.	Delivery/F.O.B.		Est. Delivery D	ate		
	Yr/Make 2025 KENWORTH	2025 KENWORTH Mileage			NEW	USED
EQUIPMENT	Model T880 CHASSIS V	IN No. BUDG	ETARY PRICIN	NG	V	
Description:	•					\$0.00
	1) NEW 2025 T880 CHASSIS, CUMMINS X15 500V/1850 ENGINE, ALLISON 4500RDS TRANS,					185,000.00
20K FRONT	STEER AXLE, 40K REAR DANA AX	LES,				
1) NEW SCH	LOTH & DOWNEY 15' DUMP BODY	w/ AJR & ELE	CTRIC END O	F FRAME		\$60,000.00
See attack	ned Kenworth Vehicle Summary or Ad	dendum				
Additional Eq	uipment/Accessories		Cost			
			\$0.00	Add'l Equipment Sales Pri	e	\$0.00
			\$0.00	Transportation Charges		
			\$0.00	Federal Excise Tax		
			\$0.00	State Sales Tax 0.00	%	\$0.00
	Yr/Make	See attache	d Addendum	Misc. Document/License F	90	
TRADE	Model			Less Net Trade-In Allowan		\$0.00
	VIN No.			Total Differential Price	\$	245,000.00
Lienholder	Milea	ge		Less Deposit with Order		\$0.00
Trade in Allowa	nce Less (	Est.) Payoff		Balance Due on Delivery		245,000.00
* The Sales Price increase or decre	e shown in this order will be adjusted by the sease in transportation costs between today's d	same increase or late and the date of	decrease as any ir of delivery.	ncrease or decrease in Deale	r's factory list p	orices and any
	NEW STANDARD KENWORTH	CHASSIS				
	VENDOR NEW EXTENDED (de					
WARRANTY	VENDOR NEW EXTENDED (de					
	USED (describe)					
	AS IS / NO WARRANTY Buyer initial:					
A heavy-duty tractor and 53-foot or longer box-type trailer operated in California may be subject to the California Air Resources Board Heavy-Duty Vehicle Greenhouse Gas Emission Reduction measure. These vehicles may be required to use low-rolling resistance tires and meet aerodynamic equipment requirements to reduce greenhouse gas emissions. For more information, please visit the California Air Resources Board website at <a href="http://www.arb.ca.gov/cc/hdghg/hdghg.htm">http://www.arb.ca.gov/cc/hdghg/hdghg.htm</a> .						
	certifies that there is no lien of any kind and Buyer places a firm order.	that the Trade is	free and clear and	is his sole and absolute pro	perty except as	noted above.
	PAPÉ KENWORTH			BUYER		
Store Papa Ke	nworth					
City Sparks	State NV Zip	IV Zip 89434 ByTitle			_	
By Jared Bour	ds Title Territory	Manager	Зу	Title		
Date			ate			

# 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:							
	4 6 700 000 00						
Number of vehicles requested: 3 Amount of the request: \$739,028.28							
Is the requested vehicle(s) new or used: New Type of vehicle(s) purchasing e.g. compact sedan, inter	madiata sadan SIIV nick un etc						
3 Water Trucks Trucks	mediate sedan, 50 v, piek up, etc.						
Mission of the requested vehicle(s):							
3 water trucks, one each for the Southern, Eastern, ar	nd Western regions for use on maintenance projects.						
Were funds legislatively approved for the request?	If yes, please provide the decision unit number:						
Yes No	If no, please explain how the vehicles will be funded?						
	ARPA Funding						
	7 to 17 to 1						
Is the requested vehicle(s) an addition to an existing fle	et or replacement vehicle(s):						
3 Addition(s) 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	Does this request meet the replacement schedule criteria						
sedan, SUV, pick up, etc.)	pursuant to SAM 1309? If no, explain why the vehicle						
	is being replaced.						
Current Vehicle Information:	N/A						
Vehicle #1 Model Year:	N/A						
Odometer Reading:							
Type of Vehicle:	If the applications we high in an appending the the animalian						
Vehicle #2 Model Year:	If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.						
Odometer Reading:							
Type of Vehicle:	N/A						
Please attach an additional sheet if necessary							
APPOINTING AUTHORITY APPROVAL:							
ノンノンツーマ Adm	inistrator Z-22-24						
Agency Appointing Authority Title	Date						
BOARD OF EXAMINERS' APPROVAL:	- WI-40000000 XII - I - I						
Approved for Purchase Not Approved for Purchase							
	I						
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.:	2025 Kenworth T480					
Dealer Name:	Pape Kenworth					
Delivery Location:	Sparks, NV					
Vehicle Colors:	Exterior: White Inter		erior:	☑ Cloth □ Vinyl		
170		Quantit	у	Unit Cost	Total Cost	
BASE PRICE (Reno, Carson City or Las Vegas de	elivery)	3		\$ 246,314.51	\$ 738,943.53	
SPECIFY OPTIONS: (description)						
Back Up Camera			201	\$		
Four Wheel Drive				\$		
Integrated Trailer Brake Controller	1-1-31)			\$	]	
Power Locks				\$		
Skid Plate				\$		
Tire, Spare, Full Size				\$		
Power Outlet 120 V				\$		
		1				

DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$		
Total purchase price with option	ons		\$ 738,943.53		
DMV Title and DRS Fee's			\$ 84.75		
GRAND TOTAL:			\$ 739,028.28		
Registered Owner:	Agency Name & Add Nevada State Par 901 S Stewart St, Carson City, NV 8	ks Suite 5005			
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701				
County Vehicle Based In:	Clark, Lincoln, Churchill				
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Villanueva 77	75-684-2773			



# PAPÉ KENWORTH

**KENWORTH** 

# CUSTOMER TRUCK SALES ORDER

Page 1 of 2

SIC Code:

INVOICE ADDRESS	Buyer Name NEVAD				Name Pape Kenworth			
Address				Address 8640 Canyon River Dr				
City		State Zip		City Sparks State NV		Zip	Zip 89434	
Phone 775-867-4429 Fax				Phone 775-353-2828 Fax				
PO No. Delivery/F.O.B. SPARKS, NV				Est. Delivery Date Q1 2024				
	Yr/Make 2025 Kenworth			Mileage	NEW	USED		
EQUIPMENT	Model T480 VIN No. QUOT				V			
Description:							\$0.00	
1) New T480 Water Truck Chassis, PX-9 370/1250, Allison 3000RDS, 20K Steer Axle, 46K rear Axles							\$150,000.00	
1) New Diamondbilt 4000 Gallon Water Tank							\$96,314.51	
See attached Kenworth Vehicle Summary or Addendum								
Additional Equipment/Accessories Cost								
			\$0.00	Add'l Equipment Sales Pric	t Sales Price \$0.00			
2				\$0.00	Transportation Charges			
			\$0.00	Federal Excise Tax		\$0.00		
				\$0.00	State Sales Tax 0.00	6	\$0.00	
	Yr/Make See attache			mubnebbA b	Misc. Document/License Fe			
TRADE	Model				Less Net Trade-In Allowance	s0.00		
VIN No. Total Differential Price							\$246,314.51	
Lienholder Mileage Less Deposit with Order							\$0.00	
Trade in Allowance Less (Est.) Payoff Balance Due on Delivery					Balance Due on Delivery		\$246,314.51	
* The Sales Price shown in this order will be adjusted by the same increase or decrease as any increase or decrease in Dealer's factory list prices and any increase or decrease in transportation costs between today's date and the date of delivery.								
NEW STANDARD KENWORTH CHASSIS								
VENDOR NEW EXTENDED (describe)								
WARRANTY	VENDOR NEW EXTENDED (describe)							
	USED (des							
	AS IS / NO WARRANTY Buyer Initial:							
A heavy-duty tractor and 53-foot or longer box-type trailer operated in California may be subject to the California Air Resources Board Heavy-Duty Vehicle Greenhouse Gas Emission Reduction measure. These vehicles may be required to use low-rolling resistance tires and meet aerodynamic equipment requirements to reduce greenhouse gas emissions. For more information, please visit the California Air Resources Board website at <a href="http://www.erb.ca.gov/cc/hdghg/hdghg.htm">http://www.erb.ca.gov/cc/hdghg/hdghg.htm</a> .								
	certifies that there is n Buyer places a firm ord		d that the Trade is t	free and clear and	is his sole and absolute propo	erty except as	noted above.	
PAPÉ KENWORTH				BUYER				
Store Pape Ke	nwarth							
City_Sparks	Stat	e <u>NV</u> Zip	89434 B	ју	Title			
By Jared Bour	ds	Title Territor	ry Manager E	Ву	Title			
Date			D	ate				



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson
Deputy Director

Curtis Palmer Administrator

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

Date:

February 14, 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 Naveen Yelamanchili to perform information security for the Department of Employment, Training, and Rehabilitation through statewide contract #99SWC-NV19-2461 with Guidesoft, Inc. DBA Knowledge Services.

#### Additional Information:

Mr. Yelamanchili retired from the department on October 6, 2023 and is receiving pension benefits. His skills and experience are needed to assist with creating policies to satisfy audit requirements from the Internal Revenue Service and Social Security Administration and review security and disaster recovery work products on the Nevada Unemployment Insurance project. He will be working in the office. The department requests to contract with Mr. Yelamanchili from March 12, 2024 to September 12, 2024 on a part-time basis for approximately 20 to 25 hours per week.

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

Date: 2/16/2024

#### **MEMORANDUM**

To:

Lesley Volkov

From:

Ryan Vradenburg, Purchasing Officer 3

Subject:

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

Please find the attached copy of the "Authorization to Contract with a Former Employee" for Naveen Yelamanchili whom the Nevada Department of Employment, Training and Rehabilitation is intending to hire as an Information Security Analyst 4, who is now employed by Knowledge Services.

Naveen has left state services as of 10/06/2023 and is within the two-year window and will be collecting PERS.

Thank you, Ryan Vradenburg Purchasing Officer 3 rvradenburg@admin.nv.gov 775-684-0197

## INFORMATION TECHNOLOGY DIVISION

Nevada Department of Employment,
Training and Rehabilitation

# JOE LOMBARDO

Governor

CHRIS SEWELL
Director

CARL F. STANFIELD
Administrator

# Office of the Administrator MEMORANDUM

DATE:

12/27/23

TO:

Purchasing Division, Board of Examiners

FROM:

Carl F. Stanfield, Administrator, Information Technology Division

SUBJECT:

Request to authorize contract with a former employee - Naveen Yelamanchili

The Information Technology (IT) Division of DETR is respectfully requesting you to authorize an MSA (Master Services Agreement) contract with a former state employee named Naveen Yelamanchili.

The contractor position will augment DETR IT Division's Security team in performing the information security related job duties and creating policies to satisfy audit requirements from IRS/SSA. The contractor will also be tasked to create a security vulnerability management program. The contractor is uniquely positioned to provide these services to DETR as he has more than 25 years of experience working as a developer, Database administrator, Information Security officer. He has an in-depth understanding of various application and software systems within the agency to be able to complete the specific information security related projects.



# 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:	Naveen Yelam	anchili		
Former Employee ID Number:	103	321		
Former Job Title:	IT Professiona	l IV - ISO		
Former Employee Agency:	DETR			
Former Class and Grade:	Class:	7.921	Grade:	42
Former Employment Dates:	From:	08/03/1998	To:	10/06/2023
Requesting Agency:	DETR			
Vendor:	Knowledge Se	rvices		

Pleas	e 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.
	Summarize scope of contract work.
A	The contractor position will augment DETR IT Division's Security team in performing the information security related job duties and creating policies to satisfy audit requirements from IRS/SSA.  The contractor will be tasked to create a security vulnerability management program.  The contractor will assist in creating the disaster recovery plan for DETR.  The contractor will assist in reviewing security and disaster recovery work products from vendor FAST on the NUI (Nevada Unemployment Insurance) project.  The contractor will provide guidance and support on the Oracle Cloud project with matters related to various Oracle Security products.
	Document former job description.
В	Just before his retirement, Naveen worked as IT Professional IV at DETR IT Division. He was the Information Security Officer(ISO). His duties included the following;  Security functions include but are not limited to: security policies, security operations, and/or maintaining oversight of information systems and data within the assigned area of information security responsibility. The position performs security audits to ensure compliance state and federal compliance rules, investigations, security awareness training administration, security access control recommendations, badge access administration, threat assessment with email and web gateways, approval authorization, threat detection alert notifications and evaluation of software and hardware recommendations with

Revised: January 2020 Page 1 of 4

	related cost estimates. The position supervises IT Professional staff and create operational procedures for staff that perform duties associated with supporting the security requirements set forth by the State of Nevada. Such materials include procedures for reviewing internal equipment logs and procedures for monitoring and supporting DETR infrastructure and protecting data.
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?
	The contractor has 25 years of IT experience providing oversight on mission critical projects for the agency. The contractor will be providing Information Security related job duties for a temporary assignment. The contractor has skills to coordinate tasks with the vendor, IT staff and business staff. There is no specific knowledge transfer.
	Explain why existing State employees within your agency cannot perform this function.
D	The workload of DETR/ITD staff has significantly increased with various business grants program implementations. The contractor will augment the State staff resources on a part time basis for a specific temporary assignment.
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.
L	The individual overseeing the contract is not related to the contractor.
	List contractors' hourly rate.
F	\$102 (MSA Information Security Analyst-Level 4), see rate card attached from Knowledge Services.
	List the range of comparable State employee rates.
G	The Information Security Analyst tasks and responsibilities are comparable to IT Professional IV (Grade 42- Step 10). The State employee rate is \$75.74/hour. Breakdown is as follows: Salary: \$56.83/hour Fringe (25.86%): \$14.70/hour Insurance (\$730/month): \$4.21/hour
	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?
Н	The contract rate is based on the Master Service Agreement Rate card from Knowledge Services (the primary vendor for the State of NV Purchasing for IT staff augmentation). The rate is based on the experience level of the candidate. The contractor will be working strictly on a part time basis doing information security related tasks. It is very difficult to find a candidate with the skills and knowledge Naveen possesses to hit the ground running. A comparable Information Security Analyst MSA with his level of experience and expertise will cost State a lot more than \$102.
	Document justification for hiring contractor.
I	The position will augment DETR IT Division's Security team in performing the information security related job duties and creating policies to satisfy audit requirements from IRS/SSA. The contractor will also be tasked to create a security vulnerability management program.
	Will the employee be collecting PERS at any time during the contract?
J	Yes
17	What is the duration of the contract with the former employee? (Include start and end date)
K	03/12/2024-09/12/2024
L	Will the former employee be working full time or part time? If part time, how many hours?

Revised: January 2020 Page 2 of 4

M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).				
	No				
Comm	nents – Provide any additional comments:				

Revised: January 2020 Page 3 of 4

# Approval for Authorization to Contract with a Former Employee:

Carl Staffred	2-15-24
Signature of Agency Head Authorizing Request	Date
Synvandron for Gidean Onis	2/15/24
Purchasing Administrator Signature (if a Statewide Contract)	Date
LustenVolh	2/15/24
Budget Analyst Signature	Date
Clerk of the Board of Examiners Signature	Date



# 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 Deputy Director

Curtis Palmer

**Administrator** 

**David Johnson** 

**Amy Stephenson** 

Director

Date:

February 16, 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 Ryan Miller to manage divisional operations and provide training for the Department of Public Safety, through Master Service Agreement #23928 with HAT Limited Partnership dba Manpower.

### Additional Information:

Mr. Miller retired from the department on March 11, 2024 and is receiving pension benefits. His skills and experience are needed in transferring specialized knowledge in administrative functions pertaining to Major Crimes, Narcotics Enforcement, Homeland Security, and Safe Voice. Mr. Miller will be managing operations and providing guidance and support in budgetary preparations for the 2025-2027 biennium. He will be working in the office. The division intends to contract with Mr. Miller from March 12, 2024 through May 31, 2024 on a full-time basis.

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

February 15, 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 Ryan Miller who Manpower wants to hire. Ryan will be retiring from state service on

March 11, 2024 and will be collecting PERS.

Manpower is aware that this request will need March BOE approval.

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

Joe Lombardo Governor



George Togliatti

Director

Sheri Brueggemann Deputy Director

# **Director's Office**

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

# Memorandum

DATE:

February 14, 2024

TO:

Annette Morfin, Purchasing Officer

Department of Administration, Purchasing Division

FROM:

Kristi Defer, Senior Fiscal Officer

Department of Public Safety, Director's Office

SUBJECT: Authorization to Contract with Former Employee-Ryan Miller

The Nevada Department of Public Safety, Director's Office has determined a need to contract with former employee Ryan Miller to assist the Department from the period of March 12 (upon approval) through May 31, 2024. Due to the labor shortage, the Department does not have existing employees with comparable experience and/or knowledge. The request is made in accordance with the State Administrative Manual Chapter 0323. Mr. Miller is being contracted through Manpower Services.

Mr. Miller has the historical knowledge of DPS programs and operations gained from working for 25 years in the Department and 15 years with the division. In his previous position, Mr. Miller was the Chief of the Investigation Division, responsible for all operations and administrative functions of the Investigation Division including Major Crimes, Narcotics Enforcement, Homeland Security, and SafeVoice.

Through this contract, Mr. Miller will continue to work as an Administrator for the Investigation division. The duties will include managing operations, transferring institutional knowledge, and providing support in budgetary preparations for the upcoming 2025-2027 biennial budget submission.

Please contact me if additional information or clarification is needed. My phone number is 775-684-4536, or I can be contacted by email at kdefer@dps.state.nv.us.



# STATE OF NEVADA DEPARTMENT OF ADMINISTRATION

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

# Authorization to Contract with a Former Employee

Employee Information					
Former Employee Name:	Ryan Mi	ller			
Former Employee ID Number:	006332				
Former Job Title:	Division Administrator, Investigations (Chief)				
Former Employee Agency:	Public Sa	Public Safety-Investigation Division			
Former Class and Grade:	Class:	U9002	Grade:		Unclassified
Former Employment Dates:	From:	09/21/1998	To:	3/13/24	
Requesting Agency:	Public Safety-Investigation Division				
Vendor:	Manpowe	er			

Pleas	e 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.
	The employee will be managing divisional operations and working with staff to transfer specialized knowledge. The employee will also provide guidance and support in budgetary preparations.
В	Document former job description.
	The division Administrator is responsible for all operations and administrative functions of the Investigation Division including Major Crimes, Narcotics Enforcement, Homeland Security, Homeland Security, and SafeVoice.
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, the employee is being hired because of their specialized knowledge of the agency's operations. The employee has 25 years of experience in Public Safety, and over 15 years of that time has been with the division. There is no clause in the contract.
D	Explain why existing State employees within your agency cannot perform this function.

Revised: January 2024 Page 1 of 3

	Due to the labor shortage, the department does not have existing employees with comparable experience and/or knowledge. The employee has historical knowledge of divisional programs and operations, and this time will allow for the transfer of that knowledge and additional guidance and support in budget building for the 2025-2027 biennium.		
E	Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.		
	N/A		
	List contractors' hourly rate and employee's hourly rate.		
F	Contractor rate is \$89.21 which includes the contractor's fee of \$17.84 Employee rate is \$71.37		
	List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate.		
G	The hourly rate is comparable to the Division Administrator, Investigations, U9002 Pay Policy 10 (EE/ER), \$71.37		
н	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?		
11	N/A		
	Document justification for hiring contractor.		
I	Approval will allow for training of staff and uninterrupted divisional operations while the Department works to appoint a new Administrator.		
_	Will the employee be collecting PERS at any time during the contract?		
J	Yes		
**	What is the duration of the contract with the former employee? (Include start and end date)		
K	Starting 3/12/24 (Upon BOE approval) through 5/31/24		
	Will the former employee be working full time or part time? If part time, how many hours?		
L	Full time		
N.F	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s).		
M	The employee is on the Rocky Mountain Information Network's (RMIN) Executive Policy Board.		

Comments - Provide any additional comments:		

Revised: January 2024 Page 2 of 3

# Approval for Authorization to Contract with a Former Employee:

Kristi Defer	2/15/24
Signature of Agency Head Authorizing Request	Date
C+125	2/16/24
Purchasing Administrator Signature (if a Statewide Contract)	Date
	T w
Bullyvall	2/11/24
Budget Analyst Signature	Date
Clerk of the Board of Examiners Signature	Date



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson
Deputy Director

**Curtis Palmer Administrator** 

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

Date:

February 23, 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 Mohamed Rouas to provide construction engineering services with CMWorks, Inc.

### Additional Information:

Mr. Rouas retired from the department November 28, 2022 and will be receiving pension benefits. His skills and experience are needed to assist with supervising engineering technicians and staff, providing inspections, and construction management assignments. He will be working in the office. The department intends to contract with him from March 12, 2024 through September 12, 2024 on a full time basis.

## **Statutory Authority:**

NRS 333.705 (1)

REVIEWED: 1	ús.
ACTION ITEM:	8



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

Fax: (775) 888-7201

## **MEMORANDUM**

**December 12, 2023** 

To:

**Governor's Finance Office** 

From:

Tracy Larkin Thomason, P.E., Director

Subject:

Authorization to Contract with a Former Employee – Mohamed Said Rouas

## SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with retired state employee, Mohamed Rouas. Mr. Rouas has retired from state service on November 28, 2022. He is currently employed with CM Works, a Kleinfelder Company, who is proposing to utilize Mr. Rouas to work on various project through current and future Service Provider Agreements within NDOT's Construction Division. The current Agreement, P376-23-040, provides construction engineering services for the I-15 North Jean 3R project as detailed below, terminating on December 31, 2024. Mr. Rouas has worked with many consultant firms during his tenure with the Department but was not involved with CM Works or in the procurement process for any of the current agreements.

#### **BACKGROUND**

There are insufficient staff and expertise to successfully manage the workload, size and scope of the statewide construction operations needs for construction engineering services. In September of 2023, NDOT issued a Request for Proposals (RFP) to engage service providers to perform engineering needs in construction engineering services. This agreement includes providing assistant resident engineers, technicians, testers, and support personnel, to ensure the construction engineering of the statewide projects are accomplished in conformance with the polices, guidelines, manuals, and standards.

Mr. Rouas has retired from NDOT as a Manager II, from District I with Crew 922. His experience in this role provides a wide range of skills required for CM Works, Inc. to utilize in the current agreement and future project agreements. These skills include, but are not limited to, supervising engineering technicians and staff, providing inspections and construction management assignments by CM Works, Inc.

#### RECOMMENDATION

We respectfully request your consideration for approval for CM Works, Inc. to engage Mr. Rouas as a member on their staffing team to augment NDOT's management of statewide construction projects via the construction engineering services provided from the I-15 North Jean 3R Agreement and future agreement projects for NDOT.

Tracy Larkin Thomason

a Fracy 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

# Authorization to Contract with a Former Employee

		Employee Information		
Former Employee Name:	Mohame	d Said Rouas		
Former Employee ID Number:	06065			
Former Job Title:	Highway	Project Manager, Registered Profession	onal Engine	eer
Former Employee Agency:	Nevada I	Department of Transportation		
Former Class and Grade:	Class:	6.101	Grade:	44
Former Employment Dates:	From:	July 1993	To:	November 2022
Requesting Agency:	Nevada I	Department of Transportation		
Vendor:	CMWork	s a Kleinfelder Company		

Pleas	e mark which of the following applies and complete Sections 'A' through 'M' below:
	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
X	Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
	Summarize scope of contract work.
A	The Request for Proposals asks for augmenting an NDOT Construction Management Crew, P376-23-040. This includes the following: One (1) Assistant Resident Engineer, three (3) Tech Level IV Inspectors, three (3) Tech Level III Testers, one (1) Tech Level I Inspector, one (1) fully equipped two-person survey crew, vehicles, equipment, and computers. Mr. Rouas will be performing the duties of an alternate Assistant Resident Engineer (if necessary).
	Document former job description.
В	Mr. Rouas was last working as a Highway Project Manager. He oversaw the construction of major highway projects. The duties were comparable to a Resident Engineer with the addition of more complex projects.
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?
Č	Yes, Mr. Rouas is being hired because of his specialized knowledge and experience. There is not a clause for transfer of knowledge.
D	Explain why existing State employees within your agency cannot perform this function.

Revised: January 2020

	The Department could not find qualified personnel to perform this work.
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.
E	The contractor is not related to any individual overseeing or establishing the contract.
	List contractors' hourly rate.
F	\$ 76.13 per hour
_	List the range of comparable State employee rates.
G	\$41.26 to \$62.35 (Grade 44)
**	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?
H	The competitive environment of the Construction Management Field in Nevada commands the pay rate for an individual with Mr. Rouas' skill. The proposed contract rate is comparable to the average private industry consultant rate for this role
	Document justification for hiring contractor.
Ι	NDOT has an extensive construction program and there is not enough staff to manage all the projects. It becomes necessary to hire consultants to perform the work or else NDOT could lose federal funding.
	Will the employee be collecting PERS at any time during the contract?
J	Yes
	What is the duration of the contract with the former employee? (Include start and end date)
K	Start Date: March 12, 2024 End Date: September 12, 2024
	Will the former employee be working full time or part time? If part time, how many hours?
L	Full time
	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:		

# Approval for Authorization to Contract with a Former Employee:

tracy Larkin Thomason	12/13/2023
Signature 1 Agency Head Authorizing Request	Date
Purchasing Administrator Signature (if a Statewide Contract)	Date
Kelli Lay	2/9/24
Budget Analyst Signature	Date
Clerk of the Board of Examiners Signature	Date



# 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 Amy Stephenson Director

David Johnson
Deputy Director

Curtis Palmer Administrator

Date:

February 5, 2024

To:

Amy Stephenson, Director Clerk of the Board

Governor's Finance Office

From:

Bridgette Garrison, Executive Branch Budget Officer

Governor's Finance Office

Subject:

BOARD OF EXAMINERS **ACTION** ITEM

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

#### OFFICE OF THE CONTROLLER

## Agenda Item Write-up:

Pursuant to Senate Bill 511 of the 2023 Legislative Session, the State Controller requests approval of a payment to the U.S. Treasury in an amount not to exceed \$367,714 from the General Fund. This is the highest possible liability payment for 2023. Payment to the U.S. Treasury is required by March 29, 2024.

## Additional Information:

Senate Bill 511, section 91, of the 2023 Legislative Session states that "If the State of Nevada is required to make payment to the United States Treasury under the provisions of Public Law 101-453, the Cash Management Improvement Act of 1990, the State Controller, upon approval of the State Board of Examiners, may make such payments from the interest earnings of the State General Fund or interest earnings in other funds when interest on federal money has been deposited in those funds."

A schedule showing the highest possible liability payment for fiscal year 2023 and a copy of the State's annual report to the U.S. Treasury are attached to this memorandum. That amount will be paid only if all Federal interest and State calculation costs are denied. If the 2023 calculations are accepted, the Federal government will owe the State \$108,387,346.

The U.S. Treasury is reviewing the report and is expected to have a final liability amount by March 15, 2024.

# Statutory Authority:

SB 511, section 91 of the 2023 Legislative Session

REVIEWED:_	ARF
ACTION ITEM	1:

# ANDY MATTHEWS Controller

## STATE OF NEVADA

JAMES SMACK
Chief Deputy Controller



# OFFICE OF THE STATE CONTROLLER

#### MEMORANDUM

To:

State Board of Examiners

Aut P. Mush

From:

State Controller Andy Matthews

Date:

February 1, 2024

Subject:

FY 2023 Interest Liability under the Cash Management Improvement Act

The purpose of the Cash Management Improvement Act (P.L. 101-453) is to ensure greater efficiency, effectiveness, and equity in the exchange of funds between the Federal Government and the States. The State incurs an interest liability when Federal funds are deposited in a State account prior to the day the State pays out funds for program purposes. Conversely, the Federal Government may incur an interest liability when the State pays out its own funds for program purposes.

Assembly Bill 520, Section 91, of the 2023 Legislative Session states that "If the State of Nevada is required to make payment to the United States Treasury under the provisions of Public Law 101-453, the Cash Management Improvement Act of 1990, the State Controller, upon approval of the State Board of Examiners, may make such payments from the interest earnings of the State General Fund or interest earnings in other funds when interest on federal money has been deposited in those funds."

I am hereby requesting the approval of payment to the U.S. Treasury in the amount of \$367,714 from the General Fund. This is the highest possible payable liability for 2023. That amount will be paid only if all Federal interest and State calculation costs are denied. The U.S. Treasury is reviewing the report and should have a final liability figure by March 15<sup>th</sup>. Payment to the U.S. Treasury is required by March 29<sup>th</sup>. The State paid the Federal government a net liability of \$105,241 for fiscal year 2022. If the 2023 calculations are accepted, the Federal government will owe the State \$108,387,346.

A schedule showing the highest liability payable for FY 2023, and a copy of the State's annual report to the U.S. Treasury, are attached to this memorandum.

# Cash Management Improvement Act 2023 Annual Report State of Nevada

Annualized Interest Rate: 4.23%

#### State of Nevada State Contact

Marianne Lockyer Office of the Stat Controller 515 E Musser St., 2nd FLR Carson City, Nevada 89701 (775) 684-5652 mxlockyer@sco.nv.gov

#### **Annual Report Claims**

Current State Interest Liability	\$367,714	
State Interest Adjustment	\$0	
Interest Calculation Costs	\$11,489	
Current Federal Interest Liability	\$108,743,572	
Federal Interest Adjustment	\$0	
Net Federal Interest Liability	108,387,347	

### Certification

"I certify to the best of my knowledge that all information in this report, including the interest claims and interest calculation costs claim, is true and accurate in all respects and that all calculations have been made in accordance with 31 CFR Part 205 and the Treasury State Agreement."

Signature of Authorized State Official	andy Matthews
Name of Authorized State Official	Andy Matthews
Title of Authorized State Official	:Controller
Date Signed: 1/5/2024	

# Cash Management Improvement Act - 2023 Annual Report State of Nevada Interest Claims Report

CFÐA	Program Name	Current State Liability	State Adjustment	Current Federal Liability	Federal Adjustment	Net State Liability
10.542	Pandemic EBT Food Benefits	0	0	0	0	0
10.551	Supplemental Nutrition Assistance Program	351	0	956	0	-605
10.559	Summer Food Service Program for Children	76	0	14,827	0	-14,751
17.225F	Unemployment Insurance Federal Benefit Account and Administrative Costs	85,740	0	0	0	85,740
17.2258	Unemployment Insurance — State Benefit Account	0	0	106,711,275	0	- 106,711,2 75
20.205	Highway Planning and Construction	0	0	0	0	0
84.010	Title I Grants to Local Educational Agencies	107,121	0	19,398	0	87,723
84.027	Special Education Grants to States	12,879	0	55,484	0	-42,605
93.575	Child Care and Development Block Grant	72,444	0	20,392	0	52,052
93.778	Medical Assistance Program	89,103	0	1,921,240	0	1,832,137
97.050	Presidential Declared Disaster Assistance to Individuals and Households - Other Needs	0	0	0	0	0
Total Liab	ility	367,714	0	108,743,572	0	- 108,375,85 8

# Cash Management Improvement Act - 2023 Annual Report State of Nevada Interest Calculation Costs Certification

#### I. State Costs - Internal Clearance Pattern Development and Maintenance **Interest Calculations** State Personnel Cost: \$5,335 State Personnel Cost: \$6,154 State Non-Personnel Cost: \$0 State Non-Personnel Cost: \$0 Other Costs: \$0 Other Costs: \$0 Π. State Costs - External Clearance Pattern Development and Maintenance **Interest Calculations** State Personnel Cost: \$0 State Personnel Cost: \$0 State Non-Personnel Cost: \$0 State Non-Personnel Cost: \$0 Other Costs: \$0 Other Costs: \$0

#### III. Adjusted Interest Calculation Costs

Interest calculation costs incurred prior to the current state fiscal year are not eligible for reimbursement pursuant to 31 CFR 205.27(d)(3). In the event that interest calculation costs reimbursed in a prior state fiscal year are disallowed as the result of a subsequent audit, the disallowed amount must be included in this section.

Adjusted Interest Calculation Costs:

#### III. Total Interest Calculation Costs

**Total Interest Calculation Costs:** 

\$11,489

\$0

#### IV. Certification

I hereby certify that this Interest Calculation Costs Claim Report is accurate to the best of my knowledge. Interest calculation costs recovered via this mechanism shall not be included in our State's cost allocation plan as described in OMB Circular A-87. The State shall maintain documentation to substantiate this cost claim and make this information available upon request."

Described by:

Signature of Authorized	State Official:	andy Matthews	
Name of Authorized		Andy Matthews	
Title of Authorized	State Official:	Controller	
1/5, Date Signed:	/2024		

# State of Nevada CMIA 2023 Liability by CFDA Number

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**m** 

	Reportable	Net Liability Comments	0 FY 2023 Annual Interest Rate = 0.04230000%	(605)	(14,750)	85,740 Based on info provided by DETR	106,711,275 (106,711,275)	0	87,723	(42,605)	52,052	(1,832,137)	0	(108,375,857)
Reportable	Federal	Liability	0	926	14,827	0	106,711,275	0	19,398	55,484	20,392	1,921,240	0	367,714 108,743,571 (108,375,857)
	Reportable	State Liability	0	351	9/	85,740	0	0	107,121	12,879	72,444	89,103	0	367,714
		Net Liability	0	(605)	(14,750)	85,740	(106,711,275)	0	87,723	(42,605)	52,052	(1,832,137)	0	367,714 108,743,571 (108,375,857)
	Federal	Liability	0	956	14,827	0	106,711,275	0	19,398	55,484	20,392	1,921,240	0	108,743,571
	State	Liability	0	351	9/	85,740	0	0	107,121	12,879	72,444	89,103	0	367,714
	Total	Expenditures	191,815,185	696,433,866	6,401,077	see below	55,639,030	433,851,383	171,228,124	115,501,936	182,866,105	4,437,977,315	1	6,291,714,020
		CFDA#	10.542	10.551	10.559	17.225F	17.225S	20.205	84.010	84.027	93.575	93.778	97.050	

Net Interest Liability	(108,375,857)
irect Costs	11,489
nount due	(108,387,346)



# 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 Amy Stephenson Director

David Johnson Deputy Director

Curtis Palmer Administrator

D	a	te	

January 10, 2024

To:

Amy Stephenson, Clerk of the Board

Governor's Finance Office

From:

Aaron Frantz, Executive Branch Budget Officer

Governor's Finance Office

Subject:

BOARD OF EXAMINERS ACTION ITEM

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

#### **GOVERNOR'S FINANCE OFFICE**

## Agenda Item Write-up:

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

This revision to SAM increases a state agencies limit to accept gifts or grants to \$200,000 without Interim Finance approval and allows agencies to accept gifts or grants in any amount without Interim Finance approval in non-executive budget accounts.

a. SAM Chapter 2526 Authority to Accept Gifts and Grants

# Additional Information:

Request for changes to the SAM and recommended language attached.

## Statutory Authority:

NRS 353.040

REVIEWED:	
ACTION ITEM:	_

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

Agency Code:015

<u>Department:</u> Governor's Finance Office Division (if applicable): Budget Division

Appointing authority:

Agency contact (name, phone and e-mail): Curtis Palmer - (775) 684-0222,

palmerc@finance.nv.gov

Budget Division Analyst (name, phone and e-mail):

<u>Proposed BOE date:</u> March 2023 Proposed effective date: March 2023

1. Reason/purpose for requested change:

NRS 353.335 Sec. 114 was revised in the 2023 Legislative Session to allow agencies to deposit gifts or grants without Interim Finance approval in non-executive budget accounts.

2. Explain how the recommended change(s) will benefit agencies or create consistencies or efficiencies, etc. (provide examples if applicable):

This request creates consistency between state policy and NRS.

3. Will recommended change have a fiscal impact (if yes, explain):

This request will allow agencies to deposit gifts or grants without Interim Finance approval in non-executive budget accounts.

4. Existing and recommended language in SAM (*blue bold italics* is new language being proposed and <del>red strikethrough</del> is deleted language being proposed). (**please provide requested change as an attachment**):

Appointing Authority:	Stephenson
BOARD OF EXAMINERS APPROVAL DATE:	(for BOE use only)

# **Current Policy:**

# 2526 Authority to Accept Gifts and Grants

- 1. NRS 353.335 provides the authority for agencies to accept gifts and grants other than those that are already included in the legislatively approved budget. Agencies should follow the general guidelines listed below, and consult the statute and their assigned Executive Branch Budget Officer as necessary to determine how to proceed with any work programs. New governmental grants less than or equal to \$150,000 are able to be added to a budget account via work program without approval by the Interim Finance Committee (IFC), but those over \$150,000 require IFC approval.
- 2. Non-governmental gifts or grants less than or equal to \$20,000 may be added to a budget account via work program without IFC approval, but those over \$20,000 require IFC approval. However, if a work program requiring IFC approval is not necessary, agencies may still have to provide an action item for IFC's consideration.
- 3. When agencies receive a grant (typically a block grant) from the federal government that requires a public hearing, NRS 353.337 allows agencies to submit the item to IFC in lieu of a public hearing in accordance with NRS 241.

This section does not apply to:

- 1. The Nevada System of Higher Education: or
- 2. The Department of Health and Human Services while acting as the state health planning and development agency pursuant to paragraph (d) of subsection 2 of NRS 439A.081 or for donations, gifts or grants to be disbursed pursuant to NRS 433.395 or NRS 435.490: or
- 3. Artifacts donated to the Department of Tourism and Cultural Affairs.

# **Revised Policy:**

# 2526 Authority to Accept Gifts and Grants

- 1. NRS 353.335 provides the authority for agencies to accept gifts and grants other than those that are already included in the legislatively approved budget. Agencies should follow the general guidelines listed below, and consult the statute and their assigned Executive Branch Budget Officer as necessary to determine how to proceed with any work programs. New governmental grants less than or equal to \$150,000 \$200,000 are able to be added to a budget account via work program without approval by the Interim Finance Committee (IFC), but those over \$150,000 \$200,000 require IFC approval.
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- 3. When agencies receive a grant (typically a block grant) from the federal government that requires a public hearing, NRS 353.337 allows agencies to submit the item to IFC in lieu of a public hearing in accordance with NRS 241.

This section does not apply to:

1. The Nevada System of Higher Education; or



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson
Deputy Director

Curtis Palmer Administrator

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

Date:

February 16, 2024

To:

Amy Stephenson, Clerk of the Board

Governor's Finance Office

From:

Philene O'Keefe, 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 HEALTH AND HUMAN SERVICES – DIVISION OF CHILD AND FAMILY SERVICES – RURAL CHILD WELFARE

# Agenda Item Write-up:

Pursuant to NRS 353.040 and State Administrative Manual (SAM) 0006, the division requests an exception to SAM 0224 State Sponsored Credit Cards for Official Travel Only and SAM 0226 Claims and Payments When Credit Cards Have Been Used.

#### Additional Information:

The division respectfully requests an exception to the way state sponsored credit cards are issued and paid in accordance with the attached internal controls, which will transfer liability from the employee to the State of Nevada and ensure that bills are sent directly to the agency rather than the employee.

## Statutory Authority:

NRS 353.040, SAM 0006, SAM 0224, and SAM 0226.

REVIEWED:	_
ACTION ITEM:	-01





# DEPARTMENT OF HEALTH AND HUMAN SERVICES

D'HH'S

Marla McDade Williams Administrator

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

# REQUEST EXCEPTION THROUGH SAM 0006

January 31, 2024

To:

Amy Stephensen, Director, Governor's Finance Office

Through:

Philene O'Keefe, Executive Branch Budget Officer

From:

Tiffany Greenameyer, Deputy Administrator, Division of Child and Family Services

Subject:

Request exception per SAM 0006 for SAM 0224 and 0226

The Division of Child and Family Services (the division, DCFS) requests an exception per SAM 0006 for SAM 0224 and 0226 to use Special Use State Liability Travel Cards in limited situations. Per SAM 0224 and SAM 0226, the payment of the credit card bill is the responsibility of the individual to whom the card is issued. The division requests an exception for the responsibility of payment, proposing the responsibility for payment of the Special Use State Liability Travel Cards be that of the agency and not the individual.

The proposed purpose of the cards is for emergency lodging for youth, and the division employee to which the youth is in temporary custody, within established usage limits to address life safety issues. Use of the card is designed to complement the use of emergency service authorizations that allow for emergency procurement of lodging when a suitable placement is not available or the cost of lodging for a short period of time would prevent the removal of children from the home.

With guidance from the Purchasing Division, the division drafted internal controls, codifying the policies and procedures associated with use of the cards, and developed associated authorization forms. Following the Purchasing Division's review of the finalized documents, these documents were then sent to the Governor's Finance Office, Division of Internal Audits for review. The division now seeks an exception per SAM 0006 to implement Special Use State Liability Travel Cards for the proposed purpose.



# Nevada Division of Child and Family Services Fiscal Unit Special Use State Liability Travel Cards

Created By:

D. Frohlich 12/15/23

## **General Purpose**

The purpose of the Special Use (SU) State Liability Travel Cards Program is to establish an efficient, cost-effective method of purchasing and paying for specific needs that cannot be accommodated using typical means of purchase. The primary use of the cards is for emergency lodging for youth, and the division employee to which the youth is in temporary custody, within established usage limits to address life safety issues. The program is designed to complement the use of emergency service authorizations that allow for emergency procurement of lodging when a suitable placement is not available or the cost of lodging for a short period of time would prevent the removal of children from the home.

All purchases are limited by this internal control. In lieu of a local Purchase Order, an Authorization Form must be completed in conjunction with use of this card. The SU State Liability Travel Cards Program is NOT intended to be used for airline or other travel expenses, entertainment, rentals, or other services. The division has obtained a copy of the state's Tax Exempt letter from the Department of Taxation, and a copy is issued to each cardholder.

Upon the division's decision to utilize SU State Liability Travel Cards, the PCA or delegate submitted the completed Special Use State Liability Travel Cards Internal Control to the Division of Internal Audits. This internal control is effective upon Internal Audit's approval, notification of the Purchasing Division, and notification of the division. Changes to this internal control must be submitted through the same process before going into effect.

### **Definitions**

- 1. The **Division of Child and Family Services (division)** is the division for which this internal control applies.
- 2. **Eligible youth** are defined as youth that have been taken into custody by division staff and the division does not have an appropriate placement for them.
- Emergencies are defined as youth facing imminent risk where it is not safe to remain in their homes. To determine an emergency, there must be no other option available for placement or any alternative actions possible to remove or sufficiently reduce the imminent risk.
- 4. Emergency lodging is defined as a hotel room or motel room.
- 5. Special Use (SU) State Liability Travel Cards and SU State Liability Travel Card Program (program) are credit cards issued to individuals for the express purpose of purchasing emergency lodging for eligible youth.

### **Definitions of Roles**

- 6. The Special Use (SU) State Liability Travel Card Manager is the equivalent of the Procurement Card Manager (PCM) and is located in the Purchasing Division, Department of Administration.
- 7. The Special Use (SU) State Liability Travel Card Point of Contact is equivalent to the Procurement Point of Contact (PPOC). The Administrative Services Officer III (PCN 0050) serves in this role, is the division contact for the Purchasing Division, and coordinates with the state's PCM for procurement card issues. The Administrative Services Deputy Administrator (PCN 0307) or delegate will notify the Purchasing Division when the PPOC changes.
- 8. The Special Use (SU) State Liability Travel Card Administrator is equivalent to the Procurement Card Administrator (PCA) and provides program oversight at the division level, ensures that the cardholder and division comply with the SU State Liability Travel Card Internal Controls, and coordinates program activities with the division's PPOC. The PCA determines the general criteria and purchase limits for cardholders, including both monthly cumulative (overall) credit limits and single transaction limits. The PCA is responsible for ensuring that the total number of cards in use by the agency is verified and reconciled, at least semi-annually, and reports retained for review purposes. The PCA will also ensure that the vendor and cardholder work to resolve any billing discrepancies and monitor the associated accounts regularly to ensure adequate funding levels. The PCA and PCA backups are prohibited from having a SU State Liability Travel Card. The Administrative Services Officer IV (PCN 0262) is the PCA with an Administrative Services Officer III serving as a backup in each program area (PCN 0124, PCN 0868, PCN 0024).
- 9. The Supervisor is the direct supervisor of the cardholder and serves as the division employee who first approves the legitimacy of purchases and exceptions made by the cardholder. See Appendix 1 for the current list of supervisors.
- 10. The Cardholder (also division employee, employee) is the division employee who is issued a SU State Liability Card and is authorized to use the card on behalf of the division. The cardholder is the employee to which the youth is in temporary custody during the

emergency. See Appendix 1 for the current list of approved cardholders. Cardholders are responsible for the following:

- a. Abide by all the conditions noted on the Cardholder Agreement Form.
- b. Comply with this internal control, all division purchasing and expenditure policies and procedures, as well as other relevant state regulations and statutes.
- c. Ensure that the card is not used by another individual.
- d. Ensure that no sales tax is charged on purchases when sales tax should not be charged.
- e. Ensure that purchases do not exceed assigned limits or budgeted amounts and that individual limits are not circumvented by splitting purchases.
- f. Upon checkout, verify that the charges reflect the actual purchases.
- g. Report any disputes or discrepancies to the PCA or PCA backups. Work with vendor, PCA/backups, and financial institution to resolve issues.
- h. Immediately report any unauthorized use of the card to the PCA/Supervisor.
- i. Report any lost or stolen cards to the issuing financial institution within 24 hours and to the PCA or Supervisor at the first opportunity during business hours.
- Return the card to the PCA upon termination of employment and/or transfer to a different position and/or agency.
- 11. The Approver is the Pend 3 in Advantage and the Accounting Assistant III (PCN 0323).
- 12. The Accountant is the Pend 4 in Advantage and the Accountant Tech II (PCN 0062).
- 13. Advantage is the system in which DCFS staff manually enter a payment voucher monthly for each SU State Liability Travel Card billing cycle statement.

### **Policies**

#### General

- 1. SU State Liability Travel Cards are to be used as a last resort when no alternative actions, placements, purchasing methods, or funding sources are available.
- 2. SU State Liability Travel Cards are established with the State of NV as the guarantor.
- 3. Emergencies are time limited and shall not typically exceed three (3) nights. In rare instances, additional nights may be authorized. In these situations, a Reauthorization Form shall be submitted and approved in advance of any purchase.
- 4. SU State Liability Travel Cards are issued to specific individuals for the sole purposes of purchasing hotel/motel rooms for eligible youth in need of emergency lodging and the division employee to which the youth is in temporary custody.
- 5. SU State Liability Travel Cards will be issued under the name of the cardholder with an "SU" designation (I.e. cardholder name: Jane Doe SU).
- 6. Fiscal staff who review SU State Liability Travel Card transactions are prohibited from having cards.
- 7. All allowable purchases, regardless of cost, must be preapproved using the Authorization Form and, if applicable, Reauthorization Form.
- 8. SU State Liability Travel Cards will be audited on a quarterly basis.

#### Fiscal

- 9. Funds can be accessed using SU State Liability Travel Cards in accordance with the following criteria: \$5,000.00 monthly limit per card and \$4,999.99 per emergency.
- 10. Each transaction will be assigned the GL Code 6203 by the Accounting Assistant III (PCN 0323.
- 11. Allowable costs to be charged to the SU State Liability Travel Cards are restricted to emergency lodging for the youth and division employee to which the youth is in temporary custody and coverage of demonstrable damages.
- 12. If a need is identified during the emergency, items allowable for purchase using a procurement card issued to the employee, such as hygiene products, must be charged to the procurement card and not to the SU State Liability Travel Card.
- 13. In alignment with the division's Reimbursement to Foster Parents for Property Damaged Caused by Foster Care Youth internal control, damages to emergency lodging caused by youth must be demonstrated by the cardholder submitting a Damage Incident Report with the following supporting materials:
  - a. A memorandum written by the cardholder identifying the youth that provides a brief description of the incident and damage.
  - b. A photograph of the damaged item clearly demonstrating the damage.
  - c. The receipt indicating the cost for the replacement or repair of such damage.
- 14. In alignment with SAM 0210, hotel/motel costs must fall within GSA rates, with limited exceptions. Exceptions will only be authorized when it has been demonstrated that no alternative lodging is reasonably available.
- 15. In alignment with SAM 0218, hotel bills noting the cardholder's name, date(s) of stay, and breakdown of costs by day are required for all lodging expenses. If lodging was paid for through a travel website, (Expedia, Travelocity, etc.) the travel website receipt shall accompany the hotel bill. In addition to the covered lodging rates, lodging taxes and fees may be covered, however lodging taxes are limited to the taxes on reimbursable lodging costs unless otherwise authorized.
- 16. In alignment with SAM 0220, state employees who purchase meals for youth in their custody are entitled to reimbursement for the actual cost of such meals, within the limits established for state employees. A receipt for each meal purchased must accompany claims for reimbursement.
- 17. In alignment with SAM 0218, employee meals will be reimbursed in accordance with the meals and incidental expense (M&IE) allowance for the primary destination. The hours and conditions to which employees are allowed to claim meals must align with the division's travel policy. Receipts are not required for the M&IE allowance; the employee must complete a Travel Expense Reimbursement Claim form and submit in accordance with the division's travel policy to receive reimbursement.
- 18. Additional charges that have not been articulated as allowable in this internal control and are incurred by the youth or employee while staying in emergency lodging are not authorized, are the responsibility of the employee, and will not be reimbursed. This includes, but is not limited to, internet services, telephone services, laundry services, and television services.

#### **Documentation**

- 19. In lieu of submitting a Travel Request, the employee will submit an Authorization Form to request lodging for the employee during the emergency.
- 20. Individuals issued the SU State Liability Travel Card are responsible for providing the following documents within the following timeframes:
  - a. Applicable Authorization Form, before purchase occurs
  - b. Reauthorization Form, before purchase occurs (if applicable)
  - c. All receipts, within 24 hours of checkout or next business day
  - d. Travel Reimbursement Form, in alignment with the division's travel policy (if applicable)
  - e. Damage Incident Report with all supporting materials, within 24 hours of notification of charges for damages or next business day (if applicable)
  - f. Post-emergency Internal Review Form, within two weeks of removal of youth from emergency lodging
- 21. Forms are public records and may be used to justify purchases in internal and external audits, federal reporting, legislative testimony, and related circumstances. As such, the forms must be filled out with enough detail to describe the situation and justify the purchase to an individual unfamiliar with the situation and regular divisional work. Forms with insufficient detail will not be approved.
- 22. Email, electronic, and wet-signature approvals of forms are acceptable.

## Misuse, Suspension, or Cancellation of Cards

- 23. Upon suspected or actual unauthorized use of a card, the process for reporting and/or self-reporting by cardholders is as follows: The cardholder must report lost or stolen SU State Liability Travel Cards to the issuing financial institution immediately (within 24 hours). The Cardholder must also report lost or stolen cards to the PCA or backup and their immediate supervisor at the first opportunity during business hours.
- 24. If abuse is suspected or actual unauthorized use of a SU State Liability Travel Card is detected, the PCA, cardholder or immediate supervisor (whoever detects the abuse) must immediately report the unauthorized activity to the issuing financial institution (within 24 hours). The suspected abuse must also be reported to the PCA or backup and their immediate supervisor at the first opportunity during business hours.
- 25. Upon determination of misuse of SU State Liability Travel Cards, dishonesty/withholding of facts during approval processes, and/or failure to follow policies and procedures in full and/or in a timely manner, cards may be suspended or cancelled, and disciplinary action shall be applied in accordance with the division's Personnel Policy and Procedure Manual. Examples of applicable Prohibitions and Penalties that may apply include, but are not limited to, 230.8.3.19-22 or 230.8.10.8.
- 26. Upon misuse of card, transfer of cardholder, or separation from state service:
  - a. Cards will be deactivated within three (3) business days upon the cardholder's transfer to a different position, agency, or termination from state service.
  - b. Cardholder accounts will be suspended until the end of the billing cycle and then, revoked or closed.
  - c. Cards will be retrieved and rendered unusable.

## **Authorization and Payment Procedures**

### Establishing a New Cardholder

- 1. When obtaining a SU State Liability Travel Cards, the PCA:
  - a. Determines adequate funding levels in associated accounts.
  - b. Completes and signs the Cardholder Agreement Form.
  - c. Ensures the cardholder reviews and signs the Cardholder Agreement Form. Signing the form attests the cardholder is aware of and will comply with the single transaction limit, monthly transaction limit, allowable costs, and associated internal controls.
  - d. Ensures that the Cardholder's Supervisor signs the Cardholder Agreement Form.
  - e. Maintains copies of the signed forms for both activated and inactivated agreements.
- 2. After receiving each SU State Liability Travel Card, the PCA will:
  - a. Verify the information on the card, including the cardholder's name, agency, and tax exemption number.
  - b. Deliver the card to the appropriate cardholder and verify that the card is subsequently signed on the back.
  - c. Reviews with the cardholder the proper use of the card, the consequences of unauthorized use, and provide updated training as needed.
  - d. Assign, update, and monitor the limits for each of the individual cardholders, as well as the specific merchant and vendor categories which are disallowed. This information, and any other applicable information, will be documented for each cardholder.

## Emergency Lodging

- 1. Once the cardholder has determined that an eligible youth requires emergency lodging, the cardholder will complete the applicable Authorization Form. The form will be completed in its entirety and will include information such as the need for the emergency procurement of lodging, how the procurement will alleviate imminent risk, why alternative funding sources are unavailable, what other attempts have been made to find alternative shelter, and plans for long-term solutions. The situation must meet the definition of an emergency and the youth and lodging must be determined eligible as outlined in this internal control to qualify for use of the SU State Liability Travel Card and associated funds.
- 2. Through this process, the PCA (Administrative Services Officer IV, PCN 0262) or delegate (Management Analyst IIIs, PCNs 0063, 0345, 0286, and 0518) will determine any budgetary constraints prior to authorizing purchases and notify cardholders of insufficient funds by denying the request for authorization.
- 3. Once the applicable Authorization Form is completed by the cardholder, the cardholder will route the form to their direct supervisor (see Appendix 1), applicable Rural Regional Manager (PCNs 0044, 0135), Child Welfare Deputy Administrator (PCN 0269), and

Revised 12/2023

- Administrative Services Deputy Administrator (PCN 0307) for signature approvals.
- 4. Once all approval signatures are obtained, the cardholder will route the completed form to the DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov)
- 5. Fiscal staff will process and file the Authorization Form. Processing these forms will be completed upon receipt of the form. The Authorization Forms will be denoted as "rush" items and fiscal staff will be trained accordingly.
  - a. Received by Accounting Assistant 2 (PCN 0148)
  - b. Approved by Management Analyst 3 (PCN 0063)
- 6. If the cardholder determines the need for emergency lodging will extend beyond the maximum authorized number of nights, the cardholder will fill out the Reauthorization Form, route to their direct supervisor, applicable Rural Regional Manager (PCNs 0044, 0135), Child Welfare Deputy Administrator (PCN 0269), Administrative Services Deputy Administrator (PCN 0307), and Administrator (PCN 0262) for signature, and submit the completed Reauthorization Form to DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov) as soon as the need is determined and prior to purchasing additional nights.
- 7. Within required timeframes, the cardholder will submit all receipts and, if applicable, Damage Incident Report(s) and/or Travel Reimbursement Form, to the DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov).
- 8. Within required timeframes, the cardholder will complete the Post-emergency Internal Review Form, obtain required signatures (see Appendix 1), and submit to DCFS Fiscal inbox (<a href="dcfsfiscal@dcfs.nv.gov">dcfsfiscal@dcfs.nv.gov</a>)
- 9. Accounting Assistant 2 (PCN 0148) will reconcile the submitted receipts and forms with the Authorization Form (and Reauthorization Form, if applicable) and file.
- 10. Monthly, and prior to monthly statement deadline, fiscal staff will pull billing statements for each card, reconcile, manually enter payment vouchers in Advantage, and make the authorized payments. Fiscal staff will follow existing processes for the Advantage system.
  - a. Accounting Assistant 3 (PCN 0323)- pull billing statement and pend 3 transaction
  - b. Accounting Assistant 3 (PCN 0062)- pend 4 transaction

Fiscal staff will reconcile transactions and receipts with the billing statement and inform the PCA of any discrepancies. Fiscal staff will ensure that the Approver (Pend 3) and Accountant (Pend 4) approvals are completed for each transaction. All transactions are reviewed to verify:

- c. No "splitting of transactions" occurred
- d. No transactions occurred with disallowed merchants or vendors
- e. Transactions were within approved limits, or appropriate documentation of exceeding limits exists
- f. Purchase is verified to be necessary
- g. Credits are appropriate and have the required vendor supporting backup documentation for justification

#### Special Use State Liability Travel Card Internal Control

- 11. Prior to payment, the billing statement will be signed off as approved for payment by the Administrative Services Officer III (PCN 0124), who will verify purchase documentation to billing statement. Billing statements will be paid in their entirety, with disputes/inappropriate charges resolved the subsequent months.
- 12. The following positions will review the below described transactions: Management Analyst II (PCNs 0337, 0414), Management Analyst III (PCNs 0063, 0345, 0286, and 0518), Accountant II (PCN 1104), Administrative Services Officer I (PCNs 0178, 0071, 0091), Administrative Services Officer II (PCN 0451), and the PCA (Administrative Services Officer IV, PCN 0262). SU State Liability Travel Card activity is reviewed via the Bank of America WORKS website, reports, and any related cardholder reconciliations at least once a month for appropriateness of purchases, accuracy, and to ensure that no sales taxes are paid on purchases. Above listed fiscal staff updates and monitors budget accounts to ensure purchases remain within available funding. At least monthly, fiscal staff will ensure that:
  - a. Card purchases received appropriate supervisor approvals.
  - b. Transactions have appropriate supporting documentation.
  - c. Purchases are not assessed sales tax.
- 13. Quarterly, the Management Analyst III (PCN 0063) will submit all associated paperwork to division audit staff (Management Analyst II, PCN 0337) for review. Upon completion of review, division audit staff will submit a report of findings to the Administrative Services Deputy Administrator (PCN 0307).



# Nevada Division of Child and Family Services Fiscal Unit Special Use State Liability Travel Cards Authorization Form

#### **General Information**

1	Request Date	
2	Requestor Name	
3	Cardholder Name & Last 4 Digits	
	of Card	
4	Name of Lodging Facility	
5	Address of Lodging Facility	
6	Youth Name	

## **Cost and Lodging Information**

7	Does the lodging meet the definition of an emergency lodging per the SU	□Yes
	State Liability Travel Card Policy?	□No
8	Amount Requested	
9	Number of nights requested	□1 □ 2 □ 3
10	Cost Estimate Supporting Documents Attached	□Yes
		□No
11	Are the costs in line with GSA rates?	□Yes
		□No
12	If no, describe why alternative emergency lodging in line with GSA rates is not be	eing used. Forms
	with insufficient detail will not be approved.	
13	If no, additional signature required to authorize:	
	Budget Account Manager Date	9
14	Were alternative, non-state funding sources explored?	□Yes
		□No
15	What alternative funding sources were explored? Why were these options not u	used? Describe in
	detail. Forms with insufficient detail will not be approved.	

# **Situation Information**

16	Does the youth meet the definition of eligible per the SU State Liability Tr Card Policy?	avel	∐Yes □No
17	Does the situation meet the definition of an emergency per the SU State Travel Card Policy?	Liability	□Yes □No
18	Describe the situation in detail. Forms may be used to justify purchases in audits, federal reporting, legislative testimony, and related circumstances must be filled out with enough detail to describe the situation and justify individual unfamiliar with the situation and regular divisional work. Forms will not be approved.	. As such, i the purcha	nd external the forms se to an
19	Will the use of an emergency lodging remove the youth from imminent ris		□Yes □No
20	Will the use of an emergency lodging prevent the removal of the youth from their guardian?	- 1	□Yes □No
21	Were all alternative actions and placement options exhausted?		□Yes □No
22	What alternative actions and placement options have been explored? Wh not used? Describe in detail. Forms with insufficient detail will not be appr	-	ese options
23	How many days total in the past rolling calendar year has the youth been emergency lodging?	placed in a	ın
24	Describe the long-term plan for placement beyond the emergency timefra Forms with insufficient detail will not be approved.	me? <i>Desci</i>	ribe in detail.
Autho	orization		
Supe	rvisor	Date	
Rura	l Regional Manager	Date	

Budget Account Manager	Date
Program Deputy Administrator	Date
Administrative Services Deputy Administrator	Date

#### **Instructions for Submitting the Authorization Form**

- 1. Once the social worker has determined that an eligible youth requires emergency lodging, the social worker will complete the Authorization Form.
- 2. Once the Authorization Form is completed by the social worker, the social worker will route the form to the appropriate parties for signature approvals.
- 3. Once all approval signatures are obtained, the social worker will route the completed form to the DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov)
- 4. The social worker will submit all receipts to the DCFS Fiscal inbox <a href="mailto:dcfs.nv.gov">dcfsfiscal@dcfs.nv.gov</a>) within 24 hours of using the SU State Liability Travel Card.
- 5. Additional instructions and guidance can be found in the Special Use State Liability Travel Card Internal Control.

#### Instructions for Completing the Authorization Form

- 1. Date of request.
- 2. Name of individual initiating the request.
- 3. Name of cardholder and the last four digits of the card number.
- 4. The name of the hotel/motel.
- 5. The address of the hotel/motel.
- 6. The name of the youth staying in the emergency lodging.
- 7. Emergency lodging is defined as a hotel room or motel room.
- 8. Dollar amount of request.
- 9. Estimated number of nights needed. Maximum number of nights allowed is three.
- 10. Quotes, booking, reservation, or related supporting documentation.
- 11. Refer to: <a href="https://www.gsa.gov/travel/plan-book/per-diem-rates?gsaredirect=portalcategory">https://www.gsa.gov/travel/plan-book/per-diem-rates?gsaredirect=portalcategory</a>
- 12. Skip this question if costs are in line with GSA rates.
- 13. Additional signature authorization is required if costs are not in line with GSA rates. Skip this question if costs are in line with GSA rates.
- 14. Alternative, non-state funding sources are entities other than the State of Nevada (including grants managed by the State of Nevada). Entities may include the youth's guardian, ...?
- 15. The SU State Liability Travel Card is a fund of last resort. All other funding sources must be considered and determined to be nonviable before use of the card can be authorized.

- 16. Eligible youth are defined as youth that have been taken into custody by division staff and the division does not have an appropriate placement for them.
- 17. Emergencies are defined as youth facing imminent risk where it is not safe to remain in their homes. To be determined an emergency, there must be no other options available for placement or any alternative actions possible to remove or sufficiently reduce the imminent risk.
- 18. Provide details about the situation that led to the conclusion the youth is in imminent risk. What data was gathered, details observed, or other supporting information discovered? Forms may be used to justify purchases in internal and external audits, federal reporting, legislative testimony, and related circumstances. As such, include enough detail to describe the situation and justify the purchase to an individual unfamiliar with the situation and regular divisional work.
- 19. The action of procuring the emergency lodging must solve the problem of the youth being in imminent risk, and/or
- 20. The action of procuring the emergency lodging may also solve the problem of the youth being removed from their guardian.
- 21. Placing youth in emergency lodging using the SU State Liability Travel Card is an action of last resort. All other actions and placement options must be considered and determined to be nonviable before use of the card can be authorized.
- 22. Describe the alternative actions and placement options that were considered and explain why these options were determined to be nonviable.
- 23. State the total number of days the youth has been in any emergency placement counting back 365 days from the day of this authorization request.
- 24. Placing youth in emergency lodging is intended to be a short term solution to address the immediate risk and allow additional time for longer term solutions to be put in place. Describe the long-term plans that will be explored to demonstrate thoughtful problem-solving beyond the immediate quick fix. Also describe how the placement in emergency lodging will help support the achievement of the long-term plan.



# Nevada Division of Child and Family Services Fiscal Unit Special Use State Liability Travel Cards Reauthorization Form

#### **General Information**

1	Request Date	
2	Requestor Name	
3	Cardholder Name & Last 4 Digits	
	of Card	
4	Name of Lodging Facility	
5	Address of Lodging Facility	
6	Youth Name	

# **Cost and Lodging Information**

7	Does the lodging meet the definition of an emergency lodging per the SU	□Yes
	State Liability Travel Card Policy?	□No
8	Amount Requested	
9	Number of nights requested	□1 □ 2 □3
10	Cost Estimate Supporting Documents Attached	□Yes
	37	□No
11	Are the costs in line with GSA rates?	□Yes
		□No
12	If no, describe why alternative emergency lodging in line with GSA rates is not be	peing used. Forms
	with insufficient detail will not be approved.	
13	If no, additional signature required to authorize:	
	Budget Account Manager Date	e
14	Were alternative, non-state funding sources explored?	□Yes
		□No
15	What alternative funding sources were explored? Why were these options not u	used? Describe in
	detail. Forms with insufficient detail will not be approved.	

# **Situation Information**

Budget Account Manager

16	Select the option that best describes the situation:		
	Continuation of an initial authorization		
	Continuation of a reauthorization		
17	How many times has the initial authorization already been reauthorized?	?	
18	How many continuous days has the youth been in the emergency lodging	g?	
19	How many days total in the past rolling calendar year has the youth beer emergency lodging?	placed in	an
20	Were all alternative actions and placement options exhausted?		□Yes □No
21	Why does emergency placement continue to be the most viable option? Forms with insufficient detail will not be approved.	Describe i	n detail.
22	Describe the long-term plan for placement beyond the emergency timefr not been enacted? Describe in detail. Forms with insufficient detail will no		
23	When can it be reasonably anticipated the need for emergency lodging work long-term placement enacted? <i>Describe in detail. Forms with insufficient approved.</i>		•
Addit	ional Attachments		1
24	Is the original Authorization Form attached to this request?		□Yes □No
25	Are all prior Reauthorization Forms attached to this request?		□Yes □No □N/A
lutho	prization		12
Supe	rvisor	Date	
Rural	Regional Manager	Date	

Date

Program Deputy Administrator	Date
Administrative Services Deputy Administrator	Date
Administrator	Date

#### **Instructions for Submitting the Authorization Form**

- If the social worker determines the need for emergency lodging will extend beyond the
  maximum authorized number of nights, the social worker will fill out the Reauthorization Form,
  route to the appropriate parties for signature, and submit the completed Reauthorization Form
  to DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov) as soon as the need is determined and prior to
  purchasing additional nights.
- 2. The social worker will submit all receipts to the DCFS Fiscal inbox <a href="mailto:dcfs.nv.gov">dcfsfiscal@dcfs.nv.gov</a>) within 24 hours of using the SU State Liability Travel Card.
- 3. Additional instructions and guidance can be found in the Special Use State Liability Travel Card Internal Control.

#### **Instructions for Completing the Authorization Form**

- 1. Date of request.
- 2. Name of individual initiating the request.
- 3. Name of cardholder and the last four digits of the card number.
- 4. The name of the hotel/motel.
- 5. The address of the hotel/motel.
- 6. The name of the youth staying in the emergency lodging.
- 7. Emergency lodging is defined as a hotel room or motel room.
- 8. Dollar amount of request.
- 9. Estimated number of nights needed. Maximum number of nights allowed is three.
- 10. Quotes, booking, reservation, or related supporting documentation.
- 11. Refer to: https://www.gsa.gov/travel/plan-book/per-diem-rates?gsaredirect=portalcategory
- 12. Skip this question if costs are in line with GSA rates.
- 13. Additional signature authorization is required if costs are not in line with GSA rates. Skip this question if costs are in line with GSA rates.
- 14. Alternative, non-state funding sources are entities other than the State of Nevada (including grants managed by the State of Nevada). Entities may include the youth's guardian, ...?
- 15. The SU State Liability Travel Card is a fund of last resort. All other funding sources must be considered and determined to be nonviable before use of the card can be authorized.
- 16. Select the first option if the initial request is the only request thus far. Select the second option if one or more prior reauthorization forms have been submitted and approved.

- 17. State the number of times the placement in the emergency lodging has been reauthorized. The answer is equivalent to the number of Reauthorization Forms already submitted and approved, not including the current form being submitted at this time.
- 18. State the total number of days the youth has been in the emergency placement since the start of this particular placement.
- 19. State the total number of days the youth has been in any emergency placement counting back 365 days from the day of this reauthorization request.
- 20. Placing youth in emergency lodging using the SU State Liability Travel Card is an action of last resort. All other actions and placement options must be considered and determined to be nonviable before use of the card can be authorized.
- 21. Describe the alternative actions and placement options that were considered and explain why these options were determined to be nonviable and why emergency placement remains the best option.
- 22. Placing youth in emergency lodging is intended to be a short term solution to address the immediate risk and allow additional time for longer term solutions to be put in place. Describe the long-term plans that will be explored to demonstrate thoughtful problem-solving beyond the immediate quick fix. Describe why these plans have not yet been enacted and how extending the placement in emergency lodging will support the achievement of the long-term plan.
- 23. Provide an estimated timeframe for when the youth will no longer be in emergency lodging.
- 24. Attach the original Authorization Form.
- 25. Attach all previously approved Reauthorization Forms.



# Nevada Division of Child and Family Services Fiscal Unit Special Use State Liability Travel Cards Post-Emergency Internal Review Form

#### **General Information**

1	Original Request Date	
2	Requestor Name	
3	Cardholder Name & Last 4 Digits	
	of Card	
4	Name of Lodging Facility	
5	Address of Lodging Facility	
6	Youth Name	

#### **Cost and Lodging Information**

7	Number of nights originally requested?
8	Number of nights needed total?
9	Number of reauthorizations?
10	Total cost estimate
11	Total cost

#### **Situation Information**

12	How many days total in the past rolling calendar year has the youth been placed in an emergency lodging?
13	Did placing the youth in an emergency lodging adequately address the immediate issue(s) of removing the youth from imminent risk and/or preventing the removal of the youth from their guardian? Why or why not?
14	Now that the emergency has passed and you have more time and hindsight to consider the situation, is there anything that could have been done differently to avoid using emergency lodging? It is okay to respond "yes." The goal of this question is for the division to gain knowledge from your experience to improve training, resources, and support.
15	Did placing the youth in an emergency lodging facilitate the implementation of a longer-term solution? Why or why not?

16	What barriers did you encounter to implementing a longer-term solution	on?	
17	Which barriers were you able to remove, and how were you able to ach	nieve this?	
18	Which barriers remain, and what would need to happen to remove or r the future?	educe thes	e barriers ir
19	What resources do you need or actions can you take now to reduce the needing emergency lodging in the future?	likelihood	of the yout
20	Do you have any other feedback to share?		
ddi	Do you have any other feedback to share?  tional Attachments  Is the original Authorization Form attached to this document?		□Yes
	tional Attachments		□No □Yes □No
.ddi 221 222	tional Attachments  Is the original Authorization Form attached to this document?		□No □Yes
221 222 uth	tional Attachments  Is the original Authorization Form attached to this document?  Are all Reauthorization Forms attached to this document?	Date	□No □Yes □No

#### Instructions for Submitting the Post-emergency Internal Review Form

Within two weeks of the removal of the youth from the emergency lodging, the social worker will complete the Post-emergency Internal Review Form, obtain required signatures, and submit to the DCFS Fiscal inbox (dcfsfiscal@dcfs.nv.gov)

Additional instructions and guidance can be found in the Special Use State Liability Travel Card Internal Control.

#### **Instructions for Completing the Authorization Form**

- 1. Date of request.
- 2. Name of individual initiating the request.
- 3. Name of cardholder and the last four digits of the card number.
- 4. The name of the hotel/motel.
- 5. The address of the hotel/motel.
- 6. The name of the youth staying in the emergency lodging.
- 7. State the number of nights requested in the original Authorization Form.
- 8. State the total number of nights the youth stayed in the emergency lodging.
- 9. State the number of Reauthorization Forms submitted.
- 10. State the total cost estimates included in the Authorization Form and any subsequent Reauthorization Forms (based on quotes, booking, reservation, or related supporting documentation).
- 11. State the total cost charged to the card.
- 12. State the total number of days the youth has been in any emergency placement counting back 365 days from the day of this reauthorization request.
- 13. The goal of this question is to gather information on emergency lodging to determine if and provide support that emergency lodging is an effective solution.
- 14. Emergency situations often leave little time for thoughtful consideration and all of the data needed to make informed decisions isn't always available until after the emergency has been resolved. Looking back on the situation, would you do anything differently? The data this response provides can help the division improve training, resources, and support.
- 15. The goal of this question is to gather information on emergency lodging to determine if and provide support that emergency lodging is an effective solution and supports the implementation of long-term plans.
- 16. The data provided in this response will help the division determine what additional actions or resources may be needed in this situation and in other situations.
- 17. The data provided in this response will help the division determine what additional actions or resources may be needed in this situation and in other situations.
- 18. The data provided in this response will help the division determine what additional actions or resources may be needed in this situation and in other situations.
- 19. The data provided in this response will help the division determine what additional actions or resources may be needed in this situation and in other situations.

# 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 encouraging continuity of service for eligible personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Office of Finance in the Office of the Governor, 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, or agency request for an allocation from the General Fund and/or Highway Fund salary adjustment account(s) are recommended by the Director of the Office of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2977	NSHE - Special Projects	\$975
2980	University of Nevada, Reno	\$305,943
2982	UNR School of Medicine	\$46,004
2983	Intercollegiate Athletics - UNR	\$300
2985	Statewide Programs - UNR	\$6,599
2986	NSHE System Administration	\$6,532
2987	University of Nevada, Las Vegas	\$462,263
2988	Intercollegiate Athletics - UNLV	\$5,671
2989	Agricultural Experiment Station - UNR	\$3,309
2990	Cooperative Extension Service	\$16,572
2991	System Computing Center	\$27,462
2992	UNLV Law School	\$17,028
2994	Great Basin College	\$18,666
2996	University Press	\$450
3001	Statewide Programs – UNLV	\$2,603
3002	UNLV Dental School	\$14,571
3003	Business Center North	\$3,970
3004	Business Center South	\$2,470
3005	Nevada State University	\$22,964
3010	Desert Research Institute	\$10,645
3011	College of Southern Nevada	\$246,494
3012	Western Nevada College	\$24,541
3014	UNLV School of Medicine	\$12,363
3018	Truckee Meadows Community College	\$74,193
3221	Health Laboratory and Research	\$5,423
	Total	\$1,338,011

## **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

February 7, 2024

#### **MEMORANDUM**

To: Venus Fajota, Executive Budget Officer

Michael Rankin, Executive Budget Officer David Lenzner, Executive Budget Officer Governor's Finance Office, Budget Division

From: Robin Hager, Budget Director, NSHE

Subject: Request for Longevity Funds (FY 2024)

NSHE requests the first payment of longevity funds totaling \$1,338,011 for FY 2024. Attached is a summary document identifying the actual longevity payments by account, and the amount requested for each eligible budget account.

NSHE will request reimbursement for the second FY 2024 longevity payment in June after the payment has been made. The final request for FY 2024 will not exceed the amount allocated per Assembly Bill 522 from the 2023 Legislative Session.

If you have any questions regarding this request, please let me know.

# **FY24 LONGEVITY WORK PROGAM SUMMARY**

BA	TOTAL 1ST PMT	WP AUTHORITY
3011	246,494	482,390
3010	10,645	20,832
2994	18,666	36,530
3005	22,964	44,940
2977	975	1,908
2991	27,462	53,743
3018	74,193	145,195
3012	24,541	48,026
2986	6,532	12,783
2980	305,943	598,730
2982	46,004	90,030
2983	300	587
2985	6,599	12,915
2989	3,309	6,477
2990	16,572	32,431
2996	450	881
3003	3,970	7,769
3221	5,423	10,613
2987	462,263	904,735
2988	5,671	11,098
2992	17,028	33,324
3001	2,603	5,094
3002	14,571	28,516
3004	2,470	4,834
3014	12,363	24,195
TOTAL	1,338,011	2,618,574
	•	-

Amount allocated per AB 522

\$ 2,618,574

#### **FY24 NSHE LONGEVITY ACTUAL EXPENDITURES**

		4	Actual Amount	Amount Allowed	
Company	Ledger Account		Paid	to be Reimbursed	BA
College of Southern Nevada	5045:Faculty Other Compensation	\$	2,100.00	\$ 500.00	3011
College of Southern Nevada	5045:Faculty Other Compensation	\$	450.00	\$ -	3011
College of Southern Nevada	5045:Faculty Other Compensation	\$	1,697.00	\$ 500.00	3011
College of Southern Nevada	5540:Classified Other Compensation	\$	731.00	\$ 251.00	3011
College of Southern Nevada	5045:Faculty Other Compensation	\$	4,745.62	\$ 100.00	3011
College of Southern Nevada	5540:Classified Other Compensation	\$	4,952.72		3011
College of Southern Nevada	5045:Faculty Other Compensation	\$	199,234.41	\$ 199,234.41	3011
College of Southern Nevada	5540:Classified Other Compensation	\$	45,325.03	\$ 45,325.03	3011
Desert Research Institute	5045:Faculty Other Compensation	\$	500.00	\$ -	
Desert Research Institute	5045:Faculty Other Compensation	\$	26,871.17	\$ -	
Desert Research Institute	5620:Technologist Other Compensation	\$	2,013.70		2010
Desert Research Institute	5045:Faculty Other Compensation	\$	6,388.39		3010
Desert Research Institute	5620:Technologist Other Compensation	\$	4,256.22		3010
Great Basin College	5045:Faculty Other Compensation	\$	142.50		
Great Basin College	5540:Classified Other Compensation	\$	825.00 849.89		
Great Basin College Great Basin College	5045:Faculty Other Compensation 5045:Faculty Other Compensation	\$ \$	62.50	•	
Great Basin College			131.08		_
Great Basin College	5540:Classified Other Compensation 5045:Faculty Other Compensation	\$ \$	15,083.89	\$ 15,083.89	2994
Great Basin College	5540:Classified Other Compensation	\$	3,582.40		2994
Nevada State University	5045:Faculty Other Compensation	\$	100.00	\$ 3,362.40	2994
Nevada State University	5045:Faculty Other Compensation	\$		\$	
Nevada State University	5540:Classified Other Compensation	\$		\$	
Nevada State University	5045:Faculty Other Compensation	\$		\$	
Nevada State University	5045:Faculty Other Compensation	\$		\$ 18,453.09	3005
Nevada State University	5540:Classified Other Compensation	\$		\$ 4,510.65	3005
System Administration	5045:Faculty Other Compensation	\$		\$ 250.00	2977
System Administration	5045:Faculty Other Compensation	\$		\$ -	2977
System Administration	5045:Faculty Other Compensation	\$	34,633.54	\$ 34,633.54	Multiple
System Administration	5540:Classified Other Compensation	\$	85.65	\$ 85.65	2991
Truckee Meadows Community College	5540:Classified Other Compensation	\$	1,710.00	\$ -	
Truckee Meadows Community College	5045:Faculty Other Compensation	\$	42.82	\$	
Truckee Meadows Community College	5540:Classified Other Compensation	\$	406.96	\$ -	
Truckee Meadows Community College	5045:Faculty Other Compensation	\$	171.31	\$ -	
Truckee Meadows Community College	5045:Faculty Other Compensation	\$	1,904.45	\$ -	
Truckee Meadows Community College	5540:Classified Other Compensation	\$	200.00	\$	
Truckee Meadows Community College	5045:Faculty Other Compensation	\$	932.29	\$	
Truckee Meadows Community College	5540:Classified Other Compensation	\$		\$ -	
Truckee Meadows Community College	5045:Faculty Other Compensation	\$		\$ 56,922.64	3018
Truckee Meadows Community College	5540:Classified Other Compensation	\$	17,269.96		3018
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$	100.00		
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$		\$ -	1010
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$		\$ -	
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$		\$	البخيران
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$		\$ -	
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$		\$	
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$		\$ -	
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$	-	\$ -	
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$	-	\$	
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$	-	\$ -	
University of Nevada, Las Vegas	5045: Faculty Other Compensation	\$	-	\$	
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$		\$ -	h.A., lat., 1-
University of Nevada, Las Vegas	5045:Faculty Other Compensation	\$		\$ 434,278.98	Multiple
University of Nevada, Las Vegas	5540:Classified Other Compensation	\$	-	\$ 82,690.30	Multiple
University of Nevada, Reno	5045:Faculty Other Compensation	\$	_	\$ -	
University of Nevada, Reno	5045:Faculty Other Compensation	\$		\$ -	
University of Nevada, Reno	5540:Classified Other Compensation	\$		\$	
University of Nevada, Reno	5045:Faculty Other Compensation	\$	5,256.99	a e	

University of Nevada, Reno	5540:Classified Other Compensation	\$ 1,605.39	\$	
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 3,605.57	\$	
University of Nevada, Reno	5540:Classified Other Compensation	\$ 1,143.31	\$ TOTAL	
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 37,893.45	\$	
University of Nevada, Reno	5540:Classified Other Compensation	\$ 12,296.03	\$	
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 4,727.08	\$	
University of Nevada, Reno	5540: Classified Other Compensation	\$ 10,297.40	\$ 	
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 28,676.62	\$ 28,676.62	Multiple
University of Nevada, Reno	5540:Classified Other Compensation	\$ 13,101.33	\$ 11,083.68	Multiple
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 981.80	\$ 981.80	2990
University of Nevada, Reno	5540:Classified Other Compensation	\$ 1,243.47	\$ 1,243.47	2990
University of Nevada, Reno	5045:Faculty Other Compensation	\$ 282,644.23	\$ 282,644.23	Multiple
University of Nevada, Reno	5540:Classified Other Compensation	\$ 63,940.35	\$ 63,940.35	Multiple
Western Nevada College	5045:Faculty Other Compensation	\$ 250.00	\$	
Western Nevada College	5540:Classified Other Compensation	\$ 1,020.77	\$	
Western Nevada College	5045:Faculty Other Compensation	\$ 107.07	\$	
Western Nevada College	5045:Faculty Other Compensation	\$ 442.78	\$	
Western Nevada College	5045:Faculty Other Compensation	\$ 636.98	\$ 747	
Western Nevada College	5045:Faculty Other Compensation	\$ 20,437.75	\$20,437.75	3012
Western Nevada College	5540:Classified Other Compensation	\$ 4,102.84	\$4,102.84	3012
Grand Total		\$ 1,626,760.23	\$ 1,338,010.89	

Amount allocated per AB 522

\$ 2,618,574

WP Number: <sup>24CS2977</sup>

FY 2024

	Add Original	Work Program		XXX	Modify Work	Program	ı	DATE_	T DIVISION USE ON	
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME				VERNOR BY	
02/07/24	101				IAL PROJEC					
				Fund	ds Available					
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Description	n	WP Amo	unt	Current Authority	Revised Authority
				4601	GENERAL F ADJUSTMEN	UND SALARY NT		1,908		0 1,908
Sub	total Budgetary	General Ledgers	0	4		eneral Ledgers(RB)		,908		1,908
	Exp	enditures		Total Budge	etary & Revenu	ue GLs	1	,908		
CAT	Amount	CAT	Amount	]	R	emarks				
10	1,908			-	Ti ac th er	his work program r djustment revenue e 82nd Legislative mployees of the Ne	equests the authority p Session fo vada Syste	e ado oursua or long em o	lition of Gener ant to AB 522 gevity paymen f Higher Educa	al Fund salary section 36 of its for ation (NSHE).
				-						
Sub Total Ca Expenditures	tegory		1,908							
	tary General Lec penditures (AP)	lgers and	1,908	]			kephart			_
						Autho	rized Signa	ature		
					8-		02/07/24			-
							Date			
					· ·	Controlle	r's Office A	ppro	val	-

FY 2024

WP Number: <sup>24CS2980</sup>

<b>DATE FUND</b> 02/07/24 101		gram	XXX	lodify Work Program	DATE_	ET DIVISION USE ONL	Y
	AGENC	Y BUDGET	DEPT/DIV/BU	DGET NAME	THE G	OVERNOR BY	
	350	2980		RSITY OF NEVADA, RENO			
			Fund	s Available			
Budgetary Descr GLs (2501 - 2599)	otion	WP Amou	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
			4601	GENERAL FUND SALARY ADJUSTMENT	598,730	185,181	783,911
Subtotal Bu	getary General Lec	dgers	0 Subtota	il Revenue General Ledgers(RB)	598,730		783,911
	Expenditures		Total Budgel	ary & Revenue GLs	598,730	•S	
CAT Amour		Amount		Remarks			
Sub Total Category Expenditures	8,730		730	This work program is adjustment revenue the 82nd Legislative employees of the No	requests the ad authority pursu Session for lor evada System o	dition of Genera ant to AB 522 s gevity payment of Higher Educat	I Fund salary ection 36 of s for ion (NSHE).
	ral Ledgers and		720		kephart		
Total Budgetary Gen Category Expenditur	s (AP)	598,	130	Autho	orized Signature	)	
Total Budgetary Gen Category Expenditur	s (AP)	598,	730	Autho		3	

Controller's Office Approval

Add Original Work Program

XXX

Modify Work Program

BUDGET DIVISION USE ONLY
DATE\_\_\_\_\_
APPROVED ON BEHALF OF

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME	THE GOVERNOR BY
02/07/24	101	350	2982	NSHE - UNR SCHOOL OF MEDICINE	

WP Number: <sup>24CS2982</sup>

#### **Funds Available**

Budgetary GLs (2501 - 2599)	Description	WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
			4601	GENERAL FUND SALARY ADJUSTMENT	90,030	0	90,030
Subt	total Budgetary General Ledgers	0	N. 11	I Revenue General Ledgers(RB)	90,030		90,030

Total Budgetary & Revenue GLs

90,030

Expenditures

CAT	Amount	CAT	Amount
10	90,030		
Sub Total	Category ires		9

Rei	ma	rks
-----	----	-----

This work program requests the addition of General Fund salary adjustment revenue authority pursuant to AB 522 section 36 of the 82nd Legislative Session for longevity payments for employees of the Nevada System of Higher Education (NSHE).

otal Budgetary General Ledgers and	d
Category Expenditures (AP)	

	90	n:	RO

kephart

Authorized Signature

**02/07/24**Date

Controller's Office Approval

Does not require Interim Finance approval since Pursuant to AB 522 Section 36 of the 82nd Legislative Session

FY 2024

WP Number: 24CS2983 FY 2024

	Add Original Work Program  DATE FUND AGENCY BUDGE				Modify Work Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME	т Т	HE GOV	VERNOR BY	
02/07/24	101	350			COLLEGIATE ATHLETICS - L	INR -			
D 1	In		hara	Fund	s Available	lum a	. 1		
Budgetary GLs (2501 - 2599)	Description		WP Amount	GLs (3000 - 4999)	Description	WP Amou		Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT		587	0	587
Subt	total Budgetary	General Ledgers	0	Subtota	I Revenue General Ledgers(RB)		587		587
	_			Total Budget	tary & Revenue GLs		587		
CAT	Expe Amount	enditures CAT	Amount	1	Remarks				
10	587				This work program r adjustment revenue the 82nd Legislative employees of the Ne	authority pa	ursua r Iono	nt to AB 522 so	ection 36 of
Sub Total Cat Expenditures	egory		587						
Total Budget Category Exp	ary General Led penditures (AP)	gers and	587		·	kephart			
						rized Signa	ature		
						<b>02/07/24</b> Date			
					Controlle	r's Office A	pprov	ral	

WP Number: 24CS2985 FY 2024

Controller's Office Approval

	Add Original \	Work Prograr	n [	XXX	Modify Work Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME		THE GO	OVERNOR BY	
02/08/24	101	350	2985 N	ISHE - STATI	EWIDE PROGRAMS - UNR				
				Fund	ls Available				
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amo	unt	Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT	12,91		0	12,915
Subt	otal Budgetary G	Seneral Ledger:	s(		il Revenue General Ledgers(RB) tary & Revenue GLs		2,915 2,915		12,915
CAT	Expe	nditures CAT	Amount	7	Remarks				
Sub Total Cat Expenditures  Total Budgets Category Exp	egory  ary General Ledgenditures (AP)	ers and	12,915	1	This work program is adjustment revenue the 82nd Legislative employees of the No	authority p	or longer of the control of the cont	ant to AB 522 segentity payments	ection 36 of
					Addito	02/08/24	aturo		
						Date			

WP Number: 24CS2986 FY 2024 Add Original Work Program BUDGET DIVISION USE ONLY XXX Modify Work Program DATE APPROVED ON BEHALF OF THE GOVERNOR BY DATE FUND **AGENCY** BUDGET DEPT/DIV/BUDGET NAME 02/08/24 101 350 2986 NSHE - SYSTEM ADMINISTRATION **Funds Available** Budgetary GLs (2501 - 2599) Description WP Amount Revenue **WP Amount** Description Current Revised GLs (3000 - 4999) Authority Authority 4601 GENERAL FUND SALARY 12,783 0 12,783 ADJUSTMENT Subtotal Budgetary General Ledgers ol Subtotal Revenue General Ledgers(RB) 12,783 12,783 **Total Budgetary & Revenue GLs** 12,783 **Expenditures** CAT Amount CAT Amount Remarks 10 12,783 This work program requests the addition of General Fund salary adjustment revenue authority pursuant to AB 522 section 36 of the 82nd Legislative Session for longevity payments for employees of the Nevada System of Higher Education (NSHE).

Total Budgetary General Ledgers and Category Expenditures (AP) 12,783	kephart
	Authorized Signature
	02/08/24
	Date
	Controller's Office Approval

Controller's Office Approva

Does not require Interim Finance approval since Pursuant to AB 522 Section 36 of the 82nd Legislative Session

12,783

Sub Total Category

Expenditures

WP Number: 24CS2987

FY 2024

	Add Original	Work Progran	n [	XXX	Modify Work Program	DATE_	T DIVISION USE ONL	Y
DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BU	DGET NAME	THE GO	OVERNOR BY	
02/08/24	101	350			ERSITY OF NEVADA, LAS VE	GAS		
				Fund	ls Available			
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT	904,735	240,260	1,144,995
Sub	total Budgetary (	General Ledgers	s	0 Subtota	 al Revenue General Ledgers(RB	904,735		1,144,995
			.11		tary & Revenue GLs	904,735	•	
CAT	Expe Amount	enditures CAT	Amount	_	Remarks			
10	904,735	CAI	Amount		This work program	requests the add	dition of Genera	l Fund salary
					adjustment revenue the 82nd Legislativ employees of the N	e authority pursu e Session for Ion	ant to AB 522 s gevity payment	ection 36 of s
				-	employees of the N	levada System o	f Higher Éducat	ion (NSHE).
			1	-				
			+	$\dashv$				
				-				
Sub Total Cat Expenditures	tegory		904,73	<u></u> 35				
Total Budget	ary General Led	gers and	00.4.76			La Williams		
Category Exp	penditures (AP)		904,73	55]	Auth	kephart orized Signature		
						Ü		
					÷	02/08/24		
						Date		
					Controll	er's Office Appro	wal	

WP Number: <sup>24CS2988</sup>

FY 2024

	Add Original Work Program			XXX	odify Wo	ork Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF			
DATE	FUND	AGENCY	BUDGET	DI	EPT/DIV/BU	DGET NA	ME		THE GO	OVERNOR BY	
02/08/24	101	350	2988	N	SHE - INTER	COLLEG	IATE ATHLETICS - U	JNLV			<del>- 4</del> 1
Budgetary GLs (2501	/ Description		WP Amou	nt	Fund Revenue GLs (3000	s Availak		WP Amo	ount	Current Authority	Revised Authority
- 2599)											
					4601	GENERA ADJUSTN	L FUND SALARY MENT	1	11,098	0	11,098
			-					-			
Sub	total Budgetary (	General Ledger	s	0	Subtota Total Budget		General Ledgers(RB)		1,098 1,098		11,098
<b>CAT</b> 10	Expe Amount 11,098	enditures CAT	Amount		]		Remarks This work program i	equests th	ne ado	lition of Genera	l Fund salary
							adjustment revenue the 82nd Legislative employees of the No	authority	pursua	ant to AB 522 s	ection 36 of
			_								
Sub Total Ca Expenditures	tegory		11,	098	:						
Total Budge Category Ex	tary General Ledç penditures (AP)	gers and	11,	098	is			kephart			
							Autho	rized Sigr	nature		
								02/08/24			
								Date			
							Controlle	r's Office	Appro	val	

WP Number: <sup>24CS2989</sup> FY 2024

	Add Original	Work Program		XXX	lodify Work Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME		THE GO	VERNOR BY	
02/08/24	101	350	2989 N	SHE - AGRIC	CULTURAL EXPERIMENT STA	NOITA			
	I		l		s Available				
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amo	unt	Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT		6,477	0	6,477
Subt	total Budgetary (	General Ledgers	0		al Revenue General Ledgers(RB) tary & Revenue GLs		6,477 6,477		6,477
	Ехре	nditures		-			-1	21	
CAT 10	Amount 6,477	CAT	Amount		Remarks This work program r	equests th	e ado	lition of General	Fund salary
				-	adjustment revenue the 82nd Legislative employees of the Ne	Session for	or lon-	gevity payments	s for
				]					
Sub Total Cat Expenditures	egory		6,477	•					
Total Budget Category Exp	ary General Ledg enditures (AP)	gers and	6,477	]		kephart			
					Autho	rized Sign	ature		
					:	<b>02/08/24</b> Date			
					Controlle	er's Office A	Appro	val	

WP Number: <sup>24CS2990</sup>

FY 2024

Add Original Work Program			XXX	Modify Wor	k Program	D	BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF			
DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BU	DGET NAM	1E	Т	HE GO	VERNOR BY	
02/08/24	101	350	2990	NSHE - COOF	PERATIVE E	EXTENSION SERVI	ICE			
Budgetary GLs (2501	Description		WP Amoun		ds Available Description		WP Amou		Current Authority	Revised Authority
- 2599)	-			- 4999)	CENEDAL	ELINID OAL ADV		_		
				4601	ADJUSTME	FUND SALARY ENT	32	,431	0	32,431
					1					
					<del> </del>			$\dashv$		
	-							-		
Sub	total Budgetary	General Ledger	rs	0 Subtota Total Budge		General Ledgers(RB)		,431 ,431		32,431
CAT	Expe Amount	enditures	JA	$\neg$		2				
10	32,431	CAT	Amount		-	Remarks This work program r adjustment revenue he 82nd Legislative employees of the Ne	authority or	irsua	ent to AB 522 s	ection 36 of
				$\exists$						
				$\dashv$						
Sub Total Ca Expenditures	tegory		32,4	31	L					
Total Budget Category Ex	ary General Led penditures (AP)	lgers and	32,4	31	_	Autho	<b>kephart</b> rized Signa	ture		
							02/08/24			
					_		<b>02/08/24</b> Date			
					-	Controlle	r's Office Ap	oprov	/al	

WP Number: <sup>24CS2991</sup>

FY 2024

Add Original Work Program			XXX	Modify Wo	rk Program	DATE_	BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BU	DGET NA	ME		OVERNOR BY	
02/08/24	101	350	2991			UTING CENTER			
Budgetary	Description		WP Amou		Is Availab		WP Amount	Current	Revised
GLs (2501 - 2599)	Description		W Allou	GLs (3000 - 4999)	GLs (3000		WF Amount	Authority	Authority
				4601	GENERAL ADJUSTM	FUND SALARY ENT	53,743	0	53,743
Sub	total Budgetary	General Ledger	s			General Ledgers(RB)			53,743
		enditures		Total Budge	tary & Reve		53,743		
10	53,743	CAT	Amount			Remarks This work program r adjustment revenue the 82nd Legislative employees of the Ne	equests the ad- authority pursu Session for lor evada System o	dition of Genera lant to AB 522 s lagevity payment of Higher Educat	I Fund salary ection 36 of s for ion (NSHE).
Sub Total Ca Expenditures	tegory		53,	<u>743</u>	ļ				
Total Budget Category Exp	ary General Led penditures (AP)	gers and	53,7	743		Autho	<b>kephart</b> rized Signature	<b>;</b>	
							<b>02/08/24</b> Date		
					2	Controlle	r's Office Appro	oval	

FY 2024

WP Number: <sup>24CS2992</sup>

Add Original Work Program

XXX Modify Work Program

BUDGET DIVISION USE ONLY
DATE
APPROVED ON BEHALF OF
THE GOVERNOR BY

THE GOVERNOR BY

#### 02/08/24 101 350 2992 NSHE - UNLV LAW SCHOOL Funds Available **Budgetary** Description **WP Amount** Revenue WP Amount Description Current Revised GLs (2501 - 2599) GLs (3000 - 4999) Authority Authority 4601 GENERAL FUND SALARY 33,324 0 33,324 ADJUSTMENT Subtotal Budgetary General Ledgers 0 Subtotal Revenue General Ledgers(RB) 33,324 33,324 Total Budgetary & Revenue GLs 33,324 Expenditures CAT Amount CAT Amount Remarks 10 33,324 This work program requests the addition of General Fund salary adjustment revenue authority pursuant to AB 522 section 36 of the 82nd Legislative Session for longevity payments for employees of the Nevada System of Higher Education (NSHE). Sub Total Category Expenditures 33,324 **Total Budgetary General Ledgers and** Category Expenditures (AP) 33,324 kephart Authorized Signature 02/08/24

Date

Controller's Office Approval

WP Number: <sup>24CS2994</sup>

FY 2024

	Add Original	Work Program		XXX	Modify Work Program	DATE_	T DIVISION USE ONL	Y
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME	THE GO	OVERNOR BY	
02/08/24	101	350	2994 N	SHE - GREA	T BASIN COLLEGE			
ĵ.				Fund	ls Available			
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT	36,530	0	36,530
Subt	total Budgetary	General Ledgers	. 0	Subtota	al Revenue General Ledgers(RB)	36,530		36,530
		enditures			tary & Revenue GLs	36,530	: El	34,333
CAT	Amount	CAT	Amount	7	Remarks			
10	36,530				This work program is adjustment revenue the 82nd Legislative employees of the No	authority pursua	ant to AB 522 s	ection 36 of
Sub Total Cat Expenditures	tegory	) IL	36,530	1				
Total Budget	ary General Led	lgers and		1				
	penditures (AP)	•	36,530	J	A., 4h.	kephart		
					Addit	orized Signature		
					-	<b>02/08/24</b> Date		e e
					Controlle	er's Office Appro	val	

WP Number: 24CS2996 FY 2024

	Add Original \	Work Program		XXX	Modify Wo	rk Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BUI	DGET NAM	ΛE		THE GO	VERNOR BY	
02/08/24	101	350	2996 N	ISHE - UNIVE	ERSITY PR	ESS				
				Fund	ls Availabl	e				
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)	Descripti	on	WP Amo	unt	Current Authority	Revised Authority
				4601	4601 GENERAL FUND SALARY ADJUSTMENT			881	0	881
Sub	total Budgetary G	General Ledgers		Subtota Total Budget		General Ledgers(RB)		881 881		881
		nditures	T	7	,					
CAT 10	Amount 881	CAT	Amount	-		Remarks	4 _ 41_			
	501					This work program readjustment revenue the 82nd Legislative employees of the Ne	authority	OURSIL	ant to AB 522 si	ection 36 of
Sub Total Car Expenditures	tegory	3 <b>U</b> ,	881	<u>_</u>						
Total Budget Category Exp	ary General Ledg oenditures (AP)	gers and	881		-	Autho	<b>kephart</b> rized Sigr	ature		
					-		02/08/24			
							Date			

Controller's Office Approval

WP Number: <sup>24CS3001</sup>

FY 2024

Add Original Work Program					XXX	lodify Wo	ork Program		BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET	DE	PT/DIV/BUI	DGET NA	ME		THE GO	VERNOR BY	
02/08/24	101	350	3001	_			ROGRAMS - UNLV				
Budgetary	Description		WP Amou	nt	Fund Revenue	s Availab		WP Amo	ount	Current	Revised
GLs (2501 - 2599)	GLs (2501 - 2599)				GLs (3000 - 4999)					Authority	Authority
					4601	GENERAI ADJUSTM	L FUND SALARY MENT		5,094	0	5,094
				$\dashv$							
Sub	total Budgetary (	General Ledger	s	0	Subtota	l Revenue	General Ledgers(RB)		5,094		5,094
	,			_	Total Budget		- 1		5,094	6.	0,004
	Evna	nditures									
CAT	Amount	CAT	Amount				Remarks				
10	5,094						This work program r adjustment revenue the 82nd Legislative employees of the Ne	authority	nursua	ant to AB 522 s	ection 36 of
											(
				=							
				=							
				=							
Sub Total Ca Expenditures	tegory		5,0	094		,					
Total Budget Category Ex	tary General Ledç penditures (AP)	gers and	5,0	094				kephart			
						3	Autho	rized Sigr	nature		
								02/08/24			
								Date			
							Controlle	r's Office .	Appro	val	

WP Number: 24CS3002 FY 2024

	Add Original Work Program			XXX Modify Work Program				BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET D	DEPT/DIV/BUDGET NAME				THE GC	VERNOR BY	
02/08/24	101	350	3002 NSHE - UNLV DENTAL SCHOOL							
				Fund	s Available					
Budgetary GLs (2501 - 2599)	Description		WP Amount	Revenue GLs (3000 - 4999)		า	WP Amount 28,516		Current Authority	Revised Authority
				4601	GENERAL FUND SALARY ADJUSTMENT				53,794	82,310
Subt	otal Budgetary G	eneral Ledgers	5 0	Subtota	al Revenue Ge	eneral Ledgers(RB)	28	3,516		82,310
CAT	Exper	nditures CAT	Amount	7	tary & Revenu	emarks		3,516	-	
Sub Total Cat Expenditures	28,516		28,516	1	T <sub>F</sub>	nis work program n djustment revenue e 82nd Legislative nployees of the Ne	equests the authority p Session for vada Syste	e add ursua ir long eem of	lition of General ant to AB 522 so gevity payments f Higher Educat	Fund salary ection 36 of 3 for ion (NSHE).
Category Exp	enditures (AP)		28,516	I.	<u></u>	Autho	rized Signa	ature		
							02/08/24			
							Date			

Controller's Office Approval

WP Number: <sup>24CS3003</sup>

FY 2024

Add Original Work Program				XXX Modify Work Program				BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BU	DGET NAME		THE GO	VERNOR BY		
02/08/24	101	350	3003	NSHE - BUSINESS CENTER NORTH						
Budgetary	Description		WP Amour	nt Revenue	ds Available Description	WP Amou	unt	Current	Revised	
GLs (2501 - 2599)				GLs (3000 - 4999)				Authority	Authority	
				4601	GENERAL FUND SALARY ADJUSTMENT	-	7,769	0	7,769	
						_				
Sub	total Budgetary 0	Seneral Ledger	· C	0 Subtot	al Revenue General Ledgers(R	R) 7	7,769		7,769	
040	total Baagetaly t	seneral Leager	<u> </u>	_	tary & Revenue GLs		7,769		7,709	
	_									
CAT	Expe Amount	nditures CAT	Amount		Remarks					
10	7,769		Amount		This work program adjustment revenuthe 82nd Legislati employees of the	ue authority of	ursua	int to AB 522 si	ection 36 of	
						,		ŭ	, , ,	
Sub Total Ca	togony									
Expenditures	tegory		7,7	769						
Total Budgetary General Ledgers and Category Expenditures (AP)			7,7	'69		kephart				
					Aut	horized Signa	ature			
					-	02/08/24				
						Date				
					Contro	ller's Office A	pprov	/al		

WP Number: <sup>24CS3004</sup>

FY 2024

	Add Original	Work Program	n	XXX Modify Work Program			BUDGET DIVISION USE ONLY DATE APPROVED ON BEHALF OF		
DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BU	DGET NAME	THE G	THE GOVERNOR BY		
02/08/24		350	3004	NSHE - BUSINESS CENTER SOUTH					
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				4601	GENERAL FUND SALARY ADJUSTMENT	4,834	0	4,834	
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		enditures			tary & Revenue GLs	4,834		4,004	
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10	4,834				This work program adjustment revenue the 82nd Legislative employees of the N	requests the add authority pursu e Session for lon evada System o	dition of Genera ant to AB 522 s gevity payment if Higher Educat	l Fund salary ection 36 of s for ion (NSHE).	
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WP Number: <sup>24CS3005</sup>

FY 2024

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- 2599)				+	- 4999)	CENEDAL	FUND CALADY		14.040		
					4601	ADJUSTM	. FUND SALARY ENT		14,940	0	44,940
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10	44,940	OA1	Amount				This work program r	equests th	ne ado	lition of Genera	l Fund salary
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		-		$\dashv$			the 82nd Legislative employees of the Ne	vada Sys	tem o	f Higher Éduca	ion (NSHE).
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FY 2024

WP Number: <sup>24CS3010</sup>

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				4601	GENERAL FUND SALARY ADJUSTMENT	20	0,832		0 20,832
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						02/08/24 Date			_

Controller's Office Approval

WP Number: <sup>24CS3011</sup> FY 2024

Controller's Office Approval

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				4601	GENERAL FUND SALARY ADJUSTMENT	4	82,390	133,824	616,214
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Sub Tatal Cat	482,390				This work prog adjustment rev the 82nd Legis employees of the	enue authority	DUISU	ant to AB 522 s	ection 36 of
Sub Total Cat Expenditures  Total Budgeta Category Exp	egory ary General Led enditures (AP)	gers and	482,390	1		<b>kephart</b> Authorized Sigi	naturo		
						<b>02/08/24</b> Date			

WP Number: 24CS3012 FY 2024

Controller's Office Approval

	Add Original	Work Program		XXX	Modify Work	Program	DA	DGET DIVISION USE ONL TE PROVED ON BEHALF OF	Y
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02/08/24	101	350				A COLLEGE			
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				4601	GENERAL FU ADJUSTMEN	JND SALARY T	48,	19,625	67,651
					-			_	
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	otal Baagotaly	oonordi Ecagoro		4	tary & Revenu	~	48,0	_	01,031
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10	48,026			1	ad	nis work program re ljustment revenue	equests the authority pu	addition of Genera rsuant to AB 522 s	I Fund salary ection 36 of
					the en	justment revenue e 82nd Legislative nployees of the Ne	Session for vada Svster	longevity payment n of Higher Educa	s for tion (NSHE).
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			40,020		-	Autho	rized Signat	ure	
							02/08/24		
							Date		

WP Number: 24CS3014

BUDGET DIVISION USE ONLY Add Original Work Program XXX **Modify Work Program** APPROVED ON BEHALF OF THE GOVERNOR BY DATE **FUND** AGENCY BUDGET DEPT/DIV/BUDGET NAME 02/08/24 101 350 3014 NSHE - UNLV SCHOOL OF MEDICINE

## Funds Available Budgetary GLs (2501 - 2599) Description **WP Amount** Revenue Description WP Amount Current Revised GLs (3000 - 4999) Authority Authority 4601 GENERAL FUND SALARY 24,195 0 24,195 ADJUSTMENT Subtotal Budgetary General Ledgers 0 Subtotal Revenue General Ledgers(RB) 24,195 24,195 Total Budgetary & Revenue GLs 24,195 **Expenditures** CAT Amount CAT Amount Remarks 10 24,195 This work program requests the addition of General Fund salary adjustment revenue authority pursuant to AB 522 section 36 of the 82nd Legislative Session for longevity payments for employees of the Nevada System of Higher Education (NSHE). Sub Total Category Expenditures 24,195

Total Budgetary General Ledgers and Category Expenditures (AP)

24,195

kephart

Authorized Signature

02/08/24

Date

Controller's Office Approval

Does not require Interim Finance approval since Pursuant to AB 522 Section 36 of the 82nd Legislative Session

FY 2024

WP Number: <sup>24CS3018</sup> FY 2024

Controller's Office Approval

	Add Original V	Work Progran	n [	XXX	Modify Work Program	DA <sup>-</sup>	GET DIVISION USE ONL E ROVED ON BEHALF OF	Y
DATE	FUND	AGENCY	BUDGET D	EPT/DIV/BU	DGET NAME	THE	GOVERNOR BY	
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Budgetary GLs (2501	Description		WP Amount	Fund	ls Available Description	WP Amoun	t Current	Revised
GLs (2501 - 2599)				GLs (3000 - 4999)	•		Authority	Authority
				4601	GENERAL FUND SALARY ADJUSTMENT	145,1	95 0	145,195
Subt	otal Budgetary G	eneral Ledgers	s(	Subtota	I al Revenue General Ledgers(RB)	145,1	95	145,195
		nditures	-		tary & Revenue GLs	145,1	<del>,,</del>	
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	,			-		rized Signatu	re	
						<b>02/08/24</b> Date		

WP Number: <sup>24CS3221</sup> FY 2024

Controller's Office Approval

	Add Original \	Work Program		XXX	odify Wo	ork Program		DATE_	T DIVISION USE ONL	Υ
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02/08/24	101	350				RATORY AND RESE	ARCH			
				Fund	s Availab					
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				4601	GENERAI ADJUSTN	_ FUND SALARY IENT	1	0,613	0	10,613
Subt	Lotal Budgetary G	Seneral Ledgers	0	Subtota	l Revenue	General Ledgers(RB)	1/	0,613		10,613
		nditures	т.	Total Budget	ary & Rev	,	1	0,613		
Sub Total Cate Expenditures	Amount 10,613	CAT	10,613			Remarks This work program readjustment revenue the 82nd Legislative employees of the Ne	equests th authority p Session fo evada Syst	e add oursua or long em o	lition of General ant to AB 522 so gevity payments f Higher Educat	Fund salary ection 36 of s for ion (NSHE).
Total Budgeta Category Exp	ary General Ledg enditures (AP)	ers and	10,613				kephart rized Sign 02/08/24 Date	ature		

## 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 to effect a one, two, or three-grade pay increase for specified employees in the classified service adopted pursuant to NRS 284.175 of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Office of Finance in the Office of the Governor, 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, or agency request for an allocation from the General Fund and/or Highway Fund salary adjustment account(s) are recommended by the Director of the Office of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3011	College of Southern Nevada	\$133,824
	Total	\$133,824

## **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

February 9, 2024

## **MEMORANDUM**

To:

Venus Fajota, Executive Budget Officer Michael Rankin, Executive Budget Officer David Lenzner, Executive Budget Officer Governor's Finance Office, Budget Division

From:

Robin Hager, Budget Director, NSHE

Subject:

Request for Sworn Step Increase Funds (FY 2024)

Pursuant to AB 522 section 22 of the 82<sup>nd</sup> Legislative session NSHE requests funding related to the College of Southern Nevada sworn officer two grade increase totaling \$133,824 for FY 2024. Attached is a summary of filled sworn officer positions and costs associated with the two step increase.

If you have any questions regarding this request, please let me know.

## Police Officer Pay FY23 & Forecast of FY24

N.S.	Source	FY Status	Job Title	Type	Grade	Step	Salary	Fringe	Total Pav	Hiro Date Bergined 2 stone
P0027485	PCD	FY24 Filled	University Police Lieutenant	Classified	44	10	186 80	51 473 70		18
P0027585	PCD	FY24 Filled	University Police Lieutenant	Classified	44	10	\$ 130,186.80 \$	51 423 79		1/1/2020 163
P0029409	PCD	FY24 Filled	University Police Officer 1	Classified	36		\$ 61 178 40 \$	24 165 47		2/1/2020 IES
P0030276	PCD	FY24 Filled	University Police Officer II	Classified	40	10	\$ 109.202.40	A2 124 24	٠.	0/10/2023
P0030318	PCD	FY24 Filled	University Police Officer II	Classified	40	10		43 134 24	· •	1/1/2022 153
P0037204	PCD	FY24 Filled	University Police Officer II	Classified	40	10		43 134 24	٠.	1, 1, 2022, 153
P0059363	PCD	FY24 Filled	University Police Officer 1	Classified	36	<b>:</b>	\$ 61.178.40 \$	77 165 75	ን ፥	4/25/2022 Tes
P0095096	PCD	FY24 Open	University Police Officer 1	Classified	34	٠.	* OF:017(TO *	74,501,42	n 4	6/16/2023
P0095932	PCD	FY24 Filled	University Police Officer 2	Classified	40	ı m	\$ 79.573.68	31 431 60	\$ 111 005 28	171/3033 Voc
P0115042	PCD	FY24 Filled	University Police Officer 2	Classified	40	m	\$ 79.573.68	31.431.60		3/3/2022 165 3/3/2022 Vec
P0027819	PCD	FY24 Open	University Police Officer 2	Classified	38	1	· •	2.5		531 5307 151
P0028060	PCD	FY24 Open	University Police Sergeant	Classified	40	T	. 40	u u		
P0029337	PCD	FY24 Open	University Police Officer 2	Classified	38		. 45	5 57	· •	
P0030684	PCD	FY24 Open	University Police Officer 2	Classified	38	1	. 40	•		
P0064177	PCD	FY24 Open	University Police Officer 2	Classified	38	н	. 40	9.		
P0097220	PCD	FY24 Open	University Police Officer 1	Classified	34	н	,		, . ••	
P0027485	PCD	FY23 Filled	University Police Lieutenant	Classified	42	10	\$ 105.945.12 \$	41.000.76	\$ 146 945 88	7/15/2020 Ves
P0027585	PCD	FY23 Filled	University Police Lieutenant	Classified	42	10	\$ 105.945.12	41.000.76		1/1/2020 Ves
P0029409	PCD		University Police Officer 1	Classified			\$	'		17 5050 153
P0030276	PCD	FY23 Filled	University Police Officer 2	Classified	38	10	\$ 88.197.12 \$	34 137 29	\$ 122 329 41	1/1/2032 525
P0030318	PCD	FY23 Filled	University Police Officer 2	Classified	38	10	\$ 88.197.12	34 132 29		1/1/2022 163
P0037204	PCD	FY23 Filled	University Police Officer 2	Classified	80	10	\$ 88 197 12 \$	34 137 29		1/ 1/ 2022 1es
P0059363	PCD	FY23 Open	University Police Officer 2	Classified		ì	\$	-		4/ 23/ 2022 163
P0095096	PCD		University Police Officer 1	Classified				,		
P0095932	PCD	FY23 Filled	University Police Officer 2	Classified	38	2	\$ 61.616.88 \$	23 845 73	\$ 85 462 61	1/1/2022 Vec
P0115042	PCD	FY23 Filled	University Police Officer 2	Classified	38	2	\$ 61,616.88 \$	23.845.73	٠.	3/2/2022 163
P0027819	PCD	FY23 Open	University Police Officer 2	Classified	;	ı	* ~ · ·	0.000	٠.	sal 5707/c/c
P0028060	PCD	FY23 Open	University Police Sergeant	Classified			. 40		( 0) } •	
P0029337	PCD	FY23 Open	University Police Officer 2	Classified			. •	•	) · · ·	
P0030684	PCD	FY23 Open	University Police Officer 2	Classified					· ·	
P0064177	PCD	FY23 Open	University Police Officer 2	Classified			· · ·	' !	· ·	
P0097220	PCD	FY23 Open	University Police Officer 1	Classified					) )() } • •	

PCN	2 step increase in total Pay	Base
P0027485	\$34,664.70	\$6,
P0027585	\$34,664.70	\$6,
P0030276	\$30,007.23	\$6
P0030318	\$30,007.23	\$6,
P0037204	\$30,007.23	\$6,
P0095932	\$25,542.67	\$5
P0115042	\$25,542.67	\$5
	\$210,436.45	\$45,
BA 3011 - Coll	BA 3011 - College of Southern Nevada	
E673	\$ 133,824	

	2 step increase in total Pay	Base 5
485	\$34,664.70	\$6,9
285	\$34,664.70	\$6,9
276	\$30,007.23	\$6,0
318	\$30,007.23	\$6,0
204	\$30,007.23	\$6,0
932	\$25,542.67	\$5,
042	\$25,542.67	\$5,2
	\$210,436.45	\$45,

Base Salary Fringe		Jul-Oct '23
\$6,990.72	\$4,564.19	\$11,554.90
\$6,990.72	\$4,564.19	\$11,554.90
\$6,051.46	\$3,950.95	\$10,002.41
\$6,051.46	\$3,950.95	
\$6,051.46	\$3,950.95	\$10,002.41
\$5,151.11	\$3,363.12	\$8,514.22
\$5,151.11	\$3,363.12	\$8,514.22
\$42,438.02	\$27,707.47	S

din a series		NOV I Drougn PYE
81.43	\$9,128.37	\$23,109.80
\$13,981.43	\$9,128.37	\$23,109.80
\$12,102.92	\$7,901.91	\$20,004.82
\$12,102.92	\$7,901.91	\$20,004.82
\$12,102.92	\$7,901.91	\$20,004.82
\$10,302.21	\$6,726.24	\$17,028.45
\$10,302.21	\$6,726.24	\$17,028.45
76.04	\$55,414.93	\$140,290.97

\*The currently filled positions have expended additional funding due to the two-step increase, which was unbudgeted, and any associated vacancy savings have been swept to address the COLA funding gap. In speaking with UPD-South, they are actively recruiting for the vacant positions and are working to ensure all positions are filled by 2025.

## 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 to effect a one, two, or three-grade pay increase for specified employees in the classified service adopted pursuant to NRS 284.175 of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Office of Finance in the Office of the Governor, 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, or agency request for an allocation from the General Fund and/or Highway Fund salary adjustment account(s) are recommended by the Director of the Office of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3710	NDOC Director's Office	\$317,443
3716	Warm Springs Correctional Center	\$48,162
3717	Northern Nevada Correctional Center	\$1,733,866
3723	Pioche Conservation Camp	\$112,527
3724	Northern Nevada Transitional Housing	\$53,198
3725	Three Lakes Valley Conservation Camp	\$133,104
3738	South Desert Correctional Center	\$1,651,486
3739	Wells Conservation Camp	\$66,393
3741	Humboldt Conservation Camp	\$41,298
3752	Carlin Conservation Camp	\$91,032
3754	Tonopah Conservation Camp	\$32,927
3759	Lovelock Correctional Center	\$1,573,037
3760	Casa Grande Transitional Housing	\$186,011
3761	Florence McClure Women Correctional Center	\$1,109,122
3762	High Desert State Prison	\$3,606,510
	Total	\$10,756,116

Joe Lombardo Governor

James E. Dzurenda Director

Kristina Shea Deputy Director Of Support Services



## STATE OF NEVADA Department of Corrections

Northern Administration 5500 Snyder Ave. Carson City, NV 89701 (775) 977-5500

Southern Administration 3955 W. Russell Rd. Las Vegas, NV 89118 (725) 216-6000

## **MEMORANDUM**

Date:

February 27th, 2024

To:

Bridgette Mackey-Garrison, Executive Branch Budget Officer

Vince Young-Brown, Executive Branch Budget Officer

From:

Kristina Shea, Deputy Director of Support Services

Subject: Request for March 2024 Board of Examiners – Two-Grade Salary Increase

The Nevada Department of Corrections (NDOC) is projecting a shortfall of General Fund appropriations to fund salary expenditures through the end of fiscal year 2024. Pursuant to Assembly Bill 522, Section 22, of the 82<sup>nd</sup> session, the department is requesting the revenue which was authorized by the Legislature associated with the two-grade increase for which funding was not allocated to the department in State Fiscal Year (SFY) 24.

The funds requested will help reimburse the two-grade salary increase which was approved in Assembly Bill 522 and gave each department budget account authority for the two-grade increase, however Section 22 funded these expenditures to the State Board of Examiners. The department is requesting \$\frac{\\$10.756.116}{\}\$ to fund the two-grade increase of direct and projected cost reimbursement through the end of SFY 2024 for all the department budget accounts that are qualified for this reimbursement.

Without this allocation, budget accounts department wide funded with General Fund appropriations are projected to have insufficient funding available to pay Category 01 Personnel Services expenditures through the end of the fiscal year. Additionally, this may have a negative impact on the department's ability to pay other operating expenditures for the remainder of the fiscal year. Attached are supporting spreadsheets to support NDOC's calculations.

Agency is not including budget accounts that are showing a slight net positive in the CAT 01 projections to date and a full reconciliation will occur closer to the end of SFY 24. Attached are projections for CAT 01 department wide.

Thank you for your time and consideration in this manner.

Kristina Shea

Nevada Department of Corrections Deputy Director of Support Services

Attachments:

2 grade increase NDOC SFY 2024 CAT01 projection department wide

	Depar	tm	ent of Correctio	ns		
ВА	Total RGL 4601 Authority	То	tal expenditures for SFY 24*		Variance	%' Variance
3710	\$ 438,245.00	\$	317,443.00	\$	120,802.00	27.56%
3716	\$ 91,973.00	\$	48,162.00	\$	43,811.00	47.63%
3717	\$ 1,779,053.00	\$	1,733,866.00	\$	45,187.00	2.54%
3723	\$ 118,051.00	\$	112,527.00	\$	5,524.00	4.68%
3724	\$ 59,058.00	\$	53,198.00	\$	5,860.00	9.92%
3725	\$ 177,271.00	\$	133,104.00	\$	44,167.00	24.91%
3738	\$ 1,691,080.00	\$	1,651,486.00	\$	39,594.00	2.34%
3739	\$ 85,825.00	\$	66,393.00	\$	19,432.00	22.64%
3741	\$ 70,986.00	\$	41,298.00	\$	29,688.00	41.82%
3752	\$ 96,559.00	\$	91,032.00	\$	5,527.00	5.72%
3754	\$ 38,461.00	\$	32,927.00	\$	5,534.00	14.39%
3759	\$ 1,656,823.00	\$	1,573,037.00	\$	83,786.00	5.06%
3760	\$ 186,011.00	\$	186,011.00	\$	:=	0.00%
3761	\$ 1,145,064.00	\$	1,109,122.00	\$	35,942.00	3.14%
3762	\$ 3,701,322.00	\$	3,606,510.00	\$	94,812.00	2.56%
rand Tota	\$ 11,335,782.00	\$	10,756,116.00	\$	579,666.00	5.11%

## Methodology:

NEBS L01 E673 information used to determine the actual cost of 2 grade increase. Cross referenced with HRDW to determine which PCNs were occupied and calculate the cost of actual funds needed for the filled positions. Projected cost based on expectation to hire a total of 400 CO's for the rest of the SFY proportionally divided among budget accounts and based on actual hires YTD.



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

Amy Stephenson Director

David Johnson
Deputy Director

Curtis Palmer Administrator

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

Date:

February 12, 2023

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 BUSINESS AND INDUSTRY – DIVISION OF INDUSTRIAL RELATIONS

## Agenda Item Write-up:

Pursuant to NRS 232.605, subsection 2, the Advisory Council to the Division of Industrial Relations requests that the Board of Examiners designate the following debts as bad debts, as they have been determined to be uncollectible:

Business and Industry, Division of Industrial Relations	\$558,344.14
A. Occupational Safety and Health Administration Fines/Penalties	\$24,675.00
B. Uninsured Employer Claim Account	\$280,330.19
C. Worker's Compensation Administrative Fines and Premium Penalties	\$252,758.95
D. Mechanical Compliance	\$580.00

## Additional Information:

The Advisory Council is authorized pursuant to NRS 232.605, subsection 2, to submit such requests to the Board once debt has been determined to be impossible or impractical to collect.

## Statutory Authority:

NRS 232.605(2)

REVIEWED:	W
ACTION ITEM	<b>f</b> i: <sub>[</sub>



DR. KRISTOPHER SANCHEZ Director

> VICTORIA CARREÓN Administrator

JODIE TONKIN Deputy Administrator

## DEPARTMENT OF BUSINESS AND INDUSTRY DIVISION OF INDUSTRIAL RELATIONS **ADMINISTRATION**

## **MEMORANDUM**

DATE:

January 9, 2024

TO:

Paul McKenzie, Chairman, Division of Industrial Relations Advisory Council

FROM:

Victoria Carreón, Administrator, Division of Industrial Relations

SUBJECT:

Approval of Bad Debts of the Division of Industrial Relations for Referral

Per NRS 232.605(2) "For any amount of debt the Division determines is impossible or impractical to collect, the Council shall request the State Board of Examiners designate such amount as a bad debt. ..."

The Division of Industrial Relations (DIR) requested and received through a unanimous vote of the Advisory Council the approval to request that certain bad debts of the DIR be forwarded to the State Board of Examiners because these debts are impossible or impractical to collect. All attempts to locate and collect from the responsible parties have failed. The DIR's bad debts were presented at the January 9, 2024, Advisory Council meeting.

Please see attached breakdown of individual fines, penalties, and uninsured.

Mechanical Compliance Section	\$580.00
OSHA Reno	\$24,675.00
Workers' Compensation North (Administrative Fines)	\$14,074.61
Workers' Compensation North (Premium Penalties)	\$3,985.77
Workers' Compensation South (Administrative Fines)	\$96,199.73
Workers' Compensation South (Premium Penalties)	\$138,498.84
Uninsured Employers' Claim Account	\$280,330.19
Total	\$558,344.14

Paul McKenzie, Chairman

Division of Industrial Relations Advisory Council

# Division of Industrial Relations

# **Bad Debt Write-Off Recommendations**

Tuesday, January 9, 2024

Division of Industrial Relations	Sum of Balance Due
Mechanical Compliance	\$580.00
OSHA RNO	\$24,675.00
Workers' Compensation North (Admin)	\$14,074.61
Workers' Compensation North (Premium)	\$3,985.77
Workers' Compensation South (Admin)	\$96,199.73
Workers' Compensation South (Premium)	\$138,498.84
Uninsured Employers' Claims Account	\$280,330.19
Grand Total	\$558,344.14

## Amount of Write-offs by DIR Section

Row Labels	Sum of Balance Due	Number	Number of Businesses
Mechanical Compliance		\$580.00	4
OSHA RNO		\$24,675.00	5
Workers' Compensation North (Admin)		\$14,074.61	17
Workers' Compensation North (Premium)		\$3,985.77	13
Workers' Compensation South (Admin)		\$96,199.73	101
Workers' Compensation South (Premium)		\$138,498.84	79
Uninsured Employers' Claims Account		\$280,330.19	29
Grand Total		\$558,344.14	248

## Amount of Write-Offs by Status of Business License with Secretary of State

and of the property of the pro	company of the second
Secretary of State Status	Sum of Balance Due
CANCELLED	\$3,090.99
DEFAULT	\$11,460.99
DISSOLVED	\$16,628.42
EXPIRED	\$27,231.81
NO RECORD	\$199,877.91
PERMANENTLY REVOKED	\$106,010.71
REVOKED	\$159,407.99
WITHDRAWN	\$120.00
ADMINISTRATIVE HOLD	\$18,276.97
BANKRUPT	\$120.00
CONVERTED OUT/PERMANENTLY REVOKED	\$1,000.00
EXPIRED	\$13,018.35
MERGED	\$2,100.00
Grand Total	\$558,344.14

## ount of Write-offs by DIR Section

Amount of Write-offs by DIR Section	section		
Row Labels	Sum of Balance Due		Average Age in Months
Mechanical Compliance		\$580.00	16
OSHA RNO		\$24,675.00	70
Workers' Compensation North (	~	\$14,074.61	110
Workers' Compensation North (	~	\$3,985.77	120
Workers' Compensation South (	)-	\$96,199.73	133
Workers' Compensation South (	~	\$138,498.84	131
Uninsured Employers' Claims Ac	Ac	\$280,330.19	100
Grand Total		\$558,344.14	124

## Amount of Write-Offs by Status of License with State Contractor's Board

Contractor's Board Status Sur	
	Sum of Balance Due
CANCELLED NOT RENEWED	\$26,346.41
NO RECORD	\$530,248.26
REVOKED	\$1,749.47
Grand Total	\$558,344.14

		yers'	yers'	sation	sation	sation	sation	nsation	nsation	nsation	nsation	yers'	nsation	nsation	nsation	yers'	nsation	nsation	nsation	nsation	rsation	nsation	nsation	nsation	nsation	nsation	nsation
B. S. B.	Section	Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Workers' Compensation	Workers' Compensation	Workers' Compensation	Workers' Compensation South (Premium)	Workers' Compensation	Workers' Compensation South (Premium)	Workers' Compensation North (Admin)	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation North (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation
	Contractor's Board	NO RECORD	NO RECORD	NO RECORD			NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	
	Secretary of State	DISSOLVED	DISSOLVED	ADMINISTRATIVE HOLD	PERMANENTLY REVOKED	PERMANENTLY	PERMANENTLY REVOKED	DISSOLVED	PERMANENTLY REVOKED	NO RECORD	PERMANENTLY REVOKED	REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	ADMINISTRATIVE HOLD	NO RECORD	EXPIRED	EXPIRED	DISSOLVED	REVOKED	DISSOLVED	REVOKED	NO RECORD	DISSOLVED	NO RECORD	NO RECORD	PERMANENTLY
Beason for Write-off	Recommendation	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION FEORTS LINSLICCESSELLE	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	696.90 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	SGG.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	S00.00 COLLECTION EFFORTS UNSUCCESSFUL	
	Balance Due	1,788.50	4,326.40	79.06				_		200.00	1,000.00	8,856.90		200.00	200.00	06.969	535,68	2,449.20	200.00	401.30	500.00	20.64	2,112.68	1,873.59	35.95	500.00	
Amount	Collected	- 1	,						81.76		•	77			·	3		**	4	98.70	•	61.01	ľ			Ť	
Amount	Assessed	1,788.50	4,326.40	79.06	4,746.96	7.500.00	300.51	500.00	124.31	200.00	1,000.00	8,856.90	111.78	500.00	200.00	696.90	535.68	2,449.20	500.00	500.00	500.00	81.65	2,112.68	1,873.59	35.95	500.00	
	Type of Penaity	RECOVERIES	RECOVERIES	PREMIUM PENALTY			PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	
More than	36 months	Yes	Yes			Yes						50 Yes				47 Yes			141 Yes		116 Yes	Yes	113 Yes	111 Yes	146 Yes	146 Yes	
Number of	Months Since Initial Invoice	42	59	119 Yes	156 Yes	141	149 Yes	147 Yes	115 Yes	108 Yes	145 Yes	50	111 Yes	109 Yes	117 Yes	47	115 Yes	115 Yes	141	110 Yes	116	127	113	111	146	146	
Date of	Initial Invoice	06/21/20	01/10/19	01/10/14	12/20/10	03/30/12	07/15/11	10/02/11	05/13/14	01/02/15	12/06/11	11/06/19	09/30/14	11/21/14	03/21/14	02/02/20	05/30/14	05/16/14	03/30/12	10/23/14	04/25/14	05/24/13	07/25/14	10/08/14	10/21/11	10/21/11	01/00/00
	Business Entity/ Debtor 23	1st Source Logistics, LLC	24/7 Parental Care, LLC	4 H & L, LLC DBA EXQUISITE NAILS & SPA AND BRENTON H CHIU, LUANN K LE, INDIVIDUALLY	702 AUTO ALUANCE, LLC DBA ROYALTY BRAKE & TIRE	702 AUTO ALLIANCE, LLC DBA ROYALTY BRAKE & TIRE	702 AUTO ALLIANCE, LLC DBA ROYALTY BRAKE & TIRE	A NEU BEGINNING ELDERCARE LLC DBA A NEW BEINNING RESIDENTIAL CARE	A NEW DISCOUNT FURNITURE	AAC CORP A NEVADA CORP DBA HACIENDA DEL REY LAS VEGAS	ACME SECURITY	Action Home Appliance and TV's	AGWARA & ASSOCIATES LTD.	AGWARA & ASSOCIATES LTD.	ALCABO, LLC DBA DEVINE EATERY	Alexander G. Rodriguez, Jr.	ALEXIS HURTADO REYNOSA DBA NEVADA AUTO REPAIR	ALEXIS REYNOSA-HURTADO DBA NEVADA AUTO REPAIR AND CUSTOM DETAIL	ALL OUT COLLISION CENTER ILC	ALPHA HOME HEALTH AGENCY INC.	AMANTA REAL THAI FOOD AND DISALADA DISAVANON, SITTICHAI PANYASIRI AND ISAPHONG PHONCHANA, INDIVIDUALLY	AMBER SKIES COMMUNITY SUPPORT CORP.	AMERICAN NATIONAL INC. DBA AMERICAN NATIONAL	ANTHEM HILLS DENTAL, LLC	ASBERON & BROWN LLC	ASBERON & BROWN LLC	BAD ONE LLC DBA BRENTWOOD CAFÉ &
	n DIR n	1 L52 1	2 DIR4398 2	3 DIR2705 II	4 DIR1707 B	5 DIR1707 E	6 DIR1708	7 DIR1769 P	8 DIR2747	9 DIR3058 D	10 DIR2069 A	11 DIR6354 A	12 DIR2886 A	13 DIR2886	14 DIR2718 /	15 DIR805 /	16 DIR2771	17 DIR2752	18 DIR1722	19 DIR2884	20 DIR2802	21 DIR2358 ,	22 DIR2808	23 DIR2882	24 DIR1744	25 DIR1744	

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Section	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	OSHA RNO	OSHA RNO	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Uninsured Employers' Claims Account		Uninsured Employers' Claims Account	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)
Contractor's Board	CANCELLED NOT RENEWED	CANCELLED NOT RENEWED	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	REVOKED	NO RECORD	CANCELLED NOT RENEWED	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
Secretary of State	REVOKED	REVOKED	EXPIRED	EXPIRED	REVOKED	REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	REVOKED	NO RECORD	REVOKED	REVOKED	REVOKED	EXPIRED	PERMANENTLY REVOKED	REVOKED	DISSOLVED	NO RECORD	PERMANENTLY REVOKED	DEFAULT	PERMANENTLY REVOKED	DISSOLVED
Reason for Write-off Recommendation	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	1,191.76 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due	210.12	500.00	89.86	200.00	431.01	500.00		2,500.00	1,148.00	400.00	436.05	224.56	336.57		1,162.76		31,759.86	500.00	909.92	500.00	200.00	1,000.00	1,191.76
Amount Collected				9			*				- 6	3				1		(94.)	 			584	
Amount Assessed	210.12	500.00	89.86	500.00	431.01	200.00	314.25	2,500.00	1,148.00	400.00	436.05	224.56	336.57	500.00	1,162.76	374.47	31,759.86	500.00	909.92	500.00	500.00	1,000.00	1,191.76
Type of Penalty	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	RECOVERIES	ADMINISTRATIVE FINE	RECOVERIES	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY
of More than oce 36 months	164 Yes	149 Yes	150 Yes	150 Yes	110 Yes F	111 Yes	113 Yes	115 Yes	36 Yes	106 Yes	50 Yes	112 Yes	116 Yes		49 Yes	Yes	49 Yes	161 Yes	46 Yes	112 Yes	97 Yes	153 Yes	127 Yes
Number of Months Since Initial invoice																	4						
Date of Initial Invoice	04/26/10	07/29/11	07/08/11	07/08/11	10/23/14	09/30/14	07/25/14	05/21/14	12/21/20	02/23/15	11/06/19	09/04/14	04/11/14	01/27/14	11/13/19	04/23/10	11/27/19	07/16/10	02/16/20	08/28/14	11/19/15	03/30/11	05/17/13
Business Entity/ Debtor23	BAREFOOT POOL & SPA LLC DBA BAREFOOT POOL & SPA	Barefoot pool & spa llc dba barefoot Pool & spa	BERTHA NAVARETTE-GUZMAN DBA ANNA'S CLEANING	BERTHA NAVARETTE-GUZMAN DBA ANNA'S CLEANING	BH-NV AVIATION INN LAS VEGAS LLC	BH-NV AVIATION INN LAS VEGAS LLC	BODY COUTURE SX LLC AND JOSEPHY BIVENS, INDIVIDUALLY	BODY COUTURE SX LLC AND JOSEPHY BIVENS, INDIVIDUALLY	Brown Fascia Works LLC	Cal-Neva Hospitality Constuction	Cantwell, Larry	CARE SOURCE HOME HEALTH, LLC DBA CARE SOURCE HOME HEALTH AND DESIREE MAGCALAS, MARY ANN MAGCALAS, INDIVIDUALLY	CARE SOURCE HOME HEALTH, LLC DBA CARE SOURCE HOME HEALTH AND DESIREE MAGCALAS, MARYANN MAGCALAS, INDIVIDUALLY	CARE SOURCE HOME HEALTH, LLC DBA CARE SOURCE HOME HEALTH AND DESIREE MAGCALAS, MARYANN MAGCALAS, INDIVIDUALLY	Chang, Samuel	CHARLES BARBER DBA CENTRAIR ELECTRIC	Classic Touch Mobile Heavy Equipment Re	COLD STORAGE SOLUTIONS INC.	Copeland, William	CO-SIGNOR.COM, LLC IN EXPIRED STATUS AND GARY GOTTLIEB INDIVIDUALLY	COULSON & ASSOC LTD	COUNTESS INVESTMENTS	COURTESY PATROL, ILC IN DISSOLVED STATUS AND SAM AMICI, INDIVIDUALLY
# DIR#	27 DIR1448 P	28 DIR1448 P	29 DIR1749 C	30 DIR1749 C	31 DIR2919 E	32 DIR2919 E	33 DIR2780 E	34 DIR2780 E	35 DIR4310 E	36 DIR4971 C	37 DIR4146 C	38 DIR2816	39 DIR2740 I	40 DIR2740	41 DIR5076		43 DIR4138	44 DIR1720	45 DIR3336	46 DIR2841	47 DIR3467	48 DIR2068	49 DIR2842

Section	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Admin)	Mechanical Compliance	Workers' Compensation	Workers' Compensation North (Premium)	Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Workers' Compensation   South (Premium)	Workers' Compensation		Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)
Contractor's	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	CANCELLED NOT RENEWED	CANCELLED NOT RENEWED	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
Serretary of State	DISSOLVED	REVOKED	NO RECORD	BANKRUPT	NO RECORD	NO RECORD	REVOKED	NO RECORD	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	REVOKED	REVOKED	REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	DISSOLVED	NO RECORD	EXPIRED	EXPIRED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	REVOKED	NO RECORD	NO RECORD
Reason for Write-off Recommendation	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	120.00   COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	782.28 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due	250.00	268.68	500.00	120.00	4,669.67	782.28	7,759.78	7.14	1,508.67	500.00	550.00	29,528.02	1,641.42	5,748.48	81.97	500,00	79,526.26	3.06	194.11	135.23	500.00	600.16	500.00	13,215.06	217.97	500.00
Amount		*	8	110	330.33				1		,	- 24	,					.00	•		ľ		0.0		*	, v
Amount	250.00	268.68	500.00	120.00	5,000.00	782.28	7,759.78	7.14	1,508.67	500.00	550.00	29,528.02	1,641.42	5,748.48	81.97	500.00	79,526.26	3,06	194.11	135.23	500.00	600.16	500.00	13,215.06	217.97	500.00
Type of Penalty	ADMINISTRATIVE FINE	RECOVERIES	ADMINISTRATIVE FINE	INVOICE	ADMINISTRATIVE FINE	PREMIUM PENALTY	RECOVERIES	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	RECOVERIES	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	RECOVERIES	RECOVERIES	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE
More than e 36 months	127 Yes	49 Yes	174 Yes	102 Yes	95 Yes	95 Yes	49 Yes	48 Yes	113 Yes	115 Yes	110 Yes	49 Yes	1488 Yes	49 Yes	109 Yes	III Yes	49 Yes	50 Yes	46 Yes	146 Yes	146 Yes	120 Yes	110 Yes	49 Yes	148 Yes	148 Yes
Number of Months Since Initial Invoice													14.													
Date of Initial Invoice	05/17/13	12/04/19	06/10/09	06/11/15	01/11/16	01/11/16	11/13/19	12/20/19	07/23/14	05/23/14	10/16/14	12/04/19		11/27/19	11/21/14	09/30/14	11/27/19	11/06/19	02/56/20	10/26/11	10/26/11	01/07/14	10/16/14	11/20/19	08/19/11	08/19/11
Business Entity/ Debtor23	COURTESY PATROL, LLC IN DISSOLVED STATUS AND SAM AMICI, INDIVIDUALLY	Craftsman Painting	CREE CONCRETE LLC	Crystal and Michael Krein dba Krein One, LLC	CRYSTAL SCHENK DBA NEXT GENERATION KIDS PRESCHOOL	CRYSTAL SCHENK DBA NEXT GENERATION KIDS PRESCHOOL	D & S Transport, LLC	Damasco's Landscaping	DARDEN PLUMBING LLC AND DON DARDEN, INDIVIDUALLY	DARDEN PLUMBING LLC AND DON DARDEN, INDIVIDUALLY	<b>DAVILDA HOME HEALTH, LLC</b>	Decton Southwest Inc	Depressurized Technologies-Gonzales	Depressurized Technologies-Lopez	DISCOUNT SERVICES, LLC	DISCOUNT SERVICES, LLC	Dog Training	Eisahco, Inc	El Cortesz dba: El Cortesz Mexican Rest	ELISABETH ABRAM DBA VANITY FAIR	ELISABETH ABRAM DBA VANITY FAIR	EPICUREAN VENTURES L.L.C. DBA OGDEN'S HOPE & HARVEST AND BILL FEATHER, KELLY JONES AND FRANK TUCKER, INDIVIDUALLY	EVAN LEE AGENCY INC	Fantastic Nails	FERMIN PAIZ DBA FREDDY'S LAWN CARE	75 DIR1603 FERMIN PAIZ DBA FREDDY'S LAWN CARE
# DIR#	50 DIR2842	51 DIR618	52 DIR1433	53 DIR3237	54 DIR3433	55 DIR3433	56 DIR3339	57 DIR5760	58 DIR2803	59 DIR2803	60 DIR2926	61 DIR4142	62 DIR2612	63 DIR2610	64 DIR2920	65 DIR2920	66 DIR5673	67 DIR4297	68 DIR5081	69 DIR1756	70 DIR1756	71 DIR2758	72 DIR2921	73 DIR5462	74 DIR1603	75 DIR1603

Section	Workers' Compensation	South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation	Workers' Compensation	South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)	Workers' Compensation North (Admin)	Workers' Compensation North (Premium)	Workers' Compensation South (Premium)	Workers' Compensation	Workers' Compensation	Workers' Compensation	Workers' Compensation	South (Premium) Workers' Compensation	South (Admin) Workers' Compensation	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)
Contractor's	Board	NO RECORD	NO RECORD	NO RECORD	00000	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD		NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
	Secretary of State	EXPIRED	EXPIRED	PERMANENTLY REVOKED	PERMANENTLY	PERMANENTLY	REVOKED	REVOKED	PERMANENTLY REVOKED	NO RECORD	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY	PERMANENTLY	REVOKED PERMANENTLY	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	PERMANENTLY REVOKED				
Reason for Write-off Recommendation		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	H 1203200 FEED STOODS HOLD IN COLUMN TO STOOD ST		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	CO OF THE PROPERTY OF THE PROP	COLLECTION EFFOR 3 UNSOCCESSFOL	COLLECTION EFFORTS UNSUCCESSFUL	500.39 COLLECTION EFFORTS LINSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	249.32 COLLECTION EFFORTS UNSUCCESSFUL	250.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	233.38 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due		717.73	200.00	679.53	2 500 00		43.83	200.00	500.00	500.00	500.00	39.22	200.00	285.48	155.45	1,000.00	1,000.00		70:61	187.79	500.39	500.00	500.00	249.32	250.00	264.99	233.38
Amount				٠						18	- 4	460.78			'n		,	(4)		*(	3.	300	·		58.	- 00	
Amount		717.73	500.00	679.53	2 500 00		43.83	200.00	500.00	500.00	500.00	500.00	200.00	285.48	155.45	1,000.00	1,000.00	9		187.79	500.39	500.00	500.00	249.32	250.00	264.99	233.38
Type of Penalty		PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE		PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	DREMAILINA DENALTY		PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY					
er of More than Since 36 months		113 Yes	113 Yes	148 Yes	147 Yes		147 Yes	148 Yes	113 Yes	161 Yes	111 Yes	117 Yes	91 Yes	91 Yes	156 Yes	111 Yes	116 Yes	717 Vec		149 Yes	111 Yes	112 Yes	194 Yes	120 Yes	115 Yes	149 Yes	111 Yes
of Number of all Months Since ice Initial Invoice		07/22/14	07/22/14	08/19/11	09/23/11		09/30/11	08/19/11	07/30/14	07/16/10	09/22/14	03/26/14	05/16/16	05/16/16	12/20/10	09/12/14	05/09/14	03/31/14		07/15/11	09/12/14	08/28/14	10/10/01	01/07/14	05/30/14	07/26/11	09/30/14
Date of Initial Invoice						_			2/20	1/20	7/60	03/2	05/1	05/2							./60	7/80		100		1/10	
Business Entity/ Debtor23	FERNANDO RUBEN MONTEIL DBA MONTEIL'S	CUSTOMS FERNANDO RIBEN MONTELL DRA MONTELL'S	CUSTOMS	FIRE SPRINKLER SYSTEMS OF NV LLC DBA SOUTHWEST FIRE PROTECTION	FIRE SPRINKLER SYSTEMS OF NV LLC DBA SOUTHWEST FIRE PROTECTION	FIVE STAR TRAVEL OF LAS VEGAS, INC. DBA 5	STAR TRAVEL	STAR TRAVEL	FLIP FLOPS TUMBLING, INC.	FRANK J. PETERSON	GAITHER'S WAY HOUSEKEEPING LLC	GARAGE SOLUTIONS OF UTAH INC	GARDEN SHOP NURSERY LLC	GARDEN SHOP NURSERY LLC	GERMAN MALFAVON DBA VICMAN INC/SERVPRO OF DOWNTOWN LAS VEGAS	GIGGLES A& GRINS CHILDCARE, LLC IN REVOKED STATUS AND JENNINE HENDERSON INDIVIDUALLY	GIGGLES AND GRINS CHILDCARE LLC DBA GIGGLES AND GRINS CHILDCARE AND JENNINE HENDERSON, INDIV	GIGGLES AND GRINS CHILDCARE LLC DBA GIGGLES AND GRINS CHILDCARE AND JENNINF HENDERSON JNDV	GLENN R JUSTICE DDS DBA GLENN R JUSTICE	DDS LID GLENN R JUSTICE DDS DBA GLENN R JUSTICE DDS LTD	GRAND CANYON RANCH, LLC	GRAND CANYON RANCH, LLC	GULLI DEVELOPMENT CO DBA CONCRETE COWBOYS	GURU ENTERPRISES, INC. DBA GURU EXPRESS MARKET	GURU ENTERPRISES, INC. DBA GURU EXPRESS MARKET	HASSAN MIRZA DBA TROPICAL SHADES	HENDERSON PRESS, INC IN DEFAULT STATUS AND ERIC BUSKIRK, INDIVIDUALLY
# DIR#		76 DIR2810 C	77 DIR2810 C	78 DIR1631 S	79 DIR1631 S	010101	DIRIBIO	81 DIR1610 S	82 DIR2844 F	83 DIR2064 F	84 DIR2782 (	85 DIR3068	86 DIR3532 G	87 DIR3532 (	88 DIR1633	89 DIR2845	90 DIR2749 J	91 DIR2754	1	92 DIK1/51 1		95 DIR2846	96 DIR1218	97 DIR2759	98 DIR2759	99 DIR2036	100 DIR2881

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Section	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Uninsured Employers'	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	9	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)
3112	Workers' Com South (Admin)	Uninsured Emp	Workers' Comper South (Premium)	Workers' Com	Workers' Comp South (Admin)	Workers' Compe	Workers' Comper South (Premium)	Workers' Comp South (Admin)	Workers' Comp South (Admin)	Workers' Comper South (Premium)	Workers' Comper	Workers' Com	Uninsured Emp	Workers' Comp South (Admin)	Workers' Comp South (Admin)	Workers' Comper South (Premium)	Workers South (P	OSHA RNO	Workers' Compe	Workers' Com South (Admin)	Workers' Comp South (Admin)	Workers South (P	Workers' Com	Workers' Comp North (Admin)
Contractor's Board	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
Secretary of State	PERMANENTLY REVOKED	REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	DISSOLVED	DISSOLVED	DISSOLVED	NO RECORD	NO RECORD	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	NO RECORD	CANCELLED	NO RECORD	NO RECORD	EXPIRED	NO RECORD	DISSOLVED	NO RECORD
Reason for Write-off Recommendation	500.00 COLLECTION EFFORTS UNSUCCESSFUL	573.75 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	S00.00 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	2,500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	S00.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	2,025.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	S00.00 COLLECTION EFFORTS UNSUCCESSFUL	84.51 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due	500.00 CO	573.75 CO	2,396.21 (00	500.00	500.00	82.85 CO	274.37 CC	500.00 CC	7,500.00 CC	25,391.59 CC	172.66 CC	2,500.00 CC	4,479.48 CC		500.00	2,312.26 CC	329.75 CC	2,025.00	79.78 CC	500.00	500.00	27,072.70	200.00	84.51 CC
Amount Collected	- *	34			*	,		×		(9)		×								18	110			803.75
Amount Assessed	500.00	573.75	2,396.21	500.00	200.00	82.85	274.37	500.00	7,500.00	25,391.59	172.66	2,500.00	4,479.48	200.00	500.00	2,312.26	329.75	2,025.00	79.78	500.00	500.00	27,072.70	500.00	888.26
Type of Penalty	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	RECOVERIES	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE
More than 36 months		Yes		Yes		Yes		S		es		se,	(es	(es	Yes	SS.	(es	(es	Yes	les	Yes	,es	Yes	, es
Number of Months Since Initial Invoice	111 Yes	46 7	116 Yes	711 Y	116 Yes	115	148 Yes	148 Yes	98 Yes	111 Yes	118 Yes	115 Yes	49 Yes	169 Yes	157	114 Yes	113 Yes	50 Yes	150	150 Yes	117	116 Yes	114 Yes	162 Yes
Date of Initial Invoice	09/26/14	02/16/20	04/25/14	04/07/14	05/02/14	06/06/14	09/09/11	09/09/11	10/29/15	09/30/14	02/14/14	05/20/14	11/27/19	12/09/09	11/24/10	06/20/14	07/16/14	10/10/19	06/10/11	06/10/11	03/14/14	04/25/14	06/13/14	06/11/10
Business Entity/ Debtor23	HENDERSON PRESS, INC IN DEFAULT STATUS AND ERIC BUSKIRK, INDIVIDUALLY	Himonic LLC	HOLIDAY CAPITAL GROUP LLC DBA BAYMONT INN & SUITES AND BRIAN MIKAIL	HOLIDAY CAPITAL GROUP LLC DBA BAYMONT INN & SUITES AND BRIAN MIKAIL	INTERNATIONAL BUFFET CORPORATION DBA LEE'S BUFFET	IPHONE DOCTOR LLC	IRON HORSE DEVELOPMENT LLC DBA IRON HORSE REAL ESTATE DEVELOPMENT	IRON HORSE DEVELOPMENT LLC DBA IRON HORSE REAL ESTATE DEVELOPMENT	ISELA R SIDA DBA ALEXAS CLEANING SERVICE LLC	ISELA R. SIDA DBA ALEXAS CLEANING SERVICES, LLC	J E CHURCH LLC DBA GIOVANNI'S PIZZA	J E CHURCH LLC DBA GIOVANNI'S PIZZA IN DEFAULT STATUS AND JOHN E CHURCH, INDIVIDUALLY	Jackson, Bob	JAMES H CHILDS DBA CKAANA CORPORATION / THE CW GROUP	JAMES H CHILDS DBA CKAANA CORPORATION / THE CW GROUP	JED STARKMAN DBA BRANCH CLEANERS	JED STARKMAN DBA BRANCH CLEANERS	Jeff Long dba: Nevada Structure Movers	JERRY LALL DBA COVERALL AWNINGS	JERRY LALL DBA COVERALL AWNINGS	JESSE FERREIRA DBA 808 AUTOMOTIVE PERFORMANCE	JOHN GABRIELLO, AN INDIVIDUAL DBA TAILWINDS	JONATHAN B GOLDSMITH LTD DBA THE GOLDSMITH LAW FIRM, IN DISSOLVED STATUS	JOSE JESUS GONZALEZ TRUCKING
# DIR#	101 DIR2881	102 DIR5080	103 DIR2741	104 DIR2741	105 DIR2785	106 DIR2801	107 DIR2009	108 DIR2009	109 DIR2922	110 DIR2824	111 DIR2823	112 DIR2809	113 DIR3345	114 DIR2021	115 DIR2022	116 DIR2773	117 DIR2811	118 DIR4693	119 DIR1550	120 DIR1550	121 DIR2876	122 DIR2426	123 DIR2787	124 DIR763

Section		Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)	Workers' Compensation North (Premium)	Workers' Compensation	Workers' Compensation South (Admin)	Workers' Compensation North (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)	Workers' Compensation North (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)
Contractor's	Board	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	O RECORD	NO RECORD	REVOKED	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	REVOKED	NO RECORD	NO RECORD				
	Secretary of State	PERMANEN LY REVOKED	NO RECORD	EXPIRED	DISSOLVED	DISSOLVED	PERMANENTLY REVOKED	EXPIRED	REVOKED	DEFAULT	EXPIRED	DISSOLVED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	ADMINISTRATIVE HOLD	REVOKED	DISSOLVED	DISSOLVED	DISSOLVED	DISSOLVED	REVOKED	REVOKED	PERMANENTLY REVOKED	REVOKED	REVOKED
Reason for Write-off Recommendation		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSEUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL		500.00 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	722.90 COLLECTION FEFORTS LINSLIFCESSELL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	_	140.14 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	584.89 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	169.47 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	185.67 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due		125.00	2,116.87	500.00	200.00	35.89	500.00	500.00	73.26	4,528.55	500.00	500.00	722.90	1,250.00	500.00	2,856.00	140.14	500.00	584.89	500.00	500.00	169.47	500.00	185.67	500.00
Amount		,	¥	34			N			•		,				,		1					•	9.5	11
Amount Assessed		125.00	2,116.87	200.00	200.00	35.89	500.00	500.00	73.26	4,528.55	500.00	200.00	722.90	1,250.00	\$00.00	2,856.00	140.14	500.00	584.89	500.00	200.00	169.47	500.00	185.67	500.00
Type of Penalty			RECOVERIES	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE
More than 36 months		es							Yes				Ş	es	Yes	(es	(es	sə,	(es	,es	les	res	res	res	Yes
Number of Months Since	mulai myore	113 Yes	47 Yes	113 Yes	92 Yes	92 Yes	116 Yes	177 Yes	V 86	134 Yes	111 Yes	169 Yes	151 Yes	144 Yes	154	49 Yes	114 Yes	114 Yes	165 Yes	165 Yes	110 Yes	164 Yes	149 Yes	119 Yes	113 Yes
Date of Initial		07/22/14	01/29/20	07/11/14	05/05/16	05/05/16	04/25/14	03/11/09	10/28/15	10/10/12	09/30/14	11/20/09	05/11/11	01/02/12	02/18/11	11/20/19	06/20/14	06/20/14	04/09/10	04/09/10	10/28/14	04/26/10	07/20/11	01/27/14	07/11/14
Business Entity/ Debtor23	MOIITO BREEZE 11 CAND GABOR CZINE	ZSOLT VOJTKO, INDIVIDUALLY	151 DIR4588 MSO Transportation LLC	NANCY FRITZ DBA EEBEE'S VAPOR	NANOTECH ENTERTAINMENT INC	NANOTECH ENTERTAINMENT INC	NEEDHAM AUTO DESIGN LLC AND CHRISTY NEEDHAM AND SHAWN NEEDHAM, INDIVIDUALLY	NEIL TELFORD DBA TLC PAINTING	NEXT GENERATION KIDS LANGUAGE ACADEMY INC	NOCA REPAIRS, INC.	NOELIA SALCEDO DBA J & J AUTO SOUND	NORCROSS SERVICE STATION	OPM DISTRIBUTING DBA WHOLESALE CONNECTION IN REVOKED STATUS MIKE EVANGELISTA INDIVIDUALLY AND AS TRUSTEE OF OPM DISTRIBUTING DBA WHOLESALE CONNECTION IN REVOKED STATUS	OPM DISTRIBUTING DBA WHOLESALE CONNECTION IN REVOKED STATUS MIKE EVANGELISTA INDIVIDUALLY AND AS TRUSTEE OF OPM DISTRIBUTING DBA WHOLESALE CONNECTION IN REVOKED STATUS	OPTIMUM AIR, INC.	Orcon, Inc	OVER EASY GRILL, INC. DBA ELEGANT FLOWERS	OVER EASY GRILL, INC. DBA ELEGANT FLOWERS	PAINTWORKS, INC.	PAINTWORKS, INC.	PATRICIA MORALES DBA DANUVIAL SERVICE SOLUTIONS	PATRICIA MORALES DBA DANUVIAL SERVICE SOLUTIONS	PATTON & PATTON MARBLE & GRANITE INC.	PETE'S PARKING, LLC	173 DIR2776 PETE'S PARKING, LLC
# DIR#		150 DIR2804 7	151 DIR4588	152 DIR2850 [	153 DIR3523	154 DIR3523	155 DIR2789	156 DIR1911	157 DIR3319	158 DIR2663	159 DIR2924	160 DIR2047	161 DIR2280	162 DIR2280	163 DIR1511	164 DIR3349	165 DIR2790	166 DIR2790	167 DIR1497	168 DIR1497	169 DIR3429	170 DIR3429	171 DIR1422	172 DIR2776	173 DIR2776

Section	Workers' Compensation South (Premium)	Workers' Compensation	South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation	South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation	Workers' Compensation	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation North (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	OSHA RNO	Workers' Compensation North (Admin)	Uninsured Employers' Claims Account	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)
Contractor's Board			NO RECORD	NO RECORD		NO RECORD	NO RECORD	NO RECORD	NO RECORD		NO RECORD					NO RECORD	NO RECORD	ED ED		NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
Secretary of State	NO RECORD	NTLY		PERMANENTLY REVOKED	PERMANENTLY	REVOKED	DISSOLVED	DISSOLVED	DEFAULT	PERMANENTLY REVOKED	CONVERTED OUT/PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	NO RECORD	PERMANENTLY REVOKED	EXPIRED	EXPIRED	NO RECORD	NO RECORD	PERMANENTLY REVOKED	NO RECORD	MERGED	PERMANENTLY REVOKED	NO RECORD	NO RECORD	PERMANENTLY REVOKED
Reason for Write-off Recommendation	COLLECTION EFFORTS UNSUCCESSFUL		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL		COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	S00.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	174.94 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	121.39 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	23,127,62 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	1,405.14 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	594.08 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due	4,134.88		309.73	200.00		101.81	92.15	500.00	200.00	500.00	1,000.00	92.93			500.00	121.39	500.00	23,127.62	288.68	1,000.00		500.00	4,537.56	500.00	2,100.00	500.00	1,405.14	500.00	594.08
Amount	-		1	,			1			24	*		114				30			= *	,		,					٠	
Amount Assessed	4,134.88	C C C C C	309.73	200.00	30	101.81	92.15	500.00	500.00	500.00	1,000.00	92.93	1,000.00	174.94	500.00	121.39	500,00	23,127.62	288.68	1,000.00	2,208.30	200.00	4,537.56	500.00	2,100.00	500.00	1,405.14	500.00	594.08
Type of Penalty	PREMIUM PENALTY		PREMIUM PENALLY	ADMINISTRATIVE FINE		PREMIUM PENALLY	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY		PREMIUM PENALTY		PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	RECOVERIES	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	RECOVERIES	ADMINISTRATIVE FINE	PREMIUM PENALTY
More than 36 months	Yes		11/ res	116 Yes		IID Yes	115 Yes	115 Yes	115 Yes	114 Yes	115 Yes	111 Yes		Yes	115 Yes	116 Yes	114 Yes	114 Yes	112 Yes	131 Yes	49 Yes	191 Yes	111 Yes	166 Yes	50 Yes	98 Yes	50 Yes	194 Yes	111 Yes
Number of Months Since Initial Invoice	109		7	11			11	11	11	11	11	11	11	п	11	11	11	11	11	13		16	11	16	5,			15	11
Date of Initial Invoice	11/26/14	0.0100100	04/01/14	04/25/14	or look of	05/30/14	05/13/14	05/13/14	06/09/14	06/20/14	05/30/14	09/26/14	09/30/14	04/25/14	05/13/14	04/25/14	06/20/14	06/13/14	09/05/14	01/15/13	11/27/19	02/08/08	09/26/14	02/26/10	10/10/19	10/15/15	11/06/19	10/19/07	09/30/14
Business Entity/ Debtor23	PHILLIPE-ALAINE ABARD DBA CREATIVE CUSTOM AWNINGS	on sustance	POOL FIXERS, LLC	POOL FIXERS, LLC	POPPY DEN VEGAS LLC DBA POPPY DEN	VEGAS	POSH, INC. DBA SHAUNZ	POSH, INC. DBA SHAUNZ	PRECISION SPECIALTY PHARMACY CORPORATION	PRIME CHOICE HOME HEALTH, LLC	R66T, LLC AND RICHARD M HALL INDIVIDUALLY	RANDAL R LEONARD, LTD	RANDAL R LEONARD, LTD	RANDAL R. LEONARD LTD	RANDAL R. LEONARD LTD	RAZO BALTAZAR DBA TOW AMIGOS LAWN SERVICE	RAZO BALTAZAR DBA TOW AMIGOS LAWN SERVICE	REDDING DRILLING & PUMP SERVICE AND THOMAS L LANGFORD, MURRELL E REDDING JR, INDIVIDUALLY	REGINALD NOLES DBA DOTS SOUTHERN KITCHEN	RENEE O'BRIEN DBA BRONZE BODY TANNING	Reynolds, Gary	RICK GYSELAAR DBA AIR SOURCE AIR CONDITIONING AND HEATING	RJB ENTERPRISES, INC. DBA ENVIRO PRO BUILDING SERVICES	ROD WIGGINS DBA ADOBE MOBILE HOME CONSTRUCTION	Romano's Marcaroni Grill, Inc	ROXUL USA INC	S & R Auto Body	S HANDS CLEANING SERVICES INC.	SACY GROUP, INC. DBA MAPLE CLEANERS IN REVOKED STATUS AND MI SHIN, INDIVIDUALLY
# DIR#	174 DIR2887		1/3 DIN2/44	176 DIR2744	20000	111 DIR2/91	178 DIR2760	179 DIR2760	180 DIR2796	181 DIR2792	182 DIR2797	183 DIR2883		185 DIR2745	186 DIR2745	187 DIR2746	188 DIR2746	189 DIR2825	190 DIR2851	191 DIR2245	192 120	193 DIR1244	194 DIR2852	195 DIR1325	196 DIR4694	197 DIR3396	198 DIR5431	199 DIR1379	200 DIR2880

Section	Workers' Compensation South (Admin)	Workers' Compensation North (Admin)	Workers' Compensation North (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Uninsured Employers' Claims Account	Workers' Compensation South (Premium)	Mechanical Compliance	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation	Workers' Compensation South (Admin)	Workers' Compensation South (Admin)	Workers' Compensation South (Premium)	Workers' Compensation South (Admin)
Contractor's Board	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	REVOKED	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD	NO RECORD
Secretary of State	PERMANENTLY REVOKED	DEFAULT	NO RECORD	PERMANENTLY REVOKED	PERMANENTLY REVOKED	DEFAULT	REVOKED	PERMANENTLY REVOKED	WITHDRAWN	NO RECORD	PERMANENTLY REVOKED	EXPIRED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	PERMANENTLY REVOKED	NO RECORD	PERMANENTLY REVOKED	DEFAULT	DEFAULT	ADMINISTRATIVE HOLD	ADMINISTRATIVE HOLD
Reason for Write-off Recommendation	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	340.55 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL		500.00 COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	375.00 COLLECTION EFFORTS UNSUCCESSFUL	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	37.79 COLLECTION EFFORTS UNSUCCESSFUL	500.00   COLLECTION EFFORTS UNSUCCESSFUL	COLLECTION EFFORTS UNSUCCESSFUL	369.86 COLLECTION EFFORTS UNSUCCESSFUL	500.00 COLLECTION EFFORTS UNSUCCESSFUL
Balance Due	500.00	500.00	281.21		500.00	340.55	51,186.12	145.87	120.00	500.00	500.00	1,657.39	147.55	500.00	15.80	\$00.00	3.86	5,000.00	375.00	1,000.00	37,79	500.00	500.00	369.86	200.00
Amount			718.79	•		- 1	314			190		498.50	*	50		'	22.52		-4		444.01	300	*	(8)	12.
Amount Assessed	500.00	200.00	1,000.00	500.00	500.00	340.55	51,186.12	145.87	120.00	500.00	800.00	2,155.89	147.55	500.00	15.80	500.00	26.38	5,000.00	375.00	1,000.00	481.80	500.00	500.00	369.86	500.00
Type of Penalty	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	RECOVERIES	PREMIUM PENALTY	INVOICE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE	ADMINISTRATIVE FINE	PREMIUM PENALTY	ADMINISTRATIVE FINE
More than 36 months	Yes	109 Yes	118 Yes	113 Yes	Yes	163 Yes	Yes	170 Yes	Yes	149 Yes	169 Yes	149 Yes	125 Yes	116 Yes	TTI Yes	111 Yes	1 Yes	1 Yes	155 Yes	130 Yes	190 Yes	113 Yes	115 Yes	141 Yes	141 Yes
Number of Months Since Initial Invoice	111	100	118	113	711	163	46	17(	106	14	16	14	12	11	я	11	131	111	15	13	1.9	11	11	14	14
Date of Initial Invoice	09/30/14	12/03/14	03/06/14	07/23/14	03/21/14	05/19/10	02/16/20	10/21/09	02/23/15	07/15/11	12/07/09	08/01/11	07/24/13	04/25/14	09/30/14	09/30/14	01/18/13	09/30/14	01/12/11	03/04/13	02/28/08	07/30/14	05/21/14	03/12/12	03/12/12
Business Entity/ Debtor23	SACY GROUP, INC. DBA MAPLE CLEANERS IN REVOKED STATUS AND MI SHIN, INDIVIDUALLY	SERGIO BARRAZA DBA BULLDOG DELIVERY LLC	SIERRA AUTOSPORT LLC	SIMPLY THE BEST LLC	SITARAM LLC DBA HEAD 2 TOW SALON AND AMIT SHUKLA, DILIP R SHUKLA, DIPTI D SHUKLA AND SEJAL U SHUKLA, INDIVIDUALLY	SKYVIEW CORP DBA MOTOR MISSION EXCHANGE	Southwest Childcare Enterprises inc	SPS GROUP INC.	SPT Management Services dba 27 Hwy 50	STUART FRIEDMAN DBA ART SHOWS OF AMERICA	SUNRISE PERSONAL CARE LLC	TERESA TOWNS DBA TENDER CARE	THE EMERITUS GROUP LLC DBA EXCLUSIVE AUTOMOTIVE AND SCOTT YELEY INDIVIDUALLY	THE EMERITUS GROUP LLC DBA EXCLUSIVE AUTOMOTIVE AND SCOTT YELEY INDIVIDUALLY	THE HAMBLEY FAMILY AGENCY, LLC.IN DEFAULT STATUS AND USA M HAMBLEY, INDIVIDUALLY	THE HAMBLEY FAMILY AGENCY, LLC IN DEFAULT STATUS AND LISA M HAMBLEY, INDIVIDUALLY	THE HAMMER BAR & GRILL LLC DBA THE HAMMER BAR & GRILL	THE HAMMER BAR & GRILL, LLC DBA HAMMER & ALES	THOMAS G. INMAN DBA SOUTHWESTERN FLOORS LLC	TMX FINANCE LLC ATTN: LINA WALLS BENEFIT ADMINISTRATOR	TORTILLA FACTORY OF WINNEMUCCA LLC	TWO MAGIC CABINETS, LLC	U.S. CLEANING SERVICES, INC.	UNITY ONE, INC.	225 DIR2173 UNITY ONE, INC.
# DIR #	201 DIR2880 II	202 DIR3060 L	203 DIR3314 S	204 DIR2793 S	205 DIR2788 S	206 DIR1455 E	207 DIR4145 S	208 DIR1823 S	209 DIR3269 S	210 DIR1909 A	211 DIR1892 S	212 DIR1778	213 DIR2672	7 7 1 214 DIR2672	DIR2885 I	DIR2885	217 DIR2346	DIRZ853			221 DIR3563		223 DIR2756	224 DIR2173	225 DIR2173

Date of Business Entity/ Debtor23 Initial Invoice	Date of Initial Invoice		Number of Months Since 3 Initial Invoice	More than 36 months	Type of Penalty	Amount Assessed	Amount	Balance Due	Reason for Write-off Recommendation	Secretary of State	Contractor's Board	Section
11/06/19 50 Yes	SO Yes	SO Yes		끭	RECOVERIES	5,458.99	1	5,458.99	COLLECTION EFFORTS UNSUCCESSFUL	EXPIRED	NO RECORD	Uninsured Employers' Claims Account
VEGAS GRAND INVESTMENTS, INC.DBA FLAMINGO 24 HAND CAR WASH O1/20/10 167 Yes ADM	167 Yes	167 Yes		ADM	ADMINISTRATIVE FINE	200.00	*3	500.00	500.00 COLLECTION EFFORTS UNSUCCESSFUL	PERMANENTLY REVOKED	NO RECORD	Workers' Compensation South (Admin)
222 DIR3315 VELO RENO INC DBA BICYCLE WAREHOUSE 07/23/15 101 Yes ADM	101 Yes	101 Yes		ADIV	ADMINISTRATIVE FINE	1,000,00	٠	1,000.00	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Admin)
229 DIR3315 VELO RENO INC DBA BICYCLE WAREHOUSE 07/23/15 101 Yes PREN	101 Yes	101 Yes		PREN	PREMIUM PENALTY	9.46		9.46	9.46 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Premium)
230 DIR3023   VELO RENO INC. 10/21/14 110   Yes   PRE	110 Yes	110 Yes		PRE	PREMIUM PENALTY	56.76		56.76	56.76 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Premium)
231 DIR3026   VELO RENO INC. 11/07/14 110   Yes ADM	110 Yes	110 Yes		ADIV	ADMINISTRATIVE FINE	1,000.00		1,000.00	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Admin)
VELO RENO INC. 09/24/14 111 Yes ADV	111 Yes	111 Yes		AD	ADMINISTRATIVE FINE	1,000.00		1,000.00	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Admin)
233 DIR2413 VELO RENO, INC. DBA BICYCLE WAREHOUSE 06/12/13 126 Yes PREI	126 Yes	126 Yes		PRE	PREMIUM PENALTY	484.84	61.79	423.05	423.05 COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Premium)
234 DIR2867 VELO RENO, INC. DBA BICYCLE WAREHOUSE 06/20/14 114 Yes PRE	114 Yes	114 Yes		PRE	PREMIUM PENALTY	21.66	,	21.66	COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Workers' Compensation North (Premium)
235 DIR1995 VICTOR BURCIAGA 11/29/06 205 Yes PRE	205 Yes	205 Yes		PRE	PREMIUM PENALTY	125.25		125.25	125.25 COLLECTION EFFORTS UNSUCCESSFUL	NO RECORD	NO RECORD	Workers' Compensation South (Premium)
236 DIR5179 Vidur S Mahadeva, MD dba Wells Ave Clinic 05/12/15 103 Yes ADN	103 Yes	103 Yes		ADN	ADMINISTRATIVE FINE	19,002.00		19,002.00	19,002.00 COLLECTION EFFORTS UNSUCCESSFUL	NO RECORD	NO RECORD	OSHA RNO
11/27/19 49 Yes	49 Yes	49 Yes		REC	RECOVERIES	141.49		141.49	141.49 COLLECTION EFFORTS UNSUCCESSFUL	NO RECORD	NO RECORD	Uninsured Employers' Claims Account
07/29/11 149 Yes	149 Yes	149 Yes		PREN	PREMIUM PENALTY	61.32	•	61.32	61.32 COLLECTION EFFORTS UNSUCCESSFUL	REVOKED	NO RECORD	Workers' Compensation South (Premium)
WILLIAM AND ADELA JACOBS DBA LA 239 DIR1599 CABANA MEXICAN RESTAURANT 04/11/14 116 Yes ADM	116 Yes	116 Yes		ADM	ADMINISTRATIVE FINE	200.00		500.00	500.00 COLLECTION EFFORTS UNSUCCESSFUL	REVOKED	NO RECORD	Workers' Compensation South (Admin)
11/06/19 50 Yes	50 Yes	50 Yes		REC	RECOVERIES	20,610.06	(8)	20,610.06	20,610.06 COLLECTION EFFORTS UNSUCCESSFUL	EXPIRED	NO RECORD	Uninsured Employers' Claims Account
08/28/14 112 Yes	112 Yes	112 Yes		ADM	ADMINISTRATIVE FINE	7,500.00		7,500.00	7,500.00   COLLECTION EFFORTS UNSUCCESSFUL	ADMINISTRATIVE HOLD	NO RECORD	Workers' Compensation South (Admin)
WOLDESELASIE MEKONNEN DBA MERKATO 242 DIR2698 ETHIOPIAN CAFÉ & MARKET 11/20/13 121 Yes PREI	121 Yes	121 Yes		P.R.E.	PREMIUM PENALTY	8,828.05	E4	8,828.05	COLLECTION EFFORTS UNSUCCESSFUL	ADMINISTRATIVE HOLD	NO RECORD	Workers' Compensation South (Premium)
243 DIR3262 Woori, Inc. 12/31/14 108 Yes INV	108 Yes	108 Yes		≧	INVOICE	40.00	1 63	40.00	COLLECTION EFFORTS UNSUCCESSFUL	DEFAULT	NO RECORD	Mechanical Compliance
244 DIR2925 WWW HTINESS INC. DBA EXPRESS FITNESS 07/21/17 77 Yes ADA	77 Yes	77 Yes		ADV	ADMINISTRATIVE FINE	200.00	*	500.00	COLLECTION EFFORTS UNSUCCESSFUL	REVOKED	NO RECORD	Workers' Compensation South (Admin)
245 DIR2774 YI JANETTE C DBA SUSHI ON TROPICANA 05/30/14 115 Yes PREN	115 Yes	115 Yes		PREN	PREMIUM PENALTY	37.68	1 14	37.68	COLLECTION EFFORTS UNSUCCESSFUL	PERMANENTLY REVOKED	NO RECORD	Workers' Compensation South (Premium)
PICANA 05/30/14 115 Yes	115 Yes	115 Yes		P P	ADMINISTRATIVE FINE	1,000.00	'	1,000.00	1,000.00 COLLECTION EFFORTS UNSUCCESSFUL	PERMANENTLY REVOKED	NO RECORD	Workers' Compensation South (Admin)
09/30/11 147 Yes	147 Yes	147 Yes		8	PREMIUM PENALTY	98.44		98.44	COLLECTION EFFORTS UNSUCCESSFUL	PERMANENTLY REVOKED	NO RECORD	Workers' Compensation South (Premium)
248 DIR1604         RESTAURANT         09/30/11         147 yes         AD	147 Yes	147 Yes		A	ADMINISTRATIVE FINE	500.00	97	500.00	500.00 COLLECTION EFFORTS UNSUCCESSFUL	PERMANENTLY REVOKED	NO RECORD	Workers' Compensation South (Admin)



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

**Amy Stephenson** Director

**David Johnson Deputy Director** 

> **Curtis Palmer Administrator**

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

Date:

February 16, 2024

To:

Amy Stephenson, Clerk of the Board

Governor's Finance Office

From:

Budd Milazzo, Executive Branch Budget Officer

Governor's Finance Office

Subject:

BOARD OF EXAMINERS **ACTION** ITEM

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

## OFFICE OF THE ATTORNEY GENERAL

## Agenda Item Write-up:

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

Claimant:

**Lewis Stewart** 

Claim No:

TC20944

Settlement Amount: \$3,400,000 Date of Loss:

March 2, 2017

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

Lagomarsino Law 3005 W Horizon Ridge PKWY Ste 241 Las Vegas, NV 89052

## Additional Information:

A settlement agreement and full and final release of further claims has been entered for the total amount of \$3,400,000. Due to the amount of this claim and pursuant to NRS 353.264, the Attorney General's Office is requesting \$3,399,500 be paid from the Contingency Fund, with the remaining \$500 being paid by the Nevada Department of Corrections.

## **Statutory Authority:**

NRS 41.036 NRS 353.264

REVIEWED:	
ACTION ITEM:	

AARON D. FORD
Attorney General

CRAIG A. NEWBY
First Assistant Attorney General

CHRISTINE JONES BRADY Second Assistant Attorney General



## STATE OF NEVADA

## OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street Carson City, Nevada 89701

## TERESA BENITEZ-THOMPSON Chief of Staff

LESLIE NINO PIRO General Counsel

HEIDI PARRY STERN
Solicitor General

## **MEMORANDUM**

To:

Budd Milazzo, Executive Branch Budget Officer

From:

Nancy Katafias, Tort Claims Manager

Date:

January 31, 2024

Subject:

BOE Agenda Submittal for Stewart, Lewis

Please place the following item on the March 12, 2024, Board of Examiner's agenda for approval. Upon approval, it is requested that this payment be processed through the Statutory Contingency Fund.

Pursuant to NRS 353.264, payment of a claim which is an obligation pursuant to NRS 41 will be paid by the Statutory Contingency Fund if the money in the Fund for Insurance Premiums is insufficient to pay the claim.

Currently, category 15 of budget 1348 has a balance of \$39,167.79. Category 86, the reserve category, has a balance of \$2,566,511. Not including this settlement payment, the projected spending for category 15 until the end of the fiscal year is \$3,365,188.

Plaintiff:

Lewis Stewart

Claim No.:

TC 20944

Payment:

\$3,400,000 with the NDOC to pay \$500 and the Statutory Con-

tingency Fund to pay \$3,399,500 on behalf of the tort fund.

Payable to:

Lagomarsino Law

3005 W Horizon Ridge Pkwy Ste 241

Las Vegas NV 89052

Pursuant to the settlement agreement, if approved, payment is to be made within 30 days after the BOE approval.

## TORT CLAIM RECOMMENDATION

DATE:

January 26, 2024

CLAIMANT:

Lewis Stewart

CLAIM NUMBER:

TC20944

DATE OF LOSS:

March 2, 2017

AGENCY:

NDOC/SDCC

## DISCUSSION

In the lawsuit filed against the Nevada Department of Corrections (NDOC), the now released inmate alleged a constitutional violation regarding medical deliberate indifference while he was incarcerated.

After a six-day jury trial, a judgment amount of \$4,500,000 was awarded to the plaintiff. The NDOC appealed the verdict. To avoid the costs of continued litigation, the increasing amount of interest on the awarded amount and the uncertainty of future rulings, the case was settled with payment in the amount of \$3,400,000. This amount settles everything related to this case, including all attorney fees and costs and any post judgment interest.

## RECOMMENDATION

It is recommended that the claim be paid in the amount of \$3,400,000 with the NDOC to pay \$500 and the Statutory Contingency Fund to pay \$3,399,500 on behalf of the tort fund.

**RECOMMENDATION: PAY** 

G/L <u>7357</u>

Lagomarsino Law

3005 W Horizon Ridge Pkwy Ste 241

Las Vegas NV 89052

Approved:

Nancy Katafias

January 26, 2024

NANCY KATAFIAS, CLAIMS MANAGER

DATE

Luslie Mins Pers

January 30, 2024

LESLIE NINO PIRO, GENERAL COUNSEL

DATE

## Settlement Agreement and Full and Final Release of Claims

Case Name: Stewart v. Aranas, et al.

Case Nos.: 3:17-cv-00132-MMD-CLB (D. Nev.); 20-15586 (Ninth Circuit); 23-3832 (Ninth Circuit), hereinafter referred to collectively as:

### "The Matter"

Plaintiff:	Defendants:
Lewis Stewart	Romeo Aranas, Cheryl Burson, S.L. Clark, James G. Cox, James E. Dzurenda, Angie Jones, Francisco M. Sanchez, Sean Su, Brian E. Williams, State of Nevada ex rel. Nevada Department of Corrections, and Julie and John Does, I-V.

This Settlement Agreement and Full and Final Release of Claims ("Agreement") is made and entered into by Plaintiff Lewis Stewart (the "Plaintiff") and the State of Nevada ex rel. Nevada Department of Corrections, on behalf of Defendants Romeo Aranas, Cheryl Burson, S.L. Clark, James G. Cox, James E. Dzurenda, Angie Jones, Francisco M. Sanchez, Sean Su, Brian E. Williams, and State of Nevada ex rel. Nevada Department of Corrections (jointly referred to as "NDOC"). This Agreement is being entered into by Plaintiff and NDOC (each a "Party" and, collectively, the "Parties") because each of them has determined that resolving this Matter by way of settlement is preferable than continuing to litigate this Matter before the U.S. District Court for the District of Nevada ("District Court").

Plaintiff and NDOC have agreed to resolve all claims raised in this Matter on the following terms:

- 1. The State of Nevada, on behalf of NDOC and all named (and unnamed) defendants, upon approval from the Board of Examiners ("BoE") will pay the Plaintiff the sum of \$3,400,000.00 (THREE MILLION FOUR HUNDRED THOUSAND and NO/100 DOLLARS) ("Settlement Amount") to be disbursed to Plaintiff's counsel as further set forth in paragraph 5 of this Agreement.
- 2. As this Agreement requires payment of more than \$100,000, this Agreement must be approved by the BoE. NDOC will present this Settlement to the BoE for approval at the next available meeting following the signatures of all Parties, which is anticipated to be the March 2024 meeting. Should the March 2024 meeting be cancelled, or this Agreement is not finalized in time to be put before the BoE at the March 2024 meeting, the Parties agree it will be placed on the April 2024 meeting agenda. NDOC's counsel shall promptly notify Plaintiff's counsel of whether the BoE approved, denied, or otherwise acted upon the Agreement.
  - a. In the event the BoE does not approve this Agreement, neither Party is bound by any term in this Agreement.

- b. In the event the BoE does not approve this Agreement, the Parties, including Plaintiff, are free to continue to litigate the Matter (including post-judgment motions and appeals), or, at the Parties' discretion, continue to attempt to negotiate a settlement of this Matter, understanding that any future settlement terms that may be agreed to between the Parties may also be subject to BoE approval.
- 3. In consideration of the Agreement above, Plaintiff has agreed to permit his counsel to sign a Stipulation and Order to Dismiss the Matter at the same time as signing this Agreement. The Parties consider the Stipulation and Order to Dismiss part of this Agreement. Counsel for either Plaintiff or NDOC shall file the signed Stipulation and Order to Dismiss into the docket in this matter after NDOC has complied with the terms set forth in Paragraph 1 of this Agreement. This will terminate all claims raised in this Matter.
  - a. NDOC will comply with the terms set forth in paragraph 1 of this Agreement within thirty (30) days after BoE approval of the Agreement as set forth in paragraph 2 of this Agreement.
  - b. Notwithstanding NDOC's obligation to comply with the terms set forth in paragraph 1 within thirty (30) days after BoE approval, Plaintiff understands that there could be unforeseen circumstances that could result in NDOC needing a brief extension of time to comply. Understanding this potential, Plaintiff agrees that, if NDOC has not complied with the terms of this Agreement by the time set forth in paragraph 3(a), Plaintiff's counsel will meet and confer with NDOC's counsel prior to filing any Motion to Enforce this Agreement. Plaintiff also agrees that any Motion to Enforce will only be filed after providing NDOC and its counsel an additional fourteen (14) days to comply with the terms of this Agreement. Should NDOC not comply with the Agreement, the District Court will retain total control over any and all rulings until such time as the Stipulation and Order to Dismiss is filed, signed, and entered by the District Court.
  - c. The signed Stipulation and Order to Dismiss will be filed by Plaintiff's or NDOC's counsel within seven (7) days of NDOC's compliance with the terms set forth in paragraph 3(a). This will terminate all claims raised in the Matter.
- 4. NDOC agrees to voluntarily dismiss the appeal pending before the Ninth Circuit Court of Appeals, Case No. 23-3832. Plaintiff agrees to allow his counsel to work cooperatively NDOC's counsel to ensure that the dismissal of the pending appeal before the Ninth Circuit of Appeals is dismissed, which could possibly require a signature on a Stipulation to Dismiss or Joint Motion of Voluntary Dismissal.
- 5. Plaintiff is represented in this Matter by counsel: Cristina A. Phipps and Andre M. Lagomarsino of Lagomarsino Law, and Paul S. Padda of Paul Padda Law, PLLC ("Plaintiff's counsel"). Plaintiff and Plaintiff's counsel have separately negotiated and agreed upon an apportionment of the Settlement Amount. NDOC will disburse the Settlement Amount as instructed by Plaintiff's counsel. The following apportionment of

the Settlement Amount is reported to fulfill the Parties' obligations under NRS 41.0375(1)(b):

- a. \$1,440,588.39 to be disbursed to Plaintiff via Plaintiff's counsel's trust account.
- b. \$1,700,000.00 in attorney's fees to be disbursed directly to Plaintiff's counsel.
- c. \$259,411.61 in costs to be disbursed directly to Plaintiff's counsel.
- d. Plaintiff and Plaintiff's counsel understand that the amounts in paragraphs 5(a)-(c), totaling \$3,400,000.00, will be paid in two separate installments, one in the amount of \$500.00 that will be paid by NDOC, with the remaining \$3,399,500.00 being paid by the State of Nevada's Tort Fund.
- e. Plaintiff understands that the amounts to be dispersed by the State of Nevada's Tort Fund may be provided either in the same check as the amount contained in paragraph 5(d) or in separate checks, but that in either scenario, the total amount paid by the State of Nevada's Tort Fund will be \$3,399,500.00, with an additional \$500.00 being paid by the NDOC, for a total payment of \$3,400,000.00 to fulfil the agreed Settlement Amount set forth in paragraph 1.
- 6. This Agreement represents a mutual release of all claims related to or arising out of this Matter, or any facts pertinent to or underlying this Matter. The Plaintiff and NDOC understand that they are entering into a comprehensive settlement that is meant to represent a complete release of all claims related to the Matter.
  - a. Plaintiff understands that, by entering into this Agreement, he releases the State of Nevada, NDOC, and any of the State of Nevada and NDOC's current and former employees, agents, and representatives from all known and unknown charges, claims, causes of actions, obligations, promises, rights, or demands for any and all amounts paid as part of this Agreement, whether paid to Plaintiff or to Plaintiff's counsel as fees and cost paid or incurred in connection with this Matter.
  - b. Plaintiff releases the State of Nevada from any past, current, or future lien asserted on his behalf for any Medicare benefits that may be payable on his behalf regarding any and all claims related to the Matter. Plaintiff will be solely responsible for fulfilling any lien imposed by Medicare regarding any and all claims related to the Matter.
  - c. Plaintiff releases the State of Nevada from any past, current, or future lien asserted on his behalf for any insurance benefits, including but not limited to private health insurance that may be payable on his behalf regarding any and all claims related to the Matter. Plaintiff will be solely responsible for fulfilling any lien imposed by any insurer regarding any and all claims related to the Matter.
- 7. Plaintiff understands that the Dismissal of this Matter applies to: (a) all claims, including but not limited to state and federal claims, that were or could have been raised in this

Matter or that could have been brought in any proceeding in a court of appropriate jurisdiction; and (b) all Defendants that were or could have been named in the Matter, whether those Defendants are current or former employees of the State of Nevada or NDOC, and whether those Defendants are known or unknown.

- 8. Plaintiff understands that by entering this Agreement, neither NDOC nor any of the individually named defendants are making any admission of liability for the claims raised in the Matter.
- 9. Plaintiff understands that, other than the payments specified in paragraph 5 of this Agreement, neither he nor his counsel are entitled to any other payments, including, but not limited to, attorney fees and costs, filing fees, copy costs, or postage.
- 10. This Agreement shall be construed and interpreted in accordance with the laws of the State of Nevada. Should any court declare or determine any provision of this Agreement to be illegal or invalid, the validity of the remaining parts, terms, or provisions shall not be affected thereby, and said illegal or invalid part, term, or provision shall be deemed not to be a part of this Agreement. The Parties acknowledge that the Agreement has been drafted by both Parties, and, therefore, any ambiguity in the Agreement will not be construed in favor or against either Party.
- 11. This Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original, but all such counterparts shall together constitute one and the same Agreement.
- 12. Plaintiff and NDOC understand that the District Court retains jurisdiction over the Matter for purposes of enforcing this Settlement Agreement until the Stipulation and Order to Dismiss is granted. Once the District Court has signed the Stipulation and Order to Dismiss, and the case is dismissed, neither the District Court nor the Ninth Circuit Court of Appeals will have jurisdiction over this case.

IN WITNESS WHEREOF, and intending to be legally bound, each of the Parties has executed this Agreement as of the date(s) set forth below.

Plaintiff:	On behalf of NDOC:
By:	By: James Sch
Name: Lewis Stewart	Name: James E. Dzurenda
Date:1.29.24	Title: Director, NDOC
	Date: //30/2024

### LEASES SUMMARY

BOE #		LESSEE		LESSOR AMOUI				
1.		F HEALTH AND HUN NG AND DISABILITY	CHERYL MAY JOHNSTON & CRAIG RUSSELL JOHNSTON DBA 1994 JOHNSTON FAMILY TRUST	\$7,762,018				
1.		This is a relocation	١.					
		Term of Lease:	09/01/2024 - 08/31/2031	Located in Carson City				
		F HEALTH AND HUN SION OF WELFARE CES		KLOSSCO CRAIG ROAD, LLC	\$2,640,127			
2.		This is an extensio	n of an existing	lease.				
		Term of Lease:	07/01/2024 - 06/30/2029	Located in North Las Vegas				
	HIGHWAY PATRO	F PUBLIC SAFETY – DL – DIVISION OF PA VESTIGATIONS DIV	AROLE AND	BUCKINGHAM HOLDINGS, LLC	\$512,357			
3.		This is an extensio	n of an existing	j lease.				
		Term of Lease:	01/01/2024 - 12/31/2028	Located in Winnemucca				
	GOVERNOR'S OF PROJECTS	FICE – AGENCY FO	OR NUCLEAR	TASSAJARA PROPERTIES, LLC	\$231,726			
4.		This is an extensio		j lease.				
		Term of Lease:	04/01/2024 - 03/31/2028	Located in Carson City				
	DEPARTMENT OF ADMINISTRATION	F BUSINESS AND IN	IDUSTRY –	NFC, LLC	\$985,255			
5.		This is a relocation						
J.		Term of Lease:	05/01/2024 - 04/30/2029	Located in Las Vegas				
		BUSINESS AND IN USTRIAL RELATION	IS	NFC, LLC	\$6,134,041			
6.		This is a relocation						
		Term of Lease:	05/01/2024 - 0/30/2029	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.

F	or Budget Division Use On	ly ala	
Reviewed by:	UMI	2112	14
Reviewed by:		7110	TUN
Reviewed by:	17	مدلم	

				STA	ATEWIDE LEASE	E INFORMATION				
1.	Age	ency:	1 '		and Human Ser	vices				
			1 ~ ~		Services Division					
					ding D 132-Fisca	ll .				
			Carson City, Mariana Ace		89706					
			T: 775.687.4		l ny gov					
	Ren	narks:			approved by Dire					
	_							004		
	EXC	eptions/Special notes:				n July 15, 2024 through A s attached to Exhibit A, cເ			onth to mo	onth lease.
2	Les	caa.				Vorks Division, Building a				
						VOIKS DIVISION, Daliding a	na Grounds			
		ne of Lessor:	1994 Johnsto							
4.	Ada	ress of Lessor:	3485 Matanz Santa Rosa,							
5	Pror	perty contact:	Sperry Van N		3 00 10 1					
٥.	1 101	perty contact.	305 N. Carso		Suite 200					
			Carson City,							
			Dan Shaheer	า						
			T: 775.825.3	330 x 106	E: dan.shahee	en@svn.com				
6.	Add	ress of Lease property:	1550 College							
			Carson City,	Nevada 8	39706 					
	a.	Square Footage:	☑ Rentable							
	b.	Cost;	Usable cost per	44,456 # of	cost per year	time frame		Improvem	Rase	Actual
	ь.	0030	month	months	lood por your			ent	Rent	cost per
				in time		Abated Rent July 15, 20	_	cost per	cost per	square foot
				frame		August 31, 202	4	square	square	
			\$ 84,466.40	12	\$ 1,013,596.80	September 1, 2024 - Augus	st 31, 2025	\$0.00		\$1.90
			\$ 87,133.76	12		September 1, 2025 - Augus		\$0.00		
			\$ 89,801.12	12		September 1, 2026 - Augus		\$0.00		
				12		September 1, 2027 - Augus		\$0.00		
		3% 3%	\$ 95,135.84 \$ 97,803.20	12 12		September 1, 2028 - Augus September 1, 2029 - Augus		\$0.00 \$0.00		
			\$ 100,470.56	12		September 1, 2030 - Augus		\$0.00		
	C.	Total Lease Consideration		84						
	d.	Total Improvement Cost:						\$0.00		
	e. f.	Option to renew:	# of Days red		30 Renewal 365 Holdover		lentical Tern	n		
	ı. g.	Holdover notice:	Seven Years	uireu	363 Holdover	terms. 5%/90			_	
	h.		☑ Landlord	☐ Tenan	t					
	i.		☑ Landlord	☐ Tenan						
	j.		☑ Landlord	☐ Tenan		☑ 5 day ☐ Rural 3 day	Rural 5 c		Other (see spe	cial notes)
	k. I.	Repairs: [ Comparable Area Market Rat		andlord	Tenant	Minor: F of Office Space \$1.54 I	✓ Landlord	Ten		
	m.	Specific termination clause			Breach/Default la		vio only one	odiono or	ZOT OPGOC	
	n.	Lease will be paid for by A	gency Budget	Account	Number:	See Attached Budget Lis	t			15
7.	This	lease constitutes:		An exter	sion of an existin	ig lease				
						ilities (requires estimated	expenses)			
					,	imated expenses)				
						estimated expenses)				
				Remode Other	ling only					
	a,	Estimated Expenses:	Moving: \$0.00		Furnishin	gs: \$0.00 Data/P	hones: \$0.0	0		
	- 19					80				
					TEWIDE LEASE					
		understand that the Agen	-			of the Public Works Divi	ision / Leas	ing Servic	es, throu	gh the life
	of th	e lease and I hereby agre	e to pay suc	n assess	инепт.					
		HIS LEASE IS FOR A NEW							CE - PLE	ASE
		IFIRM THAT ALL ASSOCIA		ARE IN	CLUDED IN YOU	IR LEGISLATIVELY APP	ROVED BU	DGET.		
	Yes	s No Dec Un	at							

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

Rev. 08/08/2023

Page 1 of 2

1

Date

### For Public Works Information:

8. State of Nevada Business License Information:

a.	Is the Lessor a Nevada based business?		□NO
b.	Is the Lessor Exempt from obtaining a Business License?	☐ YES	☑ NO
	*If Yes, explain		8
c.	Does the Lessor have a current Nevada State Business License?	✓ YES	□ NO
	**If No, explain		27
d.	The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC INC	CORP   LP
e.	Ownership Type (Domestic, Foreign, Government, etc): NT7 Business L	icense Sole Proprieto	or
f.	Nevada Business ID Number: NV20161349157	Exp:	6/30/2024
g.	Is the Lessor's Name the same as the Legal Entity Name?	☐ YES	☑ NO
	**If No, explain		20
h.	Is the Legal Entity active and in good standing with the Nevada Secretary of States	yES ☑ YES	□NO
	Office?		
j.	State of Nevada Vendor number: T27007254		
li.	Is this an Arms Length Transaction (No Conflict of Interest)		□ NO
	**If No, explain		

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

a.	I/we have considered the reasonableness of the terms of this leas	e, including cost	
		☑ YES	□ NO
b.	I/we have considered other state leased or owned space available	for use by this agency	
		☑ YES	□ NO
7	Mu for WL 2/8/24		

Authorized Signature Public Works Division

For Board of Examiners

✓ YES

□ NO

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

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

## STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services Division of Welfare and Supportive Services 1470 College Parkway Carson City, Nevada 89706 Karen Killian T: 702-370-3757 E: kkillian@dwss.nv.gov Remarks: Lease Renewal - Approved by Director Jack for Renewal, Tenant improvements to include expanded kitchen cabinets, toucheless faucets inn bathrooms, water fountain in lobby and employee area,auto door closre on interior lobby doors. Current rate is \$2.24, Negotiated rate \$2.24 with 3% increase after Year 1, Current Market Data \$2.90. Exceptions/Special notes: 2. Lessee: Klossco Craig Road, LLC

3. Name of Lessor: 4. Address of Lessor: c/o Capital Asset Management

2701 East Camelback, Suite 170 Phoenix, Arizona 85016

Capital Asset Management 5. Property contact: 2320 Paseo Del Prado Suite B302 Las Vegas, Nevada 89102

Contact Buzz Horden 702-365-6700 O. 702-257-1300 E vegasre@aol.com 3223 West Craig Road Suite 140 6. Address of Lease property:

North Las Vegas, Nevada 89032 Rentable a. Square Footage: ✓ Usable 18,500 Approximate cost per # of cost per year time frame Improvem Base b. Cost: month months ent Rent cost per in time square foot cost per cost per frame square square foot foot \$ 41,440.00 12 \$ 497,280.00 July 1 2024 - June 30 2025 \$0.00 \$0.00 3% \$ 42,683.20 12 \$ 512,198.40 July 1 2025 - June 30 2026 \$0.00 \$0.00 3% \$ 43,963.69 12 \$ 527,564.28 July 1 2026 - June 30 2027 \$0.00 \$0.00

3% \$ 45,282.60 543,391.20 July 1 2027 - June 30 2028 \$0.00 \$0.00 12 \$ \$2.44 3% \$ 46,641.08 559,692.96 12 \$ July 1 2028 - June 30 2029 \$0.00 \$0.00 \$2.52 c. Total Lease Consideration: 60 \$2,640,126.84 \$0.00 d. Total Improvement Cost: One identical term ✓ Yes ☐ No 365 Renewal terms:

e. Option to renew: Holdover notice: # of Days required 30 5%/90 Holdover terms: f. Five Years Term: Pass-thrus/CAM/Taxes ✓ Landlord Tenant Utilities: ✓ Landlord Tenant Tenant Rural 3 day Rural 5 day Janitorial: ✓ Landlord ☐ 3 day ✓ 5 day Other (see special notes) ✓ Landlord Tenant

✓ Landlord ☐ Tenant Minor: Major: k. Repairs: Cosatar Market \$2.90 per SF Full Service Comparable Area Market Rate Average: m. Specific termination clause in lease: Breach/Default lack of funding

n. Lease will be paid for by Agency Budget Account Number: 3233  $\overline{}$ 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 \$2.24

\$2.30

\$2.37

### STATEWIDE LEASE INFORMATION

		e understand that the Agency will be assessed for the services of the Public W the lease and I hereby agree to pay such assessment.	_	sing Services, through the life					
	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								
	١F	NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING	THE EXPENSE TO	YOUR BUDGET					
	-	^							
	1	7							
1	10	01/10/2024							
Áu	tho	rized Agency Signature Date							
	130								
_	_								
Fo	r Pu	ublic Works Information:							
B	Ste	ate of Nevada Business License Information:							
O.	Sie	ate of Nevada Busiless License illiointation.							
	a.	Is the Lessor a Nevada based business?	✓ YES	□ NO					
	b.	Is the Lessor Exempt from obtaining a Business License?	YES	☑ NO					
	1	*If Yes, explain							
	c.	Does the Lessor have a current Nevada State Business License?	<b>✓</b> YES	□ no					
	١.	**If No, explain							
		The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC 🗹 INC 🗆	CORP LP					
		Ownership Type (Domestic, Foreign, Government, etc): Nevada Business ID Number: NV20171301737		05/04/2024					
		NOTEGE DECITOOD ID NEITHOUS.	Exp: ☑ YES	05/31/2024					
	g.	Is the Lessor's Name the same as the Legal Entity Name?  **If No, explain	₹ YES	□ мо					
	Ь	Is the Legal Entity active and in good standing with the Nevada Secretary of States	[7] VEC	□ NO					
	l	Office?	_ 1L3						
	li.	State of Nevada Vendor number:							
	li.	Is this an Arms Length Transaction (No Conflict of Interest)	<b>✓</b> YES	□ NO					
	ľ	**If No, explain							
	_								
9.	Co	mpliance with NRS 331.110, Section 1, Paragraph 2:							
	a.	I/we have considered the reasonableness of the terms of this lease, including cost							
	ı		✓ YES	□ но					
	b.	I/we have considered other state leased or owned space available for use by this ag							
			✓ YES	□ NO					
7	/	All the							
		Works Division							
r u	טווט	AAOUG DIAISION							

Page 2 of 2

□ NO

For Board of Examiners

**YES** 

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:	A STATE OF THE STA						
Reviewed by:	(VSM)						
Reviewed by:	190						

### STATEWIDE LEASE INFORMATION

1.	- 1	Nevada Hig 555 Wright Carson City, Rocio Zaraz	epartment of Public Safety evada Highway Patrol / Division of Parole and Probation / Investigations Division 5 Wright Way urson City, Nevada 89711 ucio Zarazua 775-684-4650 E: rvelasquez@dps.state.nv.us									
	Remarks:	Lease Rene	wal in a r	ural a	rea. Approv	ed by Dir	ector Ro	bb to mo	ove forward			
		Current \$1.4 No Tenant Ir						ms to be	corrected			
2.	Lessee:	Department	of Admin	istrati	on, Public V	Vorks Div	rision, Βι	uilding ar	nd Grounds			
3.	Name of Lessor:	Buckingham	Holdings	s, LLC								
4.		PO Box 10 Paradise Va	lley, Neva	ada 89	9426							
5.		Kendall Swe T: 775-623-3		endall	@swensen	cpa.com						
6.		3505 Constr Winnemucca			15							
	a Soliare Footage.	Rentable Usable	5,390									
		cost per month	# of months in time frame	cost p	er year	time fram	e			Improvem ent cost per square foot	Base Rent cost per square foot	Approx. cost per square foot
	7%	\$ 8,138.90	12	\$	97,666.80	January 1	, 2024 - E	December	31, 2024	\$0.00	\$0.00	\$1,51
	2%		12		99,620.04		<u> </u>			\$0.00	\$0.00	\$1.54
		\$ 8,550.72	12		102,608.64					\$0.00	\$0.00	\$1.59
	2% 3%	\$ 8,721.73 \$ 8,983.38	12 12		104,660.76 107,800.56					\$0.00 \$0.00	\$0.00 \$0.00	\$1.62 \$1.67
	c. Total Lease Consideration:		60		12,356.80	January 1	, 2020 - L	ecernber	31, 2020	ψ0.00	ψ0.00	\$1.58
	d. Total Improvement Cost:		- 00	Ψυ	12,000.00					\$0.00		Ψ1.00
		✓ Yes	] No	365	Renewal	terms:		1 Identi	cal Term			
		# of Days re		30	Holdover	terms:		5%/90				
	, s	Five (5) Year  Landlord	'S Tenar	-t-								
		✓ Landlord ✓ Landlord	Tenar									
		✓ Landlord	Tenar		3 day	✓ 5 day	Rura	al 3 day	Rural 5	day 🔲	Other (see spe	ecial notes)
	k. Repairs:		Landlord		enant		Mir		✓ Landlord	Te	nant	
	Comparable Area Market Rate	- ,			1.99 Curren			d \$1.51				
	<ul><li>m. Specific termination clause</li><li>n. Lease will be paid for by Ag</li></ul>				h/Default la	ack of fun 4713, 37						
_							40, 3740			l:		
7.	This lease constitutes:		An additi A relocat	on to ion (re cation	f an existin current faci equires esti (requires e aly	lities (req mated ex	penses)		xpenses)			
	a. Estimated Expenses: N	Moving: \$0.0	0		Furnishing	gs: \$0.00		Data/Ph	ones: \$0.0	0		

RECEIVED

FEB 0 5 2024

GOVERNOR'S FINANCE OFFICE BUDGET DIVISION

### STATEWIDE LEASE INFORMATION

andi Salisbury Digitally signed by Brandi Salisbury Date: 2024.01.19   11:20:12-08:00'	Connie Chambers Colonie	igned by Connic Chambers 601,19 159731 -08700
horized Agency Signature Date	Authorized Agency Signature	Date
10	Andreas McCool District 2024 61.23	Andreas MicCool 1/23/24
Public Works Information:	Authorized Agency Signature	Date
State of Nevada Business License Information;		
e. Is the Lessor a Nevada based business?	☐ YES	□ HO
b. Is the Lessor Exempt from obtaining a Business License? "If Yes, explain	YES	⊘ но
c. Does the Lessor have a current Nevada State Business License?  "If No, explain		NO
d. The Lessor is registered with the Nevada Secretary of State's Of		CORP   LP
e. Ownership Type (Domestic, Foreign, Government, etc):  f. Nevode Business ID Number: NV20121057943	Domestic Exp:	1/31/2024
g. Is the Lessor's Name the same as the Legal Entity Name? *'If No, explain	<b> ②</b> YES	□ NO
h. Is the Legal Entity active and in good standing with the Nevada S Office?	recretary of States 2 YES	□ HO
I. State of Nevada Vendor number: T32001614  Is this an Arms Length Transaction (No Conflict of Interest)  "If No, expisin	() YES	□но
Compliance with NRS 331.110, Section 1, Paragraph 2:		
a. Itwo have considered the reasonableness of the terms of this ter	ese, including cost	<b>□</b> KO
b. We have considered other state leased of owned space available	e for use by this agency	
1 111	2 VES	() KO
horized Stignature Date  Date  Date  Date  Date	4	A-2

Page 2 of 2

Rev. 08/08/2023

Joe Lombardo Governor



# STATE OF NEVADA DEPARTMENT OF ADMINISTRATION PUBLIC WORKS DIVISION

Jack Robb

Director

Matthew Tuma Deputy Director

Wilfred J Lewis, Jr.

Administrator

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

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

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

Carson City, Nevada 89701

Phone: (775) 684-4141

515 East Musser Street, Suite 102

**Carson City Office:** 

Date: February 1, 2024

To: Kirk Hawkins, Executive Branch Budget Officer

From: Becky McCabe, Public Works Division, Leasing Services

Becky.mccabe@admin.nv.gov

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

Department of Public Safety, Nevada Highway Patrol, Division of Parole and Probation, and Investigations Division located at 3505 Construction Way, Winnemucca, Nevada 89445

This memo is a clarification for a retroactive start date of January 1, 2024, for the lease referenced above, which houses the Department of Public Safety, Nevada Highway Patrol, Division of Parole and Probation, and the Investigations Division.

Due to an unanticipated delay with negotiations, and the Lessor wanting the security portion of the lease removed, then the agency wanted three separate signature lines incorporated on the summary and the lease, those created a delay for submittal to BOE prior to the January 1, 2024, start date.

This lease is for placement on the March 12, 2024, Board of Examiners agenda.

Thank You,

Becky McCabe

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

Fo			
leviewed by:	EX-	21	20/2
teviewed by.	-		
leviewed by:			

### STATEWIDE LEASE INFORMATION

,	Agency:	Governor's O	ffice								
		Agency for N		ojects						1	
		1761 College	761 College Parkway, Suite 118								
			arson City, Nevada 89706								
		Fred Dilger									
		T: 775.687.5	277 E: fd	ilger@anp.nv.go	٧						
	Remarks:	This is a new	lease for	an existing local	ion. The Directo	r has given	approval t	o move fo	rward with	this	
		renewal. Cur	rent Rate	is \$1.59, Market	Rate is \$1.57, ti	he renewal r	ate negoti	ated is \$1.	.55 a sf. th	atisa -2%	
	9	decrease in t	he rent ra	ite for the first ye	ar.						
	Exceptions/Special notes:	No tenants in	пргочет	ents needed.							
,	Lessee:	Denatment	of Admini	stration, Public W	Jorks Division F	Building and	Grounds		The Landson		
					TORRS OTTROIDIN, E	zanang unu	C1001100				
3.	Name of Lessor:	Tassajara Pr	openies,	LLG			index in the				
Į,	Address of Lessor:			Gold Dust Comn	nercial Associat	es					
		311 Up North	Carson	Street							
Ď,	Property contact:	Dan Shahee	n								
		T: 775.883.3	936 E:d	lan.shaheen@sv	n.com					1	
ŝ	Address of Lease property:	1761 College	Parkway	Suite 118							
	Thomas of Louis property.	Carson City,									
		Rentable		······································	***************************************	COORDS					
	a. Square Footage:	Usable	3,053							1	
	b. Cost:	cost per	# of	cost per year	time frame	~		Improvem	Base	Approx	
	J. 003L	month	months	, , , , , , , , , , , , , , , , , , , ,			- 1	ent	Rent	cost per	
			in time	,				cost per	cost per	square foot	
			frame					ersupa	square		
		7 4 700 45		0 50 707 00	1 7 6 0004 11			foot	foot	64.55	
		\$ 4,732.16	12		April 1, 2024 - Ma April 1, 2025 - Ma			\$0.00	\$0.00	\$1.55 \$1.57	
		\$ 4,779.47	12		April 1, 2026 - Ma			\$0.00		\$1.60	
	1%		12		April 1, 2027 - Ma			\$0.00		\$1.61	
	c. Total Lease Consideration	-	48	\$ 231,725,64	Paper Canada	0.01.0112000			40.00	\$1.58	
	d. Total Improvement Cost:	•		4				\$0.00			
	e. Option to renew:	☑ Yes □	] Ho	365 Renewal	terms:	One (1) I	dentical To	erm			
	f. Holdover notice:	# of Days re	quired	30 Holdover		5%/90					
	g. Term:	Four (4) yea									
	h. Pass-thrus/CAM/Taxes	☑ Landlord	Tena								
	i. Utilities:	Landford	Tena				700				
	j. Janitorial:	Landford	☐ Tena		-	lural 3 day	Rural 5 o		Other (see sp	ecial notes)	
	k. Repairs:		Landlord	Tenant		11117 0 17	Landford	Te	mant		
	I. Comparable Area Market Ra		Gurrent	Market Rate \$1.8 Breach/Default I		(ate \$1.55, C	Junem Re	ए ३१.३४			
	<ul> <li>m. Specific termination claus</li> <li>n. Lease will be paid for by J</li> </ul>	o III lease. Laanay Buday	A Accoun		1005			0			
7.	This lease constitutes:			sion of an existir	-	32					
				lon to current fac			penses)				
				tion (requires est							
				cation (requires	esumateo exper	ises)					
		. 🖺		ling only							
			Other								
	a. Estimated Expenses:	Moving: \$0.0	10	Furnishin	gs: \$0.00	Date/Pho	ones: \$0.0	n			
	or maintaina pubattaga.	THE STATE OF		· wrengtini	A-100	Amenda 11/		-			

Page 1 of 2

Rev. 08/08/2023

#### 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 T	HE EXPENSE TO	OUR BUDGET						
Aut	Colorized Agency Signature Date								
	5								
For	Public Works Information:								
8.	State of Nevada Business License Information:								
		☑ YES	HO						
	b. Is the Lessor Exempt from obtaining a Business License?  *If Yes, explain	YES	⊙ ио						
	c. Does the Lessor have a current Nevada State Business License?  **If No, explain	✓ YES	□мо						
	d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC INC	CORP   LP						
	e. Ownership Type (Domestic, Foreign, Government, etc):  b. Nevada Business ID Number:  NV20041039351	Exn: S	/29/2024						
	g. Is the Lessor's Name the same as the Legal Entity Name?	YES	☑ NO						
	**If No, explain Raymond McLaughlin Jr.	Class	<b></b>						
	h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	1 ΛE2	Ои 🔲						
	i. State of Nevada Vendor number: T29002561	_	group						
	<ul> <li>Is this an Arms Length Transaction (No Conflict of Interest)</li> <li>**If No, explain</li> </ul>	✓ YES	□ №						
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	☑ YES .	□ NO						
	b. I/we have considered other state leased or owned space available for use by this ag	Comp 1 111	□ NO						

Authorized Signature Public Works Division

For Board of Examiners

□ NO

✓ YES

Page 2 of 2

Rev. 08/08/2023

Please Note: Dates for commencement and BOE targets are initial estimates and may be

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

	subject to change in accordance with tir This Summary is for informational purpo to be updated by agency, on agency's c	ses only, any cha			d	Reviewed by: Reviewed by: Reviewed by:			
			2	STATEWIDE LEA	ASE INFORMATIO	<u>N</u>			
1.	. Agency:	Administrati 1830 Colleg Carson City Perry Faigin	on e Parkwa , Nevada	89706					EIVE 0 4 2024
	Remarks:			erry.faigin@busi on from 3360 W 9	ness.nv.gov Sahara approved by	Director Jack Rob	ob	14,595	11 4 /11/4
						Director buck from	u	VERNOR S	FINANCE OFFIC
	Exceptions/Special notes:	Tenant impr	ovement		documents included			BUDGE	T DIVISION
2.	Lessee:		of Admin	istration, Public \	Works Division, Bui	lding and Grounds			
3.	Name of Lessor:	NFC, L.L.C.							
4.	Address of Lessor:	2300 West S Las Vegas,		venue, Suite 530 9102					
5.	Property contact:	Misty Bolwin T: 702-920-2		nbowlin@thomas	s-mack.com				
6.	Address of Lease property:	2300 West S Las Vegas, I		venue Suite 770 9102					
	a. Square Footage:	☑ Rentable							
	b. Cost:	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
		\$ 14,858.85	12		May 1, 2024 - April :		\$0.00	\$0.00	
		\$ 15,601.79 \$ 16,381.88	12 12		May 1, 2025 - April : May 1, 2026 - April :		\$0.00 \$0.00		
		\$ 17,200.98	12	\$ 206,411.71	May 1, 2027 - April :	30, 2028	\$0.00	\$0.00	\$2.95
		\$ 18,061.03	12		May 1, 2028 - April :	30, 2029	\$0.00	\$0.00	\$3.10 \$2.82
	f. Holdover notice: g. Term: h. Pass-thrus/CAM/Taxes	☑ Yes ☐ # of Days re Five Year Te ☑ Landlord	quired rm Tenant		terms:	One Identical Term 5%/90	\$0,00		\$2.02
		☑ Landlord ☑ Landlord	☐ Tenant		☑ 5 day ☐ Rural 3	day 🔲 Rural 5 da	зу 🔲 С	Other (see spe	cial notes)
	k. Repairs:	Major: ☑।	andlord	☐ Tenant	Min	Or: 🖸 Landlord	☐ Ten		
	<ul> <li>I. Comparable Area Market Rat m. Specific termination clause</li> </ul>		Co Star 9	2.60 Fuil Service Breach/Default la	e ack of funding				
	n. Lease will be paid for by Ag	gency Budget			See attached Budg	et Breakdown			
7	This lease constitutes:		An additid A relocati	ion (requires estir cation (requires e	g lease lities (requires estin mated expenses) stimated expenses				
	a. Estimated Expenses:	Moving: \$0.00	)	Furnishing	js: \$0.00 [	Data/Phones: \$0.00	)		
			<u>.s</u> T	ATEWIDE LEAS	SE INFORMATION				
	We understand that the Agen the lease and I hereby agree				of the Public Wor	ks Division / Leas	ing Servid	ces, throu	gh the life of
	IF THIS LEASE IS FOR A NEV CONFIRM THAT ALL ASSOC							PACE - PL	EASE

Yes\_\_\_\_ No \_\_\_\_ Dec Unit \_\_\_\_

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

Kristopher Sanchez 3/4/2024
Authorized Agency Signature Date

### For Public Works Information:

8. State of Nevada Business License Information:

a.	Is the Lessor a Nevada based business?	☑ YES	□ NO
b.	Is the Lessor Exempt from obtaining a Business License?	☐ YES	☑ NO
	*If Yes, explain		=8
c.	Does the Lessor have a current Nevada State Business License?	✓ YES	□ NO
	**If No, explain		
d.	The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC☑ INC□	CORP LP
e.	Ownership Type (Domestic, Foreign, Government, etc):  Domestic		F/04/0004
f.	Nevada Business ID Number: NV19981027989		5/31/2024
g.	Is the Lessor's Name the same as the Legal Entity Name?	✓ YES	□ио
	**If No, explain		, may 110
h.	Is the Legal Entity active and in good standing with the Nevada Secretary of State	s ☑ YES	□ NO
	Office?		
i.	State of Nevada Vendor number: T29048202		P <sup>m</sup>
j.	Is this an Arms Length Transaction (No Conflict of Interest)	✓ YES	□ NO
	**If No, explain		
34			
9. Co	mpliance with NRS 331.110, Section 1, Paragraph 2:		
0. 001	mphanice with 14.40 do 11.110, doction 13.1 diagraph. a.		
a.	I/we have considered the reasonableness of the terms of this lease, including co	st	
	•	☑ YES	□ NO
b.	I/we have considered other state leased or owned space available for use by this	agency	
		☑ YES	□ NO
L	1 0 4 44		
	1ke 1 1 1 3- 4-24		
Authori	zed Signature Date		
	Works Division		
RG			
	Board of Examiners ☐ YES ☐ NO		

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

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

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

			<u>s</u>	TATEWIDE LI	ASE INFO	RMATION				
1.	Agency:	1 '	of Busine	ess and Industr	у					No. 1987 House to
		Industrial	o Doda	v Sto 100					1	Sand Some B
		1830 College Carson City,								
		Perry Faigin	ivovaua	00100						MAR 04
		T: 775-688-3		erry.faigin@bu						145 me ( \$ 0 ) [4
	Remarks:	New Lease F	Relocatio	n from 3360 W	Sahara app	roved by Direct	or Jack Rob	ob	GOV	FRMOR'S FINA
j	Exceptions/Special notes:	Tenant Impre	ovements		e Documen	ts included in th				BUDGET DIV
. 1	_essee:	Department	of Admini	stration, Public	Works Div	sion, Building ar	nd Grounds			
. 1	Name of Lessor:	NFC,L.L.C.								
. /	Address of Lessor:			enue, Suite 53	0					
		Las Vegas, N								
. F	Property contact:	Misty Bolwin T: 702-920-2	816 E: m	nbowlin@thom	as-mack.coi	n				
. /	Address of Lease property:	2300 West S Las Vegas, N			0, 300, 420	, 430, 440, 500,	700, 740, 7	750		
а	. Square Footage:	☑ Rentable								
b	_	Usable cost per	36,278 # of	cost per year	time fram	=		Improvem	Base	Approximate
Ü	. 0081.	month	months	Cook por your	Tanio nam	-		ent	Rent	cost per
			in time					cost per	cost per	square foot
			frame					square	square	
		\$ 92,508.90	12	\$ 1,110,106.8	0 May 1, 20	24 - April 30, 2028	5	\$0.00	\$0.00	
		\$ 97,134.35	12	\$ 1,165,612.1	4 May 1, 20	25 - April 30, 2026	3	\$0.00		
		\$ 101,991.06				26 - April 30, 202		\$0,00		
		\$ 107,090.62				27 - April 30, 2028		\$0.00		
		\$ 112,445.15				28 - April 30, 2029	)	\$0.00	\$0.00	
C		:	60	\$6,134,040.8	2			\$0.00	r	\$2.82
d e		☑ Yes □ N	io.	365 Renewa	al terms:	One Id	entical Tern			
f.	Holdover notice:	# of Days red			er terms:	5%/90	STROUT TOTAL			
g.		Five Years		.,		0,0,00				
ĥ.		☑ Landlord	☐ Tenant							
i.	Utilities:	☑ Landlord	☐ Tenant							
j.		☑ Landlord	☐ Tenant		☑ 5 day	Rural 3 day	Rural 5 d		Other (see spe	cial notes)
k.			andlord	Tenant	ico	Minor:	☑ Landlord	☐ Ten	arit	
l. m	Comparable Area Market Rat Specific termination clause			2.60 Full Serv Breach/Defaul		lina				
	Lease will be paid for by A					hed Budget Bre	akdown			
				sion of an exis						
П	nis lease constitutes:					ires estimated e	vnancac)			
				ion (requires e			vhenses)			
				cation (requires e						
			A new loc Remodeli		Commated	evherioes)				
			Other	g orny						
		_								
a.	Estimated Expenses:	Moving: \$0.00		Furnishi	ngs: \$0.00	Data/Ph	ones: \$0.0	0		
					0.2					
				ATEWIDE LEA						
W	e understand that the Agen	cy will be as:	sessed f	or the service	s of the Pu	blic Works Divi	sion / Leas	ing Servi	es, throu	gh the life
	the lease and I hereby agre									
IF	THIS LEASE IS FOR A NEW	SPACE RE	OCATIO	N. ADDITION	TO EXISTI	IG OR REMOD	EL OF EXIS	STING SPA	ACE - PLF	ASE
CO	ONFIRM THAT ALL ASSOCI	ATED COSTS	ARF IN	CLUDED IN YO	OUR LEGIS	LATIVELY APP	ROVED BU	IDGET.		
	es No Dec Ur									
Y	es no becom									

Kristopher Sanchez
Authorized Agency Signature

Date

156

### For Public Works Information:

8. State of Nevada Business License Information:

a.	Is the Lessor a Nevada based business?	☑ YES	□NO
b.	Is the Lessor Exempt from obtaining a Business License?	☐ YES	☑ NO
	*If Yes, explain		
c.	Does the Lessor have a current Nevada State Business License?	☑ YES	□NO
	**If No, explain		
d.	The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC INC	CORP LP
e.	Ownership Type (Domestic, Foreign, Government, etc):  Domestic		
f.	Nevada Business ID Number: NV19981027989	Ex	kp: <u>5/31/2024</u>
g.	Is the Lessor's Name the same as the Legal Entity Name?	☑ YES	□ NO
	**If No, explain		<del></del> v
h.	Is the Legal Entity active and in good standing with the Nevada Secretary of	f States ☑ YES	□ NO
	Office?		
li.	State of Nevada Vendor number: T29048202		
j.	Is this an Arms Length Transaction (No Conflict of Interest)	☑ YES	□ NO
1	**If No, explain		
9. Cor	npliance with NRS 331.110, Section 1, Paragraph 2:		
a.	I/we have considered the reasonableness of the terms of this lease, includi-		
- 1		☑ YES	□ NO
b.	I/we have considered other state leased or owned space available for use by		<b>-</b>
		☑ YES	□ NO
	1 1		
	11 11 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1		
	July 101		
Author	zed Signature Date		
	Vorks Division		
RG .			
	Board of Examiners ☑ YES ☐ NO		
1 0,	market at a control of the control o		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS		
						AND/OR EMPLOYEES		
	015	GOVERNOR'S OFFICE OF FINANCE - CORE.NV	BERRY, DUNN, MCNEIL & PARKER, LLC DBA BERRYDUNN	GENERAL	\$771,896			
		This is a new service agre			I-20579 which	provides		
1.	Contract Description:	Procurement Acquisition CORE.NV.	Support Services. This se					
	Description.		02/13/2024 -					
		Term of Contract:		Contract # 28842				
		DEPARTMENT OF	,	FEDERAL	\$447,550			
	070	ADMINISTRATION -	INC.					
	0.0	HUMAN RESOURCE						
		MANAGEMENT						
2.		This is a new service agre				•		
	Contract	recruiting, branding, and			ovides recruitr	nent and hiring		
	Description:	services to fill critical job vacancies in the Department of Corrections.						
			03/01/2024 -					
		Term of Contract:		Contract # 28768	<b>#</b> 4 000 004	<b>D</b> ( ) .		
	000	DEPARTMENT OF		BONDS	\$1,886,031	Professional		
		ADMINISTRATION -	CONSTRUCTORS,			Service		
		STATE PUBLIC WORKS	INC.					
	082	- DEPARTMENT OF						
		ADMINISTRATION CIP						
2		PROJECTS - NON-						
3.		EXEC		n managar at rials cons	inna far tha At	towns. Consults		
			is a new contract to provide owner construction manager at-risk services for the Attorney General's					
	Contract	Office Building, Carson City - Central Plant Renovation CIP Project for the replacement of the existing chiller, cooling tower, boilers, pumps, piping, and related controls, and domestic hot water tempering						
		station with an electronic						
	Description.	Station with an electronic	Upon Approval -		VD Contract IV	10. 110300.		
		Term of Contract:		Contract # 28850				
		DEPARTMENT OF		BONDS	\$25,782,030	Professional		
		ADMINISTRATION -	CONSTRUCTORS,	DONDO	Ψ20,702,000	Service		
		STATE PUBLIC WORKS	1			OCIVICC		
	082	- DEPARTMENT OF						
	002	ADMINISTRATION CIP						
		PROJECTS - NON-						
4.		EXEC						
"		This is a new contract to	provide owner construction	on manager at-risk serv	ices for the He	eroes Memorial		
		Building & Annex - Seism		_				
		strengthening and major		•				
		use of available spaces: (						
			Upon Approval -					
		Term of Contract:	06/30/2027	Contract # 28851				

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON- EXEC	KIMSEY ARCHITECTS,	BONDS	\$590,940	Professional Service
	Contract Description:	This is a new contract to Building & Annex - Seism construction administration CIP Project No. 23-C03; Services of Contract:	ic Retrofit and Renovation services for the redesign	n CIP Project to include gn and detailing of the n	structural red	design and
	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	CARPENTER SELLERS DEL GATTO	OTHER:	\$3,224,834	Professional Service
6.	Contract	This is a new contract to Southern Nevada, Northwarchitectural services, profor the construction of a national 116346.	provide professional arch vest Campus - Center for pject management, progra	Excellence in Public Sa amming, schematic des	afety CIP Proj ign, and desig	ect to include gn development
		Term of Contract:	Upon Approval - 06/30/2025	Contract # 28829		
	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	KLEINFELDER, INC.	OTHER: AGENCY FUNDED CIP	\$106,470	Professional Service
7.	Contract	This is a new contract to National Guard, Field Ma design development serv for the design and construchannels: CIP Project No	intenance Shop 7 - Additional response intensive specific	ional Site Drainage Upg d documents, and const in system that will repla act No. 116359.	rades CIP Pro	oject to include istration services
		Term of Contract: DEPARTMENT OF	DERRICK M. LOPEZ,	Contract # 28838 GENERAL	\$173,333	Professional
8.	111	INDIGENT DEFENSE SERVICES	LLC DBA LAW OFFICE OF DERRICK M. LOPEZ			Service
0.		This a new contract to prodefense services.	ovide ongoing oversight,	assessments, and repo	rting of the qu	ality of indigent
	Description:		Upon Approval - 06/30/2024	Contract # 28862		

BOE						EXCEPTIONS FOR		
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR EMPLOYEES		
		DEPARTMENT OF		GENERAL	\$100,000	Professional		
	111	INDIGENT DEFENSE	ARAMINI, PLLC			Service		
		SERVICES - PUBLIC						
9.		DEFENDER'S OFFICE This is a new contract to	provide representation in	complex litigation cases	3			
	Contract		Upon Approval -	Complex inigation cases	o.			
	Description:	Term of Contract:		Contract # 28214				
		DEPARTMENT OF		OTHER:	\$286,761			
		VETERANS SERVICES	CORP.	PRIVATE/COUNTY				
	240	- SOUTHERN NEVADA		35%				
		VETERANS HOME ACCOUNT		FEDERAL 65%				
10.		This is the second amend	Iment to the original serv	ice agreement under sta	atewide contra	act #99SWC-		
		NV18-417 which provides						
	Contract	record services software.						
	Description:	\$467,845.00 due to the c		services.				
			10/01/2021 -					
		Term of Contract:	09/15/2026	Contract # 25025	<b>*</b> * * * * * * * * * * * * * * * * * *			
		DEPARTMENT OF	GARDEN SHOP	FEDERAL	\$149,284	•		
	240	VETERANS SERVICES - NORTHERN NEVADA	LANDSCAPE					
	240	VETERANS HOME	DIVISION, INC.					
11.		ACCOUNT	Dividioit, lito.					
	This is a new contract to provide installation of concrete and basic infrastructure for an outdoor vis							
		area.						
	Description:		Upon Approval -					
		Term of Contract:		Contract # 28801	£4.000.004			
		CANNABIS COMPLIANCE BOARD -	ACCELA, INC.	OTHER: LICENSURE	\$1,698,001			
	270	MARIJUANA		LICENSUIL				
	270	REGULATION AND						
12.		CONTROL ACCOUNT						
		This is a new contract to	provide ongoing licensing	g, agent registration card	d production,	and case		
	Contract	management functions.						
	Description:		06/24/2024 -					
		Term of Contract:	06/30/2028	Contract # 28847	#240 900			
		DEPARTMENT OF EDUCATION -	THE NATIONAL CENTER ON	GENERAL	\$249,800			
	300	EDUCATOR	EDUCATION AND THE					
4.0		EFFECTIVENESS	ECONOMY					
13.		This is a new contract to		of a statewide plan to ir	nprove the pu	blic education		
	Contract	system.						
	Description:		01/10/2024 -					
		Term of Contract:	06/30/2025	Contract # 28676				

						EXCEPTIONS			
BOE						FOR			
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS			
#						AND/OR			
						EMPLOYEES			
		DEPARTMENT OF		FEDERAL	\$2,226,780				
	300	EDUCATION - OFFICE	INSIGHT, LLC						
		OF EARLY LEARNING							
4.4		AND DEVELOPMENT	out to the evicinal contract	tudiah musuidas sassia		a far tha Child			
14.		This is the third amendme Care Development Progr							
	Contract	maximum amount from \$							
	Description:	maximum amount nom ¢	07/01/2021 -		00 101 111000 1	, or viceo.			
		Term of Contract:		Contract # 24349					
		DEPARTMENT OF	WASHOE COUNTY	FEDERAL	\$284,000	Exempt			
	300	EDUCATION - OFFICE	SCHOOL DISTRICT						
	300	OF EARLY LEARNING							
		AND DEVELOPMENT							
15.		This is a new interlocal ag							
	Contract	strategies, a video library	, and other support to inc	rease the effectiveness	of preschool	through third			
	Description:	grade educators.	Linan Approval						
		Term of Contract:	Upon Approval - 12/30/2025	Contract # 28805					
		DEPARTMENT OF	ELKO COUNTY	FEDERAL	\$1,500,000	Exempt			
	300	EDUCATION - COVID-	SCHOOL DISTRICT	I LDLIVIL	φ1,000,000	Exompt			
		19 FUNDING							
16.		This is a new interlocal agreement to provide research, planning, course development, and online							
	Contract	· · · · · · · · · · · · · · · · · · ·							
	Description:		Upon Approval -						
		Term of Contract:	09/30/2024	Contract # 28894	<b>A==</b> 0.000	-			
	200	DEPARTMENT OF	WESTED	FEDERAL	\$750,000	Exempt			
	300	EDUCATION - COVID- 19 FUNDING							
		This is the first amendme	nt to the original interloca	al agreement which prov	rides change	management			
17.		expertise to improve the	•		_	_			
	Contract	June 30, 2024 to October							
		\$1,132,270.80 due to the			. ,				
			08/08/2023 -						
		Term of Contract:	10/30/2024	Contract # 27768					
		DEPARTMENT OF	BOARD OF REGENTS,	FEDERAL	\$172,776	Exempt			
		HEALTH AND HUMAN	NEVADA SYSTEM OF						
	400	SERVICES - DIRECTOR'S OFFICE -	HIGHER EDUCATION - OBO UNIVERSITY OF						
		GRANTS	NEVADA, RENO						
		MANAGEMENT UNIT	INE VADA, INEINO						
18.		This is a new service agre	eement under statewide	contract #99SWC-NV23	-17900 which	provides			
		consulting, marketing, an				•			
	Contract	outreach to obtain comm							
	Description:	experienced health dispa							
			01/01/2024 -						
		Term of Contract:	05/31/2024	Contract # 28831					

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTER- GOVERNMENTAL TRANSFER PROGRAM	LINCOLN COUNTY HOSPITAL DISTRICT	OTHER: REVENUE	\$641,472	Exempt
	Contract Description: This is a new reverand Outpatient Publication		erlocal agreement to proper Payment Limit Supplipitals.    07/01/2024 -   06/30/2028			
20.	403	Term of Contract:  DEPARTMENT OF  HEALTH AND HUMAN  SERVICES - HEALTH  CARE FINANCING AND  POLICY - INTER-  GOVERNMENTAL  TRANSFER PROGRAM	LINCOLN COUNTY HOSPITAL DISTRICT	OTHER: REVENUE	\$305,041	Exempt
	Contract Description:	This is a new revenue into which are calculated base Program participated by remaining the Term of Contract:	ed on the Outpatient Pub	lic Upper Payment Limit	Supplement	
21.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTER- GOVERNMENTAL TRANSFER PROGRAM	REGIONAL TRANSPORTATION COMMISSION OF WASHOE COUNTY	OTHER: REVENUE	\$5,603,162	Exempt
	Contract Description:	This is a new revenue interecipients.  Term of Contract:	erlocal agreement to pro 07/01/2024 - 06/30/2028	vide ongoing paratransit  Contract # 28651	services for	Medicaid eligible

EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES  5 Exempt
SOLICITATIONS AND/OR EMPLOYEES
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EMPLOYEES
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BOE	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS
#	DEFT#	STATE AGENCT	CONTRACTOR	FUNDING SOURCE	AWOUNT	AND/OR EMPLOYEES
25.	403	SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	BENEFITS, LLC	GENERAL 50% FEDERAL 50%	\$186,937	
	Contract Description:	This is a new service agre consulting, marketing, an transition to a Single Pref	d education services. Thi erred Drug List in the Me	s service agreement pro		
	2000117110111	Term of Contract:	Upon Approval - 09/30/2024	Contract # 28849		
		DEPARTMENT OF	VERISYS	GENERAL 49.5%	\$5,171,500	
		HEALTH AND HUMAN	CORPORATION	FEDERAL 50.5%		
		SERVICES - HEALTH				
	403	CARE FINANCING AND				
26.		POLICY - HEALTH CARE FINANCING AND				
20.		POLICY				
		ADMINISTRATION				
	Contract	This is a new contract to		ntialing and recredentia	ling services.	
	Description:	Term of Contract:	Upon Approval - 03/31/2028	Contract # 28903		
		DEPARTMENT OF		OTHER:	\$5,854,849	Exempt
				REVENUE	φο,σο-,σ-σ	Exempt
	403	SERVICES - HEALTH	SERVICES			
		CARE FINANCING AND				
27.		POLICY - MEDICAID		ide engling non federe	al above for me	adical care of
	Contract	This is a new revenue into indigent persons within the			al share for me	edical care of
	Description:		07/01/2023 -	Tr rogiam.		
		Term of Contract:	06/30/2027	Contract # 28553		
		DEPARTMENT OF	CLARK COUNTY		\$105,456,682	Exempt
	400	HEALTH AND HUMAN		REVENUE		
	403	SERVICES - HEALTH CARE FINANCING AND				
28.		POLICY - MEDICAID				
		This is a new revenue into	•	0 0	al share for me	edical care of
	Contract	indigent persons within th		n Program.		
	Description:		07/01/2023 - 06/30/2027	Contract # 29556		
		Term of Contract:	00/30/2027	Contract # 28556		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR
						EMPLOYEES
		DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	MUNICIPALITY OF CARSON CITY OBO	FEDERAL	\$301,911	Exempt
29.	Contract Description:	This is the first amendme management and adminis \$40,000 to \$341,911 due	nt to the original interloca strative services. This am to the increased need fo	andment increases the		
		Term of Contract:	07/01/2021 - 06/30/2025	Contract # 23638		
	403	DEPARTMENT OF	DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION	FEDERAL	\$23,132,280	Exempt
30.		This is the first amendme management and adminis \$7,478,352 to \$30,610,63	strative services. This am	endment increases the	maximum am	
		Term of Contract:	06/30/2026	Contract # 25618		
31.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	ESMERALDA COUNTY WELFARE	OTHER: REVENUE	\$147,152	Exempt
		This is a new revenue into			deral share fo	r medical care of
		indigent persons within th	e Medicaid County Matc 07/01/2023 -	h Program.		
	Description:	Term of Contract:	06/30/2027	Contract # 28559		
32.	403	SERVICES - HEALTH	TRUCKEE MEADOWS FIRE AND PROTECTION DISTRICT	FEDERAL	\$24,215,625	Exempt
		This is a new interlocal agreement to provide ongoing reimbursement for emergency transportation				
	Contract Description:	services provided to Med	icaid recipients.  07/01/2024 -			
	•	Term of Contract:	06/30/2028	Contract # 28632		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
33.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	NEVADA, LLC	GENERAL	\$369,600	
	Contract	This is a new contract to		ping services.		
	Description:	T ( O ( )	Upon Approval -	0 1 1 // 000 44		
		term of Contract:	03/12/2028 NEVADA PUBLIC	Contract # 28844	\$250.000	
34.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - CRISIS RESPONSE	HEALTH FOUNDATION, INC.	FEDERAL	\$250,000	
	Contract Description:	This is a new service agre	eement under statewide o	contract #99SWC-NV23	3-17896 which	provides
		consulting, marketing, an				
		social workers to meet the	e Social Workers Board L	icensure requirements	for continuing	education hours.
			Upon Approval -			
		Term of Contract:		Contract # 28719	<b>*</b> • • • • • • • • • • • • • • • • • • •	
35.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	STRATEGIC PROGRESS, LLC	FEDERAL	\$150,000	
	Contract Description:	This is a new service agre consulting, marketing, an services.				
		Term of Contract:	Upon Approval - 09/29/2024	Contract # 28497		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
36.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - PUBLIC HEALTH PREPAREDNESS PROGRAM	KPS/3	FEDERAL	\$250,000	
	Contract Description:	This is a new service agre consulting, marketing, an awareness of mpox.	d education services. Thi			•
	Description.	Tarra of Contract	Upon Approval -	Cantra et # 20000		
		Term of Contract: DEPARTMENT OF		Contract # 28880 GENERAL 59%	\$10E 022	
37.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	NEVADA, LLC	FEDERAL 41%	\$195,032	
	Contract	This is a new contract to location in Las Vegas.	provide ongoing landscap	oing services for the We	st Charleston	Boulevard
	Description:	Term of Contract:	Upon Approval - 03/12/2028	Contract # 28837		
38.	440	CORRECTIONS - CASA GRANDE TRANSITIONAL HOUSING	SERVICE, INC.	GENERAL	\$113,305	
	Contract	This is a new contract to		nd grease trap pumping	services.	
	Description:		Upon Approval -			
	2 coonpacin	Term of Contract:		Contract # 27426		
	440	DEPARTMENT OF CORRECTIONS	S.P.&B. UTILITIES SERVICES, INC.	GENERAL	\$750,193	
		This is a new contract to	-	ng of water and waste w	vater systems	for the facilities
39.	Contract	in southern Nevada.	provide origining mornion	ing of water and waste w	rator systems	ior trio facilities
	Description:		04/01/2024 -			
		Term of Contract:	03/31/2028	Contract # 28722		

						EXCEPTIONS FOR
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR
			0.011511555	 		EMPLOYEES
		PUBLIC UTILITIES	COMPUTER	FEE:	\$213,137	
	500	COMMISSION OF	PROJECTION	REGULATORY		
	580	NEVADA	SYSTEMS, LLC DBA	ASSESSMENTS		
40.			CCS PRESENTATION SYSTEMS			
		This is a new contract to		ideo conferencina syste	me	
	Contract		Upon Approval -	deo contentioning syste		
	Description:	Term of Contract:	06/30/2024	Contract # 28830		
		DEPARTMENT OF	UNISYS	GENERAL 10%	\$1,399,896	
		PUBLIC SAFETY -	CORPORATION	FEE:	ψ.,σσσ,σσσ	
		CENTRAL		PROGRAM 90%		
	655	REPOSITORY FOR				
		NEVADA RECORDS OF				
		CRIMINAL HISTORY				
41.		This is the sixth amendme	ent to the original contrac	ct which provides compu	uter programm	ning and related
		services for the replacem	ent of the Nevada Crimir	al Justice Information S	System. The a	mendment
	Contract	increases the maximum a	amount from \$37,088,850	0.13 to \$38,488,746.13	due to the inci	reased need for
	Description:	these services.				
			07/01/2020 -			
		Term of Contract:	06/30/2027	Contract # 23205		
		DEPARTMENT OF	GERARDO	FEE:	\$78,000	
	700	WILDLIFE -	HERNANDEZ ZUNIGA	SPORTSMEN		
	102	DIRECTOR'S OFFICE	DBA ZUNIGA HOUSE	REVENUE		
40		This is the Continuous law.	CLEANING	List on the contra		' ( (b Ell .
42.		This is the first amendment to the original contract which provides ongoing janitorial services for the Elk office. This amendment extends the termination date from April 30, 2024 to April 30, 2027 and increase				
		the maximum amount from				
	Description:	the maximum amount no	05/03/2023 -		d for these se	i vices.
	·	Term of Contract:	04/30/2027	Contract # 27421		
		DEPARTMENT OF	OVERTON POWER	GENERAL	\$200,000	Exempt
	70.4	CONSERVATION AND	DISTRICT #5		. ,	'
	704	NATURAL RESOURCES				
42		- STATE PARKS				
43.		This is a new interlocal ag	greement which provides	electrical equipment ar	nd service at V	alley of Fire
	Contract	State Park Visitor Center.				
	Description:		Upon Approval -			
		Term of Contract:	12/31/2025	Contract # 28578		
	704	DEPARTMENT OF	SWCA, INC.	GENERAL 50%	\$335,373	
		CONSERVATION AND		FEDERAL 50%		
		NATURAL RESOURCES				
44.		- STATE PARKS				
	Contract	This is a new contract to		or Nevada's outdoor red	reation.	
	Description:	Tama of Control	Upon Approval -	0		
		Term of Contract:	04/08/2028	Contract # 28877		

						EXCEPTIONS FOR
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR EMPLOYEES
	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	DON M. LAZORKO CONSTRUCTION, INC.	GENERAL	\$155,000	
45.	Contract Description:	This is the third amendmentor facilities in western News440,000 due to the incre	evada. This amendment is ased need for these serv	ncreases the maximum	~ ~	•
	2 ocompaion.	Term of Contract:	06/01/2022 - 06/30/2026	Contract # 25938		
46.	707		RESOURCES GROUP,	BONDS	\$1,393,860	Professional Service
	Contract Description:	This is a new contract to public Bi-State Park.	Upon Approval -	-	continued dev	velopment of Van
		Term of Contract: DEPARTMENT OF	12/31/2026 DP VIDEO	Contract # 28740 FEDERAL	\$4,160,645	
47.	901	EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - VOCATIONAL REHABILITATION	PRODUCTIONS, LLC			
	This is a new service agreement under statewide contract #99SWC-NV23-17906 which provides consulting, marketing and education services. This service agreement provides website and mobile application services to help youth with disabilities navigate the transition from high school to post-Description: secondary education or employment.					
		Term of Contract:	Upon Approval - 07/31/2027	Contract # 28756		
48.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	NEVADAWORKS	FEE: WAGE ASSESSMENT, CAREER ENHANCEMENT PROGRAM	\$625,000	·
	Contract	This is a new interlocal agdevelopment.	greement to provide train	ing, skills enhancement	, and career p	oathway
I	Description:	-	Upon Approval - 12/31/2026	Contract # 28641		

For Board Use Only
Date: 03/12/2024

CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28842

Legal Entity BERRY, DUNN, MCNEIL & PARKER,

Name: LLC DBA BERRYDUNN

Agency Name: GOVERNOR'S FINANCE OFFICE Contractor Name: BERRY, DUNN, MCNEIL & PARKER,

LLC DBA BERRYDUNN

Agency Code: 015 Address: 4722 North 24th St. Suite 250

Appropriation Unit: 1325-09

Is budget authority Yes City/State/Zip Phonenix, AZ 85016

available?:

If "No" please explain: Not Applicable Contact/Phone: Charles Leadbetter 480-482-3002

Vendor No.: T29043233

NV Business ID: NV20121551586

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 %

Contract start date:

a. Effective upon Board of No or b. other effective date 02/13/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive? Yes

If "Yes", please explain

The decision was made today at our Executive Committee meeting to present this contract at the March BOE as retroactive, and will be signed as effective next Tuesday

3. Termination Date: 06/30/2024
Contract term: 137 days
4. Type of contract: Contract

Contract description: PASS Services

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV24-20579 which provides Procurement Acquisition Support Services. This service agreement provides project oversight of CORE.NV.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$771,896.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Office of Project Management requires the support of additional resources to ensure successful execution of the CORE.NV phased project.

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

OPM PLEASE COMPLETE

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing No

Division?

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

Berry Dunn MathTech Civic Intiatives b. Soliciation Waiver: Not Applicable

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

OPM has chosen BerryDunn from a list of three statewide contractors

under the Procurement Acquisition Support Services portfolio to support the Contract/project Management and

06/05/2024

implementation phase of CORE.nv.

d. Last bid date: 08/23/2019 Anticipated re-bid date:

10. a. Does the contract contain any IT components?b. Is the contract part of an IT investment project overNo

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** mlynn 02/05/2024 16:41:49 PM **Division Approval** 02/06/2024 15:17:30 PM nmann Department Approval 02/06/2024 15:26:59 PM ssands Contract Manager Approval ssands 02/07/2024 09:44:04 AM **Budget Analyst Approval** dlenzner 02/09/2024 14:20:39 PM 02/09/2024 14:20:42 PM **BOE** Agenda Approval dlenzner **BOE Final Approval** Pending



Joe Lombardo Governor



#### STATE OF NEVADA

### OFFICE OF PROJECT MANAGEMENT

3850 Arrowhead Dr. | Carson City, Nevada 89706 Telephone 775-687-7220 | opm@nv.gov

#### **Executive Committee:**

Amy Stephenson, Director GFO Jack Robb, Director DOA Andy Matthews, Controller

Brian Bowles, Administrator Office of Project Management

### **MEMORANDUM**

Date: February 7, 2024

**To:** Amy Stephenson, Clerk

State Board of Examiners (BOE)

From: Brian Bowles, Administrator

Office of Project Management (GFO-OPM)

Subject: Request for Retroactive Approval of Statewide Contract# 99SWC-NV24-20759 with BerryDunn

The CORE.NV project team has experienced a critical role vacancy of our Senior Enterprise Project Manager. This position, which is responsible for the management, coordination, and operation of the entire CORE.NV project, initially took six months to fill. We cannot afford to wait another six months to address this need, as the project is in full motion. Therefore, we urgently request your consideration in expediting the approval process.

For Board Use Only Date: 03/12/2024

2

CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28768

Legal Entity

ALL STAR TALENT, INC.

Name:

**ADMIN - DIVISION OF HUMAN** Agency Name: RESOURCE MANAGEMENT

Contractor Name: ALL STAR TALENT, INC.

Agency Code:

Address:

2368 CULPEPPER LANE

Appropriation Unit: 1363-15

Is budget authority

Yes

City/State/Zip

LINCOLN, CA 95648

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Scott Cooper 916-412-9530

Vendor No.:

T32014938

**NV Business ID:** 

NV20232873836

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.

Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

General Funds

0.00 %

Other funding

0.00 %

Contract start date:

X

a. Effective upon Board of

No or b. other effective date 03/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable 3. Termination Date:

12/03/2024

Contract term:

277 days

4. Type of contract:

**Contract** 

Contract description:

Hiring Campaign

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV24-20080 which provides recruiting, branding, and marketing strategies. This service agreement provides recruitment and hiring services to fill critical job vacancies in the Department of Corrections.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$447,550.00

### **JUSTIFICATION**

7. What conditions require that this work be done?

There is a critical need to fill numerous critical job vacancies within the Nevada Department of Corrections. These services part of an ongoing effort and are necessary to bolster current State recruitment activities with additional services to reach a much larger audience that may fill these positions. Greater success in reaching candidates will be achieved through services such as, but not limited to, direct advertising and an improved social media presence.

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

State employees are performing recruitment activities and this is meant to provide services in addition to these activities.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

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

Not Applicable

b. Soliciation 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

No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Purchasing and the service was satisfactory.

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

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

Not Applicable

15. The contractor is 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** 01/25/2024 08:50:47 AM mlynn **Division Approval** 01/26/2024 12:13:48 PM nmann Department Approval 01/26/2024 13:00:58 PM ssands 02/16/2024 11:38:24 AM Contract Manager Approval ssands stilley 02/21/2024 10:52:03 AM **Budget Analyst Approval BOE** Agenda Approval stilley 02/21/2024 10:52:05 AM

BOE Final Approval Pending



Jack Robb
Director

Matthew Tuma
Deputy Director

# STATE OF NEVADA DEPARTMENT OF ADMINISTRATION

515 E. Musser Street, Suite 300 | Carson City, Nevada 89701 Phone: (775) 684-0299 | <u>admin.nv.gov</u> | Fax: (775) 684-0298

### **MEMORANDUM**

DATE:

February 27, 2024

TO:

Amy Stephenson, Director, Governor's Finance Office

FROM:

Matthew Tuma, Deputy Director, Department of Administration

SUBJECT:

Retroactive start date for CETS contract #28768 to March 1, 2024

The Department of Administration requests a retroactive start date for CETS contract #28768 with All-Star Talent, Inc. This agreement is focused on continuing a pilot project with the Nevada Department of Corrections that began in 2023 to support recruitment efforts on positions that have been difficult to fill, where low staffing levels have created significant life and safety concerns. The agreement was submitted for consideration at the February Board of Examiners' meeting but was not finalized for the agenda. There is an existing agreement in place through the end of February 2024 and a retroactive start date for this agreement is necessary to prevent a disruption of services for these efforts. The Department of Administration will work with the Governor's Finance Office to improve communication of dates and needs for submitted contracts.

Thank you for your consideration and please let me know if you have any additional questions.

For Board Use Only
Date: 03/12/2024

3

**CONTRACT SUMMARY** 

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28850

Legal Entity CLARK & SULLIVAN

Name: CONSTRUCTORS, INC.

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Contractor Name: CLARK & SULLIVAN

Contractor Name.

CONSTRUCTORS, INC.

Agency Code: **082** 

Address: 905 INDUSTRUIAL WAY

Appropriation Unit: 1594-11

Is budget authority Yes City/State/Zip

**SPARKS, NV 89431** 

available?:

If "No" please explain: Not Applicable Contact/Phone: 775-355-8500

Vendor No.: T32014097

NV Business ID: NV19751002010

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 #: 116366

2. Contract start date:

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

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

Contract term: 1 year and 120 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 Attorney General's Office Building, Carson City - Central Plant Renovation CIP Project for the replacement of the existing chiller, cooling tower, boilers, pumps, piping, and related controls, and domestic hot water tempering station with an electronic tempering station: CIP Project No. 21-M01; SPWD Contract No. 116366.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$1,886,031.00 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

No

Division?

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

Not Applicable

- b. Soliciation 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

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#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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:

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

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** 02/06/2024 13:10:11 PM nmann **Division Approval** nmann 02/06/2024 13:10:17 PM Department Approval 02/06/2024 13:10:21 PM nmann Contract Manager Approval **lwildes** 02/06/2024 13:29:49 PM **Budget Analyst Approval** klay0 02/13/2024 15:31:54 PM 02/13/2024 17:41:40 PM **BOE** Agenda Approval bmacke1 **BOE** Final Approval Pending

For Board Use Only Date: 03/12/2024

### CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28851

Legal Entity **CLARK & SULLIVAN** 

Name: CONSTRUCTORS, INC.

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

Contractor Name: **CLARK & SULLIVAN** 

CONSTRUCTORS, INC.

905 INDUSTRIAL WAY Agency Code: 082 Address:

Appropriation Unit: 1594-26

Is budget authority Yes City/State/Zip **SPARKS, NV 89431** 

available?:

If "No" please explain: Not Applicable Contact/Phone: 775-355-8500

> Vendor No.: T32014097

**NV Business ID:** NV19751002010

2024-2027 To what State Fiscal Year(s) will the contract be charged?

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

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

Agency Reference #: 116358

Contract start date:

a. Effective upon Board of or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

Contract term: 3 years and 120 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 Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project for the construction of seismic strengthening and major renovations to the structure and building systems, and provide a more effective use of available spaces: CIP Project 23-C03; SPWD Contract No. 116358.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$25,782,030.00 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

No

Division?

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

Not Applicable

- b. Soliciation 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

No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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** 02/06/2024 14:46:42 PM nmann **Division Approval** nmann 02/06/2024 14:46:45 PM 02/06/2024 14:46:47 PM Department Approval nmann Contract Manager Approval **lwildes** 02/06/2024 14:49:54 PM **Budget Analyst Approval** klay0 02/13/2024 16:07:00 PM **BOE** Agenda Approval bmacke1 02/13/2024 17:39:51 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: 28840

Legal Entity TATE SNYDER KIMSEY ARCHITECTS,

Name: LTD. DBA TSK

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

TATE SNYDER KIMSEY ARCHITECTS,

LTD. DBA TSK

Agency Code: 082 Address: 314 S. WATER ST.

Appropriation Unit: 1594-26

Is budget authority Yes City/State/Zip HENDERSON, NV 89015-7311

available?:

If "No" please explain: Not Applicable Contact/Phone: 775-827-2949

Vendor No.: T80883470

NV Business ID: NV20212004081

To what State Fiscal Year(s) will the contract be charged? 2024-2027

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

 General Funds
 0.00 %
 Fees
 0.00 %

 Federal Funds
 0.00 %
 X
 Bonds
 100.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Agency Reference #: 116357

2. Contract start date:

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

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

Contract term: 3 years and 120 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project to include structural redesign and construction administration services for the redesign and detailing of the new floor and roof structures: CIP Project No. 23-C03; SPWD Contract No. 116357.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$590,940.00** 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

No

Division?

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

Not Applicable

- b. Soliciation 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

No

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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** 02/05/2024 16:32:32 PM nmann **Division Approval** nmann 02/05/2024 16:32:35 PM 02/05/2024 16:32:38 PM Department Approval nmann Contract Manager Approval **lwildes** 02/06/2024 07:34:48 AM **Budget Analyst Approval** klay0 02/08/2024 14:10:21 PM 02/13/2024 17:51:36 PM **BOE** Agenda Approval bmacke1 **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: 28829

Legal Entity CARPENTER SELLERS DEL GATTO

Name: ARCHITECTS, PC

**ADMIN - STATE PUBLIC WORKS** Contractor Name: **CARPENTER SELLERS DEL GATTO** Agency Name: DIVISION

ARCHITECTS, PC

8882 SPANISH RIDGE AVE. Agency Code: 082 Address:

Appropriation Unit: All Appropriations

Is budget authority No City/State/Zip LAS VEGAS, NV 89148-1303

available?:

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3011, expenditure category 21, CNTR Excellence Public Safety.

Contact/Phone: 702-251-8896

Vendor No.: T80997582

**NV Business ID:** NV19871041301

To what State Fiscal Year(s) will the contract be charged? 2024-2025

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

Fees 0.00 % General Funds 0.00 % 0.00 % Federal Funds 0.00 % **Bonds** 

100.00 % Agency Funded CIP Highway Funds 0.00 % X Other funding

Agency Reference #: 116346

2. Contract start date:

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

06/30/2025 3. Termination Date:

Contract term: 1 year and 120 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 College of Southern Nevada, Northwest Campus - Center for Excellence in Public Safety CIP Project to include architectural services, project management, programming, schematic design, and design development for the construction of a new 90,000 square foot building: CIP Project No. 24-A008; SPWD Contract No. 116346.

#### NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$3,224,834.00 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 - Board of Regents of the Nevada System of Higher Education on behalf of the College of Southern Nevada

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

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Division?

No

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

Not Applicable

b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 Holstrom, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date Budget Account Approval nmann 02/05/2024 14:41:01 PM **Division Approval** 02/05/2024 14:41:04 PM nmann 02/05/2024 14:41:08 PM **Department Approval** nmann Contract Manager Approval 02/05/2024 14:57:20 PM **lwildes Budget Analyst Approval** klay0 02/09/2024 10:44:19 AM **BOE** Agenda Approval bmacke1 02/13/2024 17:52:25 PM

BOE Final Approval Pending

Contract #: 28829 Page 2 of 2

6

7

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28838

Legal Entity

KLEINFELDER, INC.

Name:

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

Contractor Name: KLEINFELDER, INC.

082 Agency Code:

DIVISION

Address:

6960 SMOKE RANCH RD., STE, 110

Appropriation Unit: All Appropriations

Is budget authority

No

City/State/Zip

LAS VEGAS, NV 89128

available?:

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

Contact/Phone:

702-255-8100

category 10, Army Facilities

Vendor No.: **NV Business ID:**  T29046160B

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

2024-2025

NV19801004246

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

General Funds Federal Funds

0.00 %

Fees

0.00 % 0.00 %

NA

**Highway Funds** 

0.00 % 0.00 %

**Bonds** Other funding X

100.00 % Agency Funded CIP

Agency Reference #: 116359

2. Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2025

3. Termination Date: Contract term:

1 year and 120 days

4. Type of contract:

Contract

Contract description:

Arch / Ena

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Nevada Army National Guard, Field Maintenance Shop 7 - Additional Site Drainage Upgrades CIP Project to include design development services, construction and bid documents, and construction administration services for the design and construction of a new storm drain system that will replace the existing onsite drainage channels. CIP Project No. 23-A025; SPWD Contract No. 116359.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$106,470.00 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 - 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.

Contract #: 28838 Page 1 of 2 9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Division?

No

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

Not Applicable

b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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:

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

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date Budget Account Approval nmann 02/06/2024 14:29:24 PM **Division Approval** 02/06/2024 14:29:27 PM nmann **Department Approval** nmann 02/06/2024 14:29:29 PM Contract Manager Approval 02/06/2024 14:38:00 PM **lwildes Budget Analyst Approval** klay0 02/13/2024 14:24:25 PM 02/13/2024 17:42:49 PM **BOE** Agenda Approval bmacke1 **BOE Final Approval** Pending

Contract #: 28838 Page 2 of 2

7

8

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28862

Legal Entity Name:

DERRICK M. LOPEZ, LLC DBA LAW OFFICE OF DERRICK M. LOPEZ

Contractor Name:

**DERRICK M. LOPEZ. LLC DBA LAW** 

OFFICE OF DERRICK M. LOPEZ

Agency Code: 111 Address: PO Box 2372

Appropriation Unit: 1008-36

Is budget authority Yes City/State/Zip Minden, NV 89423

available?:

Agency Name:

If "No" please explain: Not Applicable Contact/Phone: 775-721-0361

> Vendor No.: T32012752

**NV Business ID:** NV20243022410

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

**INDIGENT DEFENSE** 

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

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

Contract start date:

Yes or b. other effective date: a. Effective upon Board of NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

#### Not Applicable

3. Termination Date: 06/30/2024 Contract term: 120 days 4. Type of contract: Contract

**DIDS Oversight** Contract description:

5. Purpose of contract:

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

# NEW CONTRACT

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

Payment for services will be made at the rate of \$200.00 per hour

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 preparatiion 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?

Nο No

Was the solicitation (RFP) done by the Purchasing

Division?

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

Not Applicable

b. Soliciation 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 No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

If "Yes", please provide details of the litigation 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)?

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

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** dcarlso4 02/07/2024 08:31:26 AM **Division Approval** ssands 02/07/2024 09:08:50 AM 02/07/2024 09:08:53 AM Department Approval ssands Contract Manager Approval ssands 02/07/2024 09:14:21 AM **Budget Analyst Approval** bmacke1 02/16/2024 15:21:33 PM **BOE** Agenda Approval bmacke1 02/16/2024 15:21:37 PM **BOE** Final Approval Pending

9

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28214

Legal Entity

Arrascada & Aramini, PLLC

Name:

**INDIGENT DEFENSE** Agency Name: 111

Contractor Name: Arrascada & Aramini, PLLC

Address:

641 Jones Street

Appropriation Unit: 1499-04

Is budget authority

Yes

City/State/Zip

Reno, NV 89503

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

775-310-0084

Vendor No.:

**NV Business ID:** 

NV20191110037

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 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

Yes or b. other effective date:

NA

Examiner's approval?

Anticipated BOE meeting date

10/2023

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2025

3. Termination Date: Contract term:

1 year and 273 days

4. Type of contract:

Contract

Contract description: Legal services

5. Purpose of contract:

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

6. NEW CONTRACT

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

#### II. JUSTIFICATION

7. What conditions require that this work be done?

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

No

Division?

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

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 dcarlso4 09/13/2023 12:03:05 PM **Budget Account Approval Division Approval** tmilazz1 09/14/2023 16:00:34 PM **Department Approval** 01/25/2024 09:40:15 AM ssands Contract Manager Approval ssands 01/25/2024 09:40:18 AM **Budget Analyst Approval** bmacke1 02/16/2024 15:20:55 PM **BOE** Agenda Approval bmacke1 02/16/2024 15:21:02 PM **BOE Final Approval** Pending

Contract #: 28214 Page 2 of 2

9

# **CONTRACT SUMMARY**

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 25025 Amendment 2

Number:

SHI INTERNATIONAL CORP.

Legal Entity Name:

Agency Name: **DEPARTMENT OF VETERANS** Contractor Name: **SHI INTERNATIONAL CORP.** 

SERVICES

Agency Code: 240 Address: PO BOX 952121

Appropriation Unit: 2561-26

Is budget authority Yes City/State/Zip Dallas, TX 75395

available?:

If "No" please explain: Not Applicable Contact/Phone: Nick Grappone 303/723-525

Vendor No.: PUR0001595A NV Business ID: NV20131129294

To what State Fiscal Year(s) will the contract be charged? 2022-2027

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

 General Funds
 0.00 %
 Fees
 0.00 %

 Federal Funds
 65.00 %
 Bonds
 0.00 %

Highway Funds 0.00 % X Other funding 35.00 % Private/County

2. Contract start date:

a. Effective upon Board of No or b. other effective date 10/01/2021

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

**Not Applicable** 

3. Previously Approved 09/15/2026

Termination Date:

Contract term: 4 years and 350 days

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

Contract description: E-Health Records

5. Purpose of contract:

This is the second amendment to the original service agreement under statewide contract #99SWC-NV18-417 which provides cloud services. This service agreement provides ongoing electronic health record services software. This amendment increases the maximum amount from \$181,084.48 to \$467,845.00 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:	\$181,084.48	\$181,084.48	\$181,084.48 Yes - Action
	a. Amendment 1:	\$0.00	\$0.00	\$0.00 No
2.	Amount of current amendment (#2):	\$286,760.52	\$286,760.52	\$286,760.52 Yes - Action
3.	New maximum contract amount:	\$467,845.00		

# II. JUSTIFICATION

7. What conditions require that this work be done?

The Southern Nevada State Veterans Home must comply with federal requirements for certified electronic medical records as they relate to the American Recovery and Reinvestment Act of 2009.

There are no State employees in the agency that have the technical ability to perform this function.

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. Soliciation Waiver: Not Applicable

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

Services to be provided under Statewide contract #99SWC-NV18-417 form solicitation performed by State Purchasing.

d. Last bid date: 07/14/2021 Anticipated re-bid date: 07/06/2023

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

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

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

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

If "Yes", please explain

Not Applicable

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

If "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 is a master contract provided thru State Purchasing and services have been satisfactory.

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

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

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)?

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

**Contract Approvals:** 

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	01/19/2024 11:36:09 AM
Division Approval	jtheil1	01/19/2024 11:36:12 AM
Department Approval	jtheil1	01/19/2024 11:36:34 AM
Contract Manager Approval	jclodfel	01/25/2024 08:55:20 AM
EITS Approval	ljean	01/25/2024 13:16:10 PM
Budget Analyst Approval	mranki1	01/31/2024 14:56:00 PM



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

# MEMORANDUM

**TO:** Lisa Maciel, Acting Director, Veterans

Joseph Theile, Executive Office/CFO, Veterans

Brandon Torres, IT Manager, Veterans

Jacob Clodfelter, Management Analyst II, Veterans

**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 – Veterans – TIN 827 – Point Click Care – BA

2561

**DATE:** January 25, 2024

We have completed our review for the Nevada Department of Veterans Services (Veterans) – *Point Click Care* – TIN 827.

The submitted TIN, for an estimated value of \$167,276.97 in the FY24/FY25 biennium and \$119,483.55 in the FY26/FY27 biennium (65% Federal Fees and 35% Private Insurance or client direct payments funding), is to enter into a contract with SHI to provide PointClickCare medical records software.

PointClickCare is a cloud-based software platform primarily designed for the long-term and post-acute care (LTPAC) industry. It offers a comprehensive suite of products to assist healthcare facilities in managing their day-to-day operations. The software is known for its Electronic Health Record (EHR)

capabilities, which enable medical professionals to store and access patient information securely and efficiently. This investment enhances the State of Nevada Southern Home billing and patient management system by allowing collection of revenue from Medicare and Medicaid and also houses resident medical records. It is an essential part of operating the Southern Veterans Home.

PointClickCare's software platform is engineered with a strong emphasis on security and compliance, ensuring that sensitive data are protected with the highest standards. The system employs robust encryption methods for data at rest and in transit, safeguarding against unauthorized access and breaches. With comprehensive access controls, the platform ensures that only authorized personnel have access to sensitive information, maintaining strict adherence to healthcare regulations such as HIPAA. Continuous monitoring and regular security updates will further fortify the system's defenses, providing a secure and reliable environment to manage patient information.

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: 28801

Legal Entity GARDE Name: LANDS

GARDEN SHOP NURSERY LANDSCAPE DIVISION, INC.

Agency Name: **DEPARTMENT OF VETERANS SERVICES** 

Contractor Name:

GARDEN SHOP NURSERY LANDSCAPE DIVISION, INC.

Address: 3636 MAYBERRY DR

Agency Code: 240

Appropriation Unit: **2569-13** Is budget authority

Yes City/State/Zip RENO, NV 89509-2131

available?:

If "No" please explain: Not Applicable Contact/Phone: Mike Warden Jr. 775/825-3527

Vendor No.: T32001543

NV Business ID: NV19901046420

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
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Agency Reference #: RFP #24VS-S2579HM

2. Contract start date:

X

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: 06/26/2024
Contract term: 116 days
4. Type of contract: Contract

Contract description: Outdoor Visitation

5. Purpose of contract:

This is a new contract to provide installation of concrete and basic infrastructure for an outdoor visitation area.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$149,284.49

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Update to enhance the Outdoor Visitation Area at the Northern Nevada State Veterans Home.

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

The work requires a company with history, and experience of completing similar projects. Our agency and other state agencies do not have experience to complete the scope of work.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

Garden Shop

C&C Contracting

Pearson Brothers Construction Co

DRC Landscaping

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #VS-S2579, 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: 11/21/2023 Anticipated re-bid date: 11/01/2024

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

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

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

If "Yes", please explain No

Not Applicable

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

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

Public Works and the services were satisfactory

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

If "Yes", please provide details of the litigation 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?

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

Yes

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

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** jtheil1 02/01/2024 14:14:11 PM **Division Approval** itheil1 02/01/2024 14:14:15 PM Department Approval jtheil1 02/01/2024 14:14:18 PM 02/01/2024 14:46:25 PM Contract Manager Approval iclodfel 02/06/2024 09:49:04 AM **Budget Analyst Approval** mranki1 **BOE** Agenda Approval mranki1 02/06/2024 09:49:07 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: 28847

Legal Entity

ACCELA, INC.

Name:

**CANNABIS COMPLIANCE BOARD** Agency Name:

Contractor Name: ACCELA, INC.

Agency Code:

270

Address:

4375 SOLUTIONS CENTER #774375

Appropriation Unit: 4207-26

Is budget authority

Yes

City/State/Zip

CHICAGO, IL 60677-4003

available?:

If "No" please explain: Not Applicable

Contact/Phone:

925/359-3423

Vendor No.:

T27042840A

**NV Business ID:** 

NV20141641164

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 % Licensure

2. Contract start date:

a. Effective upon Board of

or b. other effective date No

06/24/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2028

3. Termination Date: Contract term:

4 years and 7 days

4. Type of contract:

Contract

Contract description:

**Cannabis Case Manage** 

5. Purpose of contract:

This is a new contract to provide ongoing licensing, agent registration card production, and case management functions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$1.698.001.02

Payment for services will be made at the rate of \$215.00 per Hour

Other basis for payment: Licensing Fees - Year 1: \$316,810.86 Year 2: \$332,653.50 Year 3: \$349,286.18 Year 4:

\$366,750.48 One Time Training Fee: \$10,000

# II. JUSTIFICATION

7. What conditions require that this work be done?

The Cannabis Compliance Board is tasked with regulating the Cannabis Industry as it specifically relates to licensure, investigations, inspections and regulatory enforcement for the health and safety of Nevada residents and visitors. The Software as a Service provided in this contract is the Cannabis Licensing and Case Management System that is used to support the licensure, investigations, inspections and regulatory enforcement performed by the CCB.

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

The existing Cannabis Licensing and Case Management System is already built and hosted as Software as a Service by Accela. CCB and other State Agencies do not have the staff to create a comparable system from scratch in a timely or cost effective.

9. Were quotes or proposals solicited?

Yes

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

Yes

12 Contract #: 28847 Page 1 of 2

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

Applications Software Technology Carahsoft Technology Corporation MTX

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #27CCB-S2360, 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: 07/06/2023 Anticipated re-bid date: 12/01/2027

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

b. Is the contract part of an IT investment project over

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

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

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

If "Yes", please explain No

Not Applicable

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

If "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 for the Cannabis Compliance Board under contract 21743 (05/14/2019 to 06/23/2024) and services are satisfactory.

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

If "Yes", please provide details of the litigation 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)?

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

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date 02/06/2024 09:40:10 AM **Budget Account Approval** hsaunde1 02/06/2024 09:40:15 AM **Division Approval** hsaunde1 Department Approval hsaunde1 02/06/2024 09:40:26 AM Contract Manager Approval tday2 02/06/2024 11:20:29 AM EITS Approval ljean 02/08/2024 09:23:36 AM **Budget Analyst Approval** 02/15/2024 16:08:08 PM dlenzner **BOE** Agenda Approval dlenzner 02/15/2024 16:08:13 PM **BOE Final Approval** Pending

Contract #: 28847 Page 2 of 2

12



Jack Robb
Director
Matthew Tuma
Deputy Director
Timothy Galluzi
State CIO/Administrator

# STATE OF NEVADA DEPARTMENT OF ADMINISTRATION

# **Enterprise IT Services Division**

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

# MEMORANDUM

**TO**: Tyler Klimas, Executive Director, CCB

Morgan Canfield, IT Manager, Information Security Officer, CCB

Andrea Fountain, Budget Analyst III, CCB

CC: Tim Galluzi, State Chief Information Officer/Administrator, EITS, DOA

Robert Dehnhardt, State Chief Information Security Officer, EITS, DOA

David Axtell, State Chief Enterprise Architect, EITS, DOA

**FROM**: Lisa Jean, TIN Administrator, EITS, DOA

**SUBJECT**: TIN Completion Memo – CCB – TIN 386 – Case Management System and

Enforcement System – Update B – BA 4207

**DATE:** April 12, 2023

We have completed our review for the Cannabis Compliance Board's (CCB) – Case Management System and Enforcement System – TIN 386, Update B.

The submitted TIN, for an estimated value of \$825,528.96 in the FY22/FY23 biennium and \$142,762.44 in the FY24/FY25 biennium (100% State Fees), is to extend the existing contract for a cloud-based, marijuana-specific statewide case management and enforcement solution until 06/23/2024. This contract extension is for continued services with the option to add up to thirteen (13) additional user licenses.

The CCB is in the process of drafting a new RFP for the Case Management and Enforcement System that will require a future update to this TIN.

This solution increases efficiency and reduces costs by streamlining processes, improving accuracy, providing electronic options, optimizing workflow and reporting, as well as enhancing personnel and citizen safety through expedited regulatory compliance.

The agency considers the investment and final implementation to have an ongoing low security risk, as the solution complies with Nevada Revised Statutes, State Information Security PSPs, NIST SP 800-53 and IRS Publication 1075 rules and standards, and includes data encryption.

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

It is expected that this solution will continue to follow state security standards and policies 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: 28676

Legal Entity The National Center on Education and

Name: the Economy

**NDE - DEPARTMENT OF** Contractor Name: The National Center on Education and Agency Name: **EDUCATION** 

the Economy

2121 K Street NW, Suite 700 Agency Code: 300 Address:

Appropriation Unit: 2612-19

Is budget authority Yes City/State/Zip Washington, DC 20037

available?:

If "No" please explain: Not Applicable Contact/Phone: Nathan Driskell 202-379-1800

> Vendor No.: T29048116 **NV Business ID:** NV20191423172

2024-2025 To what State Fiscal Year(s) will the contract be charged?

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

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

Agency Reference #: 30DOE-S2599

Contract start date:

a. Effective upon Board of No or b. other effective date 01/10/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

If "Yes", please explain

This retroactive memo requests the contract with The National Center on Education and the Economy have a retroactive date of January 10, 2024. This partner will conduct benchmarking or gap analysis studies between education policies of the state to the education policies of high-performing international and domestic education systems to prepare for the first Commission on Excellence in Education meeting scheduled on January 18, 2024.

3. Termination Date: 06/30/2025

Contract term: 1 year and 171 days

4. Type of contract: Contract Contract description: **CIEE Study** 

5. Purpose of contract:

This is a new contract to provide the development of a statewide plan to improve the public education system.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$249,800.00 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?

Per requirements set forth in Senate Bill 425

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

The Nevada Department of Education does not have the resources or the staff to conduct this study and analysis.

Yes 9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing Yes

Division?

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

b. Soliciation Waiver: Not Applicable

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

This was the only vendor to respond.

d. Last bid date:

Anticipated re-bid date:

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

No No

b. Is the contract part of an IT investment project over

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

User Approval Level Signature Date **Budget Account Approval** carnol1 12/22/2023 09:27:04 AM 12/22/2023 09:27:07 AM **Division Approval** carnol1 Department Approval carnol1 12/22/2023 09:27:09 AM Contract Manager Approval carnol1 01/31/2024 12:07:58 PM **Budget Analyst Approval** vfajota 02/01/2024 09:48:28 AM **BOE** Agenda Approval 02/01/2024 10:30:46 AM mranki1 **BOE Final Approval** Pending

Joe Lombardo

Governor

Jhone M. Ebert Superintendent of Public Instruction



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

700 E. Fifth Street | Carson City, Nevada 89701-5096 Phone: (775) 687-9200 | www.doe.nv.gov | Fax: (775) 687-1116

January 31, 2024

To: Board of Examiners

Through: State Purchasing

Through: Kaylene Hoyt, DOE Contracts Manager

From: Megan Peterson, Deputy Superintendent, Student Investment Division

Subject: The National Center on Education and the Economy Contract (RFP 30DOE-S2599)

This retroactive memo requests the contract with The National Center on Education and the Economy have a retroactive date of January 10, 2024. This partner will conduct benchmarking or gap analysis studies between education policies of the state to the education policies of high-performing international and domestic education systems to prepare for the first Commission on Excellence in Education meeting scheduled on January 18, 2024.

State Purchasing and The National Center on Education and the Economy have been negotiating terms of the contract, which passed the previous contract start date of January 10, 2024. The National Center on Education and the Economy has been providing the services until the new contract has been approved.

Should you require additional information, Please feel free to contact me at 775-687-9101 or Kaylene.hoyt@doe.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

3 1. Contract Number: 24349 Amendment

Number:

Legal Entity Early Learning Insight, LLC

Name:

Agency Name: **NDE - DEPARTMENT OF** Contractor Name: Early Learning Insight, LLC

**EDUCATION** 

Agency Code: 300 Address: 11108 DESERT DOVE AVE

Appropriation Unit: 2709-21

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89144-1462

available?:

Contact/Phone: If "No" please explain: Not Applicable JENNIFER DOWLEN 702/303-0189

> Vendor No.: T32006230

**NV Business ID:** NV20171702723

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

Contract start date:

a. Effective upon Board of or b. other effective date 07/01/2021 No

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

**Not Applicable** 

3. Previously Approved 06/30/2025

Termination Date:

Contract term: 4 years

4. Type of contract: Contract

Contract description: **Child Care Quality** 

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing rating scales for the Child Care Development Program Quality Rating and Improvement System. This amendment increases the maximum amount from \$2,012,303 to \$4,239,083 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:	\$1,880,132.00	\$1,880,132.00	\$1,880,132.00 Yes - Action
	a. Amendment 1:	\$0.00	\$0.00	\$0.00 No
	b. Amendment 2:	\$132,171.00	\$132,171.00	\$132,171.00 Yes - Action
2.	Amount of current amendment (#3):	\$2,226,780.00	\$2,226,780.00	\$2,226,780.00 Yes - Action
3.	New maximum contract amount:	\$4,239,083.00		

# II. JUSTIFICATION

7. What conditions require that this work be done?

DWSS receives funding from the US Administration for Children & Families, Child Care and Development Fund (CCDF) and a minimum of 4% of CCDF funds must be used to enhance child care quality and availability.

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 these duties.

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. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #30DOE-S1484, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date:

02/18/2021

Anticipated re-bid date: 07/01/2024

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

1/1/24-6/30/21-Education-Satisfactory

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

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

Not Applicable

15. The contractor is 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 carnol1 02/02/2024 08:34:28 AM

Division Approval carnol1 02/02/2024 08:34:32 AM

Department Approval carnol1 02/02/2024 08:34:36 AM

Contract Manager Approval carnol1 02/02/2024 08:34:39 AM

Budget Analyst Approval vfajota 02/12/2024 13:39:14 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: 28805

Legal Entity

WASHOE COUNTY SCHOOL DISTRICT

Name:

**NDE - DEPARTMENT OF** Agency Name:

Contractor Name:

**WASHOE COUNTY SCHOOL** 

DISTRICT

**EDUCATION** Agency Code: 300

Address:

**425 E 9TH STREET** 

Appropriation Unit: 2709-64

Is budget authority available?:

Yes

City/State/Zip

RENO, NV 89512-2800

If "No" please explain: Not Applicable

Contact/Phone:

775/348-0309

Vendor No.:

T40234300B

**NV Business ID:** 2024-2026

Governmental Entity

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

0.00 %

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

Federal Funds 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 % Other funding

0.00 %

NA

Agency Reference #: 300

General Funds

Contract start date:

X

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

12/30/2025

3. Termination Date: Contract term:

1 year and 304 days

4. Type of contract:

Interlocal Agreement

Contract description:

P-3 Instruction

5. Purpose of contract:

This is a new interlocal agreement to provide planning and design of instructional strategies, recruitment strategies, a video library, and other support to increase the effectiveness of preschool through third grade educators.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$284,000.00

Other basis for payment: Not to exceed \$284,000

# II. JUSTIFICATION

7. What conditions require that this work be done?

The Federal Preschool Development Grant Birth through Five requires quality program supports through Activity 5, supports to the early childhood workforce through Activity 4, and improving transitions to kindergarten through Activity 3. This project supports PDG B-5 vision: All children and families have equitable access to receive and participate in high-quality, affordable, and comprehensive ECCE programs and services and can meaningfully engage within and experience a seamless early learning continuum that inclusively, culturally, and linguistically meets their needs. It also directly supports the PDG B-5 goal: Access to high-quality ECCE settings enable children to thrive in developmentally appropriate care and learning environments throughout the early learning continuum of Birth through 3rd grade (or 0-8 years)

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

The Department of Education does not have the capacity or resources to do this work.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

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

d. Last bid date:

Anticipated re-bid date:

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** carnol1 02/06/2024 13:06:50 PM **Division Approval** 02/06/2024 13:06:53 PM carnol1 Department Approval 02/06/2024 13:06:56 PM carnol1 02/06/2024 13:07:00 PM Contract Manager Approval carnol1 02/12/2024 14:06:32 PM **Budget Analyst Approval** vfajota **BOE** Agenda Approval mranki1 02/13/2024 13:59:15 PM

BOE Final Approval Pending

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28894

Legal Entity

ELKO COUNTY SCHOOL DISTRICT

Name:

**NDE - DEPARTMENT OF** Agency Name:

Contractor Name:

**ELKO COUNTY SCHOOL DISTRICT** 

**EDUCATION** Agency Code:

300

Address: 850 Elm Street

Appropriation Unit: 2710-21

Is budget authority

City/State/Zip

Elko, NV 89801-3349

available?:

If "No" please explain: Not Applicable

Contact/Phone: 775/752-3477 Vendor No.:

T40232000

**NV Business ID:** Governmental Entity

2024-2025 To what State Fiscal Year(s) will the contract be charged?

Yes

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

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

Contract start date:

X

a. Effective upon Board of **Yes** or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

#### Not Applicable

3. Termination Date: 09/30/2024 Contract term: 212 days

**Interlocal Agreement** 4. Type of contract: Contract description: Science Reading

5. Purpose of contract:

This is a new interlocal agreement to provide research, planning, course development, and online training materials to develop literacy educators.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$1,500,000.00 Other basis for payment: As invoiced by the vendor and not to exceed \$1,500,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 388.157 outlines that both educators and literacy specialists must receive professional learning in the subject area of reading.

NAC 391.285 lists the requirements for the endorsement to teach reading. These regulations will go through the regulatory process to include the Science of Reading. Once the regulations have been adopted, the Nevada Department of Education will have coursework which aligns to the regulations, immediately available for educators to receive their endorsement.

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

Current staff do not have the expertise or capacity to do this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

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

NRS 277.180 - Interlocal contracts

d. Last bid date:

Anticipated re-bid date:

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 02/12/2024 16:08:16 PM **Budget Account Approval** carnol1 **Division Approval** carnol1 02/12/2024 16:08:18 PM **Department Approval** 02/12/2024 16:08:20 PM carnol1 Contract Manager Approval carnol1 02/12/2024 16:08:23 PM **Budget Analyst Approval** vfajota 02/13/2024 10:58:28 AM **BOE** Agenda Approval mranki1 02/13/2024 14:43:18 PM **BOE Final Approval** Pending

Contract #: 28894 Page 2 of 2

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 27768 Amendment 1

Number:

Legal Entity WestEd

Name:

Agency Name: NDE - DEPARTMENT OF Contractor Name: WestEd

**EDUCATION** 

Agency Code: 300 Address: 730 Harrison St

Appropriation Unit: 2710-21

Is budget authority Yes City/State/Zip San Francisco, CA 94107

available?:

If "No" please explain: Not Applicable Contact/Phone: Lauren Wrotniak 415-615-3136

Vendor No.: T81012500 NV Business ID: NV20111743662

Info Accum \$

Action Accum \$

Agenda

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 %

Contract start date:

a. Effective upon Board of No or b. other effective date 08/08/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

# Not Applicable

3. Previously Approved 06/30/2024

Termination Date:

Contract term: 1 year and 84 days

4. Type of contract: Interlocal Agreement
Contract description: Change Management

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides change management expertise to improve the pupil-centered funding plan. This amendment extends the termination date from June 30, 2024 to October 30, 2024 and increases the maximum amount from \$382,270.80 to \$1,132,270.80 due to the increased need for these services.

Trans \$

# 6. CONTRACT AMENDMENT

		φ	ү	7 10 110 11 7 10 0 0 11 1
1.	The max amount of the original contract:	\$382,270.80	\$382,270.80	\$382,270.80 Yes - Action
2.	Amount of current amendment (#1):	\$750,000.00	\$750,000.00	\$750,000.00 Yes - Action
3.	New maximum contract amount:	\$1,132,270.80		

amount.

10/30/2024

and/or the termination date of the original contract has

changed to:

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Due to the changes in the funding methodology, new and revised reporting requirements, and the complexity of the changes, the PCFP implementation has been challenging for NDE staff. Additionally, local education agencies (LEAs) have experienced similar challenges related to the fundamental shifts in the methods that they use to manage and plan their local educational programs. To facilitate implementation and drive continuous improvement while supporting our stakeholders, a review of regulations will be needed to identify inconsistencies or discrepancies in statutes and regulations as well as identify opportunities for efficiencies and to streamline processes. The intent will be to identify and make recommendations for revisions to regulations to support effective and efficient data collection, fiscal management, and reporting. If this project is not approved, the Department and LEAs will continue to suffer from inefficiencies and duplications of efforts that will hamper effort and reduce the effectiveness of the systems needed to support K-12 education. Existing staff do not have the resources or expertise to complete this level of work.

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

State workers do not have the time or expertise to complete this task.

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing

Yes

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

b. Soliciation Waiver: Exempt (Per statute)

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

Pursuant to RFP #30DOE-S2317 and in accordance with NRS 333, the selected vendor was the highest-scoring proposer as determined by an independently appointed evaluation committee.

NRS 277.180 Government Entity

d. Last bid date:

05/02/2023

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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

Nο

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

If "Yes", please explain

Not Applicable

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

If "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?

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

- Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

17 Contract #: 27768 Page 2 of 3

Approval Level	User	Signature Date
Budget Account Approval	carnol1	02/05/2024 14:49:20 PM
Division Approval	carnol1	02/05/2024 14:49:24 PM
Department Approval	carnol1	02/05/2024 14:49:27 PM
Contract Manager Approval	carnol1	02/05/2024 14:49:31 PM
Budget Analyst Approval	vfajota	02/09/2024 14:16:17 PM
BOE Agenda Approval	mranki1	02/13/2024 10:26:01 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: 28831

Legal Entity BOARD OF REGENTS, NEVADA

Name: SYSTEM OF HIGHER EDUCATION -OBO UNIVERSITY OF NEVADA, RENO

Sector Names - DOADD OF BEOENTO NEVADA

Agency Name: DHHS - HEALTH AND HUMAN Contractor Name: BOARD OF REGENTS, NEVADA SERVICES DIRECTOR'S OFFICE SYSTEM OF HIGHER EDUCATION

SYSTEM OF HIGHER ÉDUCATION -OBO UNIVERSITY OF NEVADA, RENO

Agency Code: 400 Address: UNR CONTROLLERS OFFICE

Appropriation Unit: 3195-34 MAIL STOP 0124

Is budget authority Yes City/State/Zip RENO, NV 89557-0124

available?:

If "No" please explain: Not Applicable Contact/Phone: 775/784-1233

Vendor No.: D35000816

NV Business ID: NV20161295653

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
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Agency Reference #: 400

2. Contract start date:

X

a. Effective upon Board of No or b. other effective date 01/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? Yes

If "Yes", please explain

Not submitted timely:

recently modified MSA procurement protocols

processes were not clearly defined due to changing staff contracts

new protocols and timelines not effectively incorporated into required workflow

No alternatives were considered:

previously trained CHWs would be laid off and bringing them back later date would unlikely be an option would not be feasible to train CHW's to receive certifications needed to support faith institutions before the grant ends

3. Termination Date: 05/31/2024
Contract term: 150 days

4. Type of contract: Other (include description): Service Agreement

Contract description: RFQ 99WC-S2340

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17900 which provides consulting, marketing, and education services. This service agreement provides coordination and outreach to obtain community health worker certification to support reduction of disproportionately experienced health disparities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$172,776.00 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?

Incentivize the recruitment/employment of Community Health Worker (CHW) from within faith-based institutions; design and conduct health/wellness focused training modules to prepare and enhance CHWs skill sets; develop and coordinate outreach opportunities to enhance theory-based skills with practical application; develop an evaluation method; and provide content to amend the Nevada Faith-Based Intervention Plan.

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

Program is working with a subject matter (UNR) expert to continue working with Nevada Faith and Health Coalition in order to utilize faith institutions in an outreach and education program that coordinates recruits obtaining Community Health Worker (CHW) certifications to support long term reduction of disproportionately experienced health disparities. The Department of Health and Human Services does not have the personnel to provide this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

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

d. Last bid date:

Anticipated re-bid date:

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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
- Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 Igallow1
 02/05/2024 15:16:21 PM

 Division Approval
 Igallow1
 02/05/2024 15:16:42 PM

 Department Approval
 Igallow1
 02/05/2024 15:16:45 PM

Contract #: 28831 Page 2 of 3

Contract Manager Approval Igallow1
Budget Analyst Approval khal5
BOE Agenda Approval nrezaie
BOE Final Approval Pending

 Igallow1
 02/06/2024 08:27:44 AM

 khal5
 02/14/2024 08:06:41 AM

 nrezaie
 02/15/2024 12:12:00 PM

Joe Lombardo *Governor* 



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# **DIRECTOR'S OFFICE**

Helping people. It's who we are and what we do.



Richard Whitley, MS *Director* 

# **MEMORANDUM**

Date: February 05, 2024

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

Through: Karen Hall, Executive Branch Budget Office, Governor's Finance Office

From: Lesa Galloway, ASO IV, Department of Health and Human Services, Director's Office

Re: Retroactive Contract

Attached is a new contract between the Department of Health and Human Services, Director's Office, Office of Minority Health and Equity (OMHE) and the University of Nevada, Reno (UNR) for which we are requesting retroactive approval.

The University of Nevada, Reno will be working with the Nevada Faith and Health Coalition in order to utilize faith institutions in an outreach and education program that coordinates recruits obtaining Community Health Worker (CHW) certifications to support long term reduction of disproportionately experienced health disparities. The University of Nevada, Reno will also produce recommendations that are actionable to the agency/institutional level as well as community/grassroot level.

This contract will be utilizing the existing framework already in place as this vendor has been working with OMHE in the State of Nevada through a previous work order for these services. In accordance with the November 28, 2023, memorandum from State Purchasing all previous DHHS MSA contracts (40DHHS-S30) must be converted to service agreements.

This contract is an effort to utilize the correct instrument, follow state procurement rules, and prevent an interruption of services to recruits obtaining Community Health Workers (CHW) looking to obtain certifications.

We are requesting this contract be retroactive to January 01, 2024.

Please contact me if you have any questions or if I can be of any assistance.

Lesa Galloway, ASOIV, DHHS DO

### CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28782

Legal Entity

Lincoln County Hospital District

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: Lincoln County Hospital District

& POLICY Agency Code:

403

Address: 700 N. Spring St

Appropriation Unit: 3157-00

Is budget authority

Yes

City/State/Zip

Caliente, NV 89008

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Jo Lynn Cardinal 775-726-8012

Vendor No.:

T80588110

**NV Business ID:** 

Governmental Entity

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

2025-2028

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if

the contractor will be paid by multiple funding sources. General Funds 0.00 % Fees 0.00 %

Federal Funds

0.00 %

**Bonds** 

0.00 %

Highway Funds

0.00 %

X Other funding 100.00 % Revenue

Contract start date:

a. Effective upon Board of

No or b. other effective date

03/2024

07/01/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2028

3. Termination Date: Contract term:

4 years

4. Type of contract:

**Interlocal Agreement** 

Contract description:

**UPL State Match (SM)** 

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing funds for the state's share of the Inpatient and Outpatient Public Upper Payment Limit Supplemental Payment Programs for non-state government-owned and operated hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$641,471.94

Payment for services will be made at the rate of \$160,367.99 per year

## II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmental-owned and operated hospitals. The supplemental program pays the difference between Medicaid payments and the Medicare amount.

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

County employees and contractors are required to do this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

19 Contract #: 28782 Page 1 of 2

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?

Nο

b. Is the contract part of an IT investment project over

No

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

Nο

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 Hospital District has been a contracted vendor with the DHCFP for many years and service has been satisfactory.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

- Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:

Anjana Radhakrishnan, MA3 Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aroma2	01/30/2024 14:28:57 PM
Division Approval	laaron	02/05/2024 15:15:51 PM
Department Approval	staciew4	02/06/2024 10:15:28 AM
Contract Manager Approval	trya4	02/06/2024 10:58:22 AM
Budget Analyst Approval	nrezaie	02/07/2024 07:27:13 AM
BOE Agenda Approval	nrezaie	02/07/2024 07:54:23 AM
505 51 14 1	<b>.</b> .	

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: 28783

Legal Entity

Lincoln County Hospital District

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name: & POLICY

Contractor Name: Lincoln County Hospital District

Agency Code: 403

Address:

700 N. Spring St

Appropriation Unit: 3157-00

Is budget authority available?:

Yes

City/State/Zip

Caliente, NV 89008

If "No" please explain: Not Applicable

Contact/Phone:

Jo Lynn Cardinal 775-726-8012

Vendor No.:

T80588110

**NV Business ID:** 

Governmental Entity

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

2025-2028

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if

the contractor will be paid by multiple funding sources.

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Federal Funds Highway Funds

General Funds

0.00 %

X Other funding

100.00 % Revenue

Contract start date:

a. Effective upon Board of

No or b. other effective date 07/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date: Contract term:

06/30/2028 4 years

4. Type of contract:

**Interlocal Agreement** 

Contract description:

Voluntary (VC)

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing funds for the voluntary contributions which are calculated based on the Outpatient Public Upper Payment Limit Supplemental Payment Program participated by non-state government owned and operated hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$305,041.28

Payment for services will be made at the rate of \$76,260.32 per year

## II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non state, government owned or operated hospitals. This agreement provides for the receipt of voluntary contributions from the Hospital District to pay the non-federal share of funds in order to secure federal funding for this program.

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

County employees and contractors are required to do this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation 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.

No

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

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

b. Is the contract part of an IT investment project over No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 Hospital District has been a contracted vendor with the DHCFP for many years and service has been satisfactory.

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

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

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:

Anjana Radhakrishnan, MA3 Ph: null

20. Contract Status:

**Contract Approvals:** 

User Approval Level Signature Date 01/30/2024 14:30:10 PM **Budget Account Approval** aroma2 Division Approval laaron 02/05/2024 17:30:38 PM Department Approval staciew4 02/06/2024 10:15:40 AM Contract Manager Approval 02/06/2024 10:58:06 AM trya4 **Budget Analyst Approval** 02/07/2024 07:50:45 AM nrezaie **BOE** Agenda Approval 02/07/2024 08:20:21 AM nrezaie **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: 28651

Legal Entity Regional Transportation Commission of

Name: Washoe County

Agency Name: **DHHS - HEALTH CARE FINANCING** 

Contractor Name: Re

**Regional Transportation Commission** 

of Washoe County

& POLICY
Agency Code: 403

Address:

1105 Terminal Wav

Appropriation Unit: 3157-00

Is budget authority

Yes

City/State/Zip

Reno, NV 89502

available?:

If "No" please explain: Not Applicable

Contact/Phone:

James Gee 775-335-0020

Vendor No.:

PUR0002452A

NV Business ID:

Governmental Entity

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

2025-2028

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

General Funds Federal Funds 0.00 % 0.00 % Fees Bonds 0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Revenue

2. Contract start date:

a. Effective upon Board of

**No** or b. other effective date

03/2024

07/01/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

06/30/2028

Contract term:

4 years

4. Type of contract:

**Revenue Contract** 

Contract description:

**Paratransit Services** 

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing paratransit services for Medicaid eligible recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$5,603,162.50

Other basis for payment: FY25: \$1,300,000; FY26: \$1,365,000; FY27: \$1,433,250; FY28: \$1,504,912.50

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Per the Nevada Medicaid State Plan, Attachment 3.1-A, Section 9 and the Medicaid Services Manual, services will be provided to Medicaid eligible recipients who have been assessed and deemed eligible for paratransit rides.

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

The State does not have transportation services in place to provide paratransit rides.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

- b. Soliciation Waiver: Exempt (Per statute)
- c. Why was this contractor chosen in preference to other?

Contract #: 28651 Page 1 of 2 **21** 

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

No

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 2017 to current. Satisfactory.

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

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

Not Applicable

15. The contractor is 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:

Patricia O'Flinn, Management Analyst III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** aroma2 01/30/2024 14:12:12 PM **Division Approval** 02/05/2024 17:41:25 PM laaron 02/06/2024 10:15:17 AM **Department Approval** staciew4 Contract Manager Approval trya4 02/06/2024 10:57:40 AM **Budget Analyst Approval** 02/06/2024 11:02:47 AM nrezaie **BOE** Agenda Approval 02/07/2024 07:30:45 AM nrezaie **BOE Final Approval** Pending

### CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28790

Legal Entity

White Pine County Hospital District

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: White Pine County Hospital District

Agency Code: 403

& POLICY

Address:

1500 Avenue H

Appropriation Unit: 3157-00

Is budget authority

Yes

City/State/Zip

Elv. NV 89301

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Jana Hayward 775-289-3001

Vendor No.:

**NV Business ID:** Government Entity

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

2025-2028

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

General Funds Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding 100.00 % Revenue

Contract start date:

a. Effective upon Board of

No or b. other effective date 07/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date: Contract term:

06/30/2028 4 years

4. Type of contract:

**Interlocal Agreement** 

Contract description:

**UPL State Match (SM)** 

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing funds for the state's share of the Inpatient and Outpatient Public Upper Payment Limit Supplemental Payment Programs for non-state government-owned and operated hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$3,480,655.37

Payment for services will be made at the rate of \$870,163.84 per year

### II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmental-owned and operated hospitals. The supplemental program pays the difference between Medicaid payments and the Medicare amount.

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

County employees and contractors are required to do this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

22 Contract #: 28790 Page 1 of 2

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

No

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

Nο

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

No

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

Yes If "Yes", please explain

The Hospital District has been a contracted vendor with the DHCFP for many years and service has been satisfactory.

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

No If "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:

Anjana Radhakrishnan, MA3 Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** aroma2 01/26/2024 11:05:55 AM **Division Approval** 01/26/2024 19:39:18 PM laaron Department Approval staciew4 01/29/2024 15:11:23 PM Contract Manager Approval trya4 01/30/2024 08:47:55 AM **Budget Analyst Approval** 02/06/2024 11:01:22 AM nrezaie **BOE** Agenda Approval 02/07/2024 07:31:25 AM nrezaie

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: 28791

Legal Entity

White Pine County Hospital District

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: White Pine County Hospital District

& POLICY Agency Code: 403

Address:

1500 Avenue H

Jana Hayward 775-289-3001

Appropriation Unit: 3157-00

Is budget authority

Yes

City/State/Zip

Elv. NV 89301

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Vendor No.:

T11198400

**NV Business ID:** 

Governmental Entity

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

2025-2028

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

General Funds Federal Funds

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Revenue

Contract start date:

a. Effective upon Board of

No

or b. other effective date

07/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2028

3. Termination Date: Contract term:

4 years

4. Type of contract:

**Interlocal Agreement** 

Contract description:

Voluntary (VC)

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing funds for the voluntary contributions which are calculated based on the Outpatient Public Upper Payment Limit Supplemental Payment Program participated by non-state government owned and operated hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$2,089,851.30

Payment for services will be made at the rate of \$522,462.83 per year

### II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non state, government owned or operated hospitals. This agreement provides for the receipt of voluntary contributions from the Hospital District to pay the non-federal share of funds in order to secure federal funding for this program.

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

County employees and contractors are required to do this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation 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 No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

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

If "Yes", please explain

The Hospital District has been a contracted vendor with the DHCFP for many years and service has been satisfactory.

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

No If "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?

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:

Anjana Radhakrishnan, MA3 Ph: null

20. Contract Status:

**Contract Approvals:** 

User Approval Level Signature Date 01/26/2024 11:07:36 AM **Budget Account Approval** aroma2 Division Approval laaron 01/26/2024 19:42:30 PM Department Approval staciew4 01/29/2024 15:11:41 PM Contract Manager Approval 01/30/2024 08:48:03 AM trya4 **Budget Analyst Approval** 02/06/2024 10:44:58 AM nrezaie **BOE** Agenda Approval 02/07/2024 07:45:41 AM nrezaie **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: 24150 Amendment 1

Number:

Legal Entity Health Management Systems, Inc.

Name:

Agency Name: DHHS - HEALTH CARE FINANCING Contractor Name: Health Management Systems, Inc.

& POLICY

Agency Code: 403 Address: 5615 High Point Drive

Appropriation Unit: 3158-14

Is budget authority Yes City/State/Zip Irving, TX 75038

available?:

If "No" please explain: Not Applicable Contact/Phone: John Oswald 402-301-1461

Vendor No.: T29032200

Info Accum \$

Action Accum \$

Aganda

NV Business ID: NV20091229345

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
 72.10 %
 Bonds
 0.00 %

Highway Funds 0.00 % X Other funding 27.90 % Recoveries

Agency Reference #: 40DHHS-S1471

2. Contract start date:

a. Effective upon Board of No or b. other effective date 05/11/2021

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 04/30/2025

Termination Date:

Contract term: 3 years and 355 days

4. Type of contract: Contract

Contract description: TPL RAC MER

5. Purpose of contract:

This is the first amendment to the original contract which provides audit and recovery of Medicaid payments. This amendment increases the maximum amount from \$10,297,355.67 to \$16,532,584.77 due to the increased need for these services.

Tranc ¢

#### CONTRACT AMENDMENT

amount:

		i i alis p	iiiio Accuiii p	Action Accum & Agenda
1.	The max amount of the original contract:	\$10,297,355.67	\$10,297,355.67	\$10,297,355.67 Yes - Action
2.	Amount of current amendment (#1):	\$6,235,229.10	\$6,235,229.10	\$6,235,229.10 Yes - Action
3.	New maximum contract	\$16,532,584.77		

#### . JUSTIFICATION

7. What conditions require that this work be done?

Mandated by Section 1971 of the Social Security Act, 42 CFR 455.500 Subpart F. and 42 CFR 433.36.

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

State employees are performing this work but Federal regulations require that each state contract with a Recovery Audit Contractor to perform these functions that will supplement the effort of State employees. Contractor provides a level of expertise that is not available with internal staff. This contract also includes a new MER system (current system antiquated) and improved processes to enhance the state recovery collection efforts.

9. Were quotes or proposals solicited?

Yes Yes

Was the solicitation (RFP) done by the Purchasing

Division?

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

Health Management Systems, Inc.

Eduvitae, LLC

Quality Healthcare Asset Management

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #40DHHS-S1251, and in accordance with NRS 333, the selected vendor was the only proposer was determined by an independently appointed evaluation committee.

d. Last bid date: 07/15/2020 Anticipated re-bid date:

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

No

b. Is the contract part of an IT investment project over

No

09/01/2024

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

Nο

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

No

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

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

Not Applicable

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

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

DHCFP since 2017 - Satisfactory

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 aroma2
 02/13/2024 11:41:49 AM

 Division Approval
 laaron
 02/13/2024 13:49:45 PM

Contract #: 24150 Page 2 of 3

Department Approval	sruybali	02/13/2024 16:22:30 PM
Contract Manager Approval	ltuttl1	02/13/2024 16:31:27 PM
Budget Analyst Approval	nrezaie	02/14/2024 10:37:54 AM
BOE Agenda Approval	nrezaie	02/14/2024 10:37:59 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: 28849

Legal Entity

Mercer Health & Benefits, LLC

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name: & POLICY

Contractor Name:

Mercer Health & Benefits, LLC

Agency Code: 403

Address:

2325 East Camelback Rd.

Suite 600

Appropriation Unit: 3158-04 Is budget authority

Yes City/State/Zip Phoenix, AZ 85016

available?:

If "No" please explain: Not Applicable

Frederick Gibison 408-395-1023

Contact/Phone: Vendor No.:

2024-2025

T32007146

**NV Business ID:** 

NV20041250294

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

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

General Funds 50.00 % X Federal Funds 50.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

NA

Agency Reference #: RFQ 99SWC-S2340 (RV)

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

09/30/2024 3. Termination Date: Contract term: 212 days

4. Type of contract:

Other (include description): Statewide Service Agreement

Contract description: Single PDL

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17905 which provides consulting, marketing, and education services. This service agreement provides evaluation of the transition to a Single Preferred Drug List in the Medicaid program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$186,936.75

Other basis for payment: As invoiced by the Contractor and approved by the State. FY 2024: \$123,750; FY 2025: \$63,186.75

#### 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?

Nο

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

Yes

25 Contract #: 28849 Page 1 of 2

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

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

No

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

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

Not Applicable

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

Yes If "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:

Keiko Duncan, Pharmacist Ph: null

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** aroma2 02/05/2024 14:56:29 PM **Division Approval** 02/05/2024 17:47:58 PM laaron Department Approval staciew4 02/06/2024 10:15:51 AM Contract Manager Approval trya4 02/06/2024 10:57:03 AM **Budget Analyst Approval** 02/08/2024 10:32:57 AM nrezaie **BOE** Agenda Approval nrezaie 02/12/2024 07:08:28 AM **BOE** Final Approval Pending

### CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28903

Legal Entity

**Verisys Corporation** 

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: Verisys Corporation

Agency Code: 403

& POLICY

Address:

9960 Corporate Campus Dr.

Amy Andersen 888-837-4797

**Suite 3000** 

Appropriation Unit: 3158-34 Is budget authority

City/State/Zip

Louisville, KY 40223

available?:

If "No" please explain: Not Applicable

Contact/Phone:

PENDING

**NV Business ID:** 

NV20081249760

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

2024-2028

Vendor No.:

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if

the contractor will be paid by multiple funding sources.

General Funds X Federal Funds

49.50 % 50.50 %

Yes

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

RFP #40DHHS-S2377 (RV) Agency Reference #:

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

NA

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

03/31/2028

3. Termination Date: Contract term:

4 years and 30 days

4. Type of contract:

Contract

Contract description:

**Centralized Credent** 

5. Purpose of contract:

This is a new contract to provide centralized credentialing and recredentialing services.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$5,171,500.00

Other basis for payment: As invoiced by the Contractor and approved by the State. FY24: \$183,333.32; FY25: \$880,166.68; FY26: \$1,540,500; FY27: \$1,540,500; FY28: \$1,027,000

### II. JUSTIFICATION

7. What conditions require that this work be done?

To streamline the Nevada Medicaid provider enrollment process, ensure consistency with information, follow prescribed standards for Medicaid providers, and offer a more provider-friendly experience and offer a single point of entry for applicants and providers. Section 5005(b)(2) of the 21st Century Cures Act amended Section 1932(d) provides that, not later than January 1, 2018, a state shall require that in order to participate as a provider in the network of a managed care entity the provider is enrolled consistent with section 1902(kk) with the State agency administering the State plan under this title.

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 qualifications/resources to perform these services.

9. Were quotes or proposals solicited?

Nο

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

26 Contract #: 28903 Page 1 of 3

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

Verisys Corpooration First Source Solutions, Inc.

Automated Health Systems, Inc.

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #40DHHS-S2377 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date:

06/19/2023

Anticipated re-bid date:

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

Yes

06/01/2027

b. Is the contract part of an IT investment project over

Yes

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

Nο

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

Vendor is currently updating their business license at the request of State Purchasing pending receipt of notice of award.

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

Vendor is currently updating their business license at the request of State Purchasing pending receipt of notice of award.

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

No b. If "NO", please explain.

Vendor is currently updating their business license at the request of State Purchasing pending receipt of notice of award.

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date

Budget Account Approval aroma2 02/13/2024 16:03:39 PM
Division Approval laaron 02/14/2024 13:14:37 PM

Department Approval sruybali 02/14/2024 14:35:38 PM **Contract Manager Approval** Ituttl1 02/14/2024 16:48:04 PM **EITS** Approval 02/15/2024 08:58:45 AM ljean **Budget Analyst Approval** nrezaie 02/15/2024 12:41:28 PM **BOE** Agenda Approval nrezaie 02/15/2024 14:17:49 PM **BOE Final Approval** Pending



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

# MEMORANDUM

**TO:** Stacie Weeks, Administrator, DHCFP, DHHS

Alicia Roman, Administrative Services Officer III, DHCFP, DHHS

April Caughron, IT Manager II, DHCFP, DHHS

Robin Ochsenschlager, IT Professional IV, DHCFP, DHHS

Lisa Tuttle, Management Analyst III, DHCFP, 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 – DHCFP – TIN 354 – Centralized Credentialing –

Update B - BA 3158

**DATE:** February 14, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Healthcare Financing and Policy's (DHCFP) – *Centralized Credentialing* – TIN 354, Update B.

This updated TIN, for an estimated value of \$1,063,500.00 in the FY24/FY25 biennium, \$3,081,000.00 in the FY26/FY27 biennium, and \$1,027,000.00 in FY28 (100% Federal ARPA funding), is to reflect changes in cost amounts for an RFP to procure a cloud-based, centralized credentialing system.

Currently, all providers seeking to participate in Nevada Medicaid must complete the Fee for Service (FFS) screening and enrollment process. Once enrolled in FFS, providers wishing to work with Managed

Care recipients must repeat these processes for each Managed Care plan, resulting duplicate entries and confusion, and ultimately, higher administrative costs to DHCFP, MCOs, and providers.

Having centralized credentialing and re-credentialing processes will allow providers to complete one enrollment for all plans, simplify administrative processes, eliminate inconsistencies between programs, and is expected to increase the number and quality of providers willing to work with Medicaid recipients.

This TIN is for a budget concept and limited information is available at this time. Once an RFP is developed this TIN will be updated.

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: 28553

Legal Entity

Carson City Health and Human Services

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name: & POLICY

Contractor Name:

**Carson City Health and Human** 

Services

Agency Code:

403

Address:

900 E. Long Street

Appropriation Unit: 3243-00

Is budget authority

Yes

City/State/Zip

Carson City, NV 89706

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Mary Jane Ostrander 775-887-2110

Vendor No.:

T80990941J

**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 Federal Funds

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding 100.00 % Revenue

Contract start date:

a. Effective upon Board of

No or b. other effective date 07/01/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

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 ongoing 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: \$5,854,848.90

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$1,423,630.05 and FY25-27 \$1,477,072.95/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. Soliciation 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

No

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 02/05/2024 14:59:11 PM **Division Approval** laaron 02/05/2024 17:50:25 PM Department Approval staciew4 02/06/2024 10:14:44 AM 02/06/2024 10:56:46 AM Contract Manager Approval trya4 02/06/2024 11:25:14 AM **Budget Analyst Approval** nrezaie 02/07/2024 07:29:22 AM **BOE** Agenda Approval nrezaie **BOE Final Approval** Pending



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DHHS

Stacie Weeks, JD MPH Administrator

DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

# **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: 28556

Legal Entity

Clark County

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: Clark County

& POLICY Agency Code: 403

Address:

1600 Pinto Lane

Appropriation Unit: 3243-00

Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89106

available?:

Margaret LeBlanc 702-455-3283

If "No" please explain: Not Applicable

Contact/Phone:

T81026920Y

Vendor No.: **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 Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Revenue

2. Contract start date:

a. Effective upon Board of

No

or b. other effective date

07/01/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

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 ongoing 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: \$105.456.681.92 Other basis for payment: FY24 \$26,367,081.47 and FY25-FY27 \$26,363,200.15/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

No

Division?

Page 1 of 2

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

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over

\$50,000?

No

### **III. OTHER INFORMATION**

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

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

Not Applicable

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

Nο

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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** 01/31/2024 09:25:23 AM aroma2 **Division Approval** laaron 02/05/2024 17:39:26 PM Department Approval staciew4 02/06/2024 10:15:00 AM Contract Manager Approval 02/06/2024 10:57:23 AM trya4 **Budget Analyst Approval** 02/07/2024 08:06:15 AM nrezaie **BOE** Agenda Approval 02/07/2024 08:20:48 AM nrezaie **BOE Final Approval** Pending



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DHHS

Stacie Weeks, JD MPH Administrator

DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

# **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: 23638 Amendment 1

**DHHS - HEALTH CARE FINANCING** 

Number:

Legal Entity Consolidated Municipality of Carson City

Name:

OBO Carson City Juvenile Services

Contractor Name: Consolidated Municipality of Carson City OBO Carson City Juvenile

Services

Agency Code: 403 Address: 740 S. Saliman Road

Appropriation Unit: 3243-24

& POLICY

Is budget authority Yes City/State/Zip Carson City, NV 89701

available?:

Agency Name:

If "No" please explain: Not Applicable Contact/Phone: Ali Banister 775-887-2033

Vendor No.: T80990941AE

NV Business ID: Governmental E

NV Business ID: Govenrmental 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
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

2. Contract start date:

X

a. Effective upon Board of No or b. other effective date 07/01/2021

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

#### **Not Applicable**

3. Previously Approved 06/30/2025

Termination Date:

Contract term: 4 years

4. Type of contract: Interlocal Agreement
Contract description: TCM/Admin Services

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides targeted case management and administrative services. This amendment increases the maximum amount from \$40,000 to \$341,911 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
2.	Amount of current amendment (#1):	\$301,911.00	\$301,911.00	\$341,911.00	Yes - Action
3.	New maximum contract amount:	\$341,911.00			

# II. JUSTIFICATION

7. What conditions require that this work be done?

TCM services are provided per Medicaid State Plan Amendment and the Nevada Medicaid Services Manual.

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

State agencies do not have the staff available to provide these services and this contract benefits the City of Carson City.

Were quotes or proposals solicited?Was the solicitation (RFP) done by the Purchasing

Division?

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

Not Applicable

b. Soliciation 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

No

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

Nο

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

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

Not Applicable

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

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

Carson City Juvenile Services has provided this service since SFY 2017 and the service is satisfactory.

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

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

Not Applicable

15. The contractor is 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 01/26/2024 11:30:58 AM **Division Approval** 01/26/2024 19:34:08 PM laaron Department Approval staciew4 01/29/2024 15:10:53 PM Contract Manager Approval trya4 01/30/2024 08:29:57 AM 02/07/2024 08:53:38 AM **Budget Analyst Approval** nrezaie **BOE** Agenda Approval 02/07/2024 11:08:06 AM nrezaie

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1 1. Contract Number: 25618 Amendment

Number: Legal Entity

Department of Health and Human

Name: Services

Division of Child and Family Services

Agency Name: DHHS - HEALTH CARE FINANCING Contractor Name: Department of Health and Human & POLICY

Services

3rd Floor

**Division of Child and Family Services** 

Action Accum \$

Agenda

403 4126 Technology Way Agency Code: Address:

Appropriation Unit: 3243-29

Carson City, NV 89706 Is budget authority Yes City/State/Zip

available?:

If "No" please explain: Not Applicable Contact/Phone: Sharon Knigge 775-684-4400

> Vendor No.: D40900000

> > Info Accum \$

**NV Business ID:** Governmental Entity

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

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

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

2. Contract start date:

X

a. Effective upon Board of 07/01/2022 No or b. other effective date

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

#### Not Applicable

3. Previously Approved 06/30/2026

Termination Date:

Contract term: 4 years

4. Type of contract: **Interlocal Agreement TCM-Admin-Medical** Contract description:

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides targeted case management and administrative services. This amendment increases the maximum amount from \$7,478,352 to \$30,610,631.83 due to the increased need for these services.

Trans \$

#### 6. CONTRACT AMENDMENT

1.	The max amount of the original contract:	\$7,478,352.00	\$7,478,352.00	\$7,478,352.00 Yes - Action
2.	Amount of current amendment (#1):	\$23,132,279.83	\$23,132,279.83	\$23,132,279.83 Yes - Action
3.	New maximum contract amount:	\$30,610,631.83		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

DCFS performs Medicaid administrative activities including outreach, utilization review and referrals. This contract allows DHCFP as the "single state agency" for Medicaid to receive and pass on federal funds for these services.

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

DCFS State employees are performing these duties for Child Welfare Medicaid recipients.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Division?

No

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

Not Applicable

b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 2018 to current. Satisfactory.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

- 16. Not Applicable
- Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** aroma2 02/06/2024 09:07:30 AM 02/07/2024 09:45:16 AM **Division Approval** laaron Department Approval staciew4 02/07/2024 11:56:22 AM Contract Manager Approval 02/07/2024 12:35:43 PM Ituttl1 **Budget Analyst Approval** nrezaie 02/12/2024 12:29:29 PM **BOE** Agenda Approval 02/12/2024 14:40:23 PM nrezaie

For Board Use Only 03/12/2024 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: 28559

Legal Entity

Esmeralda County Welfare

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: Esmeralda County Welfare

& POLICY Agency Code: 403

**PO Box 517** Address:

Appropriation Unit: 3243-00

Is budget authority

Yes

City/State/Zip

Goldfield, NV 89103

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Maureen Glennen 775-485-3406

Vendor No.:

T81000318

**NV Business ID:** 

Governmental Entity

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

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 Federal Funds

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Revenue

Contract start date:

a. Effective upon Board of

No

or b. other effective date

07/01/2023

Examiner's approval? Anticipated BOE meeting date

03/2024

Retroactive?

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 ongoing 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: \$147,151.96

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24-FY27 \$36,787.99/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. Soliciation 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?

Nο

b. Is the contract part of an IT investment project over

No

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 01/23/2024 15:50:18 PM **Division Approval** laaron 01/25/2024 10:02:48 AM Department Approval staciew4 01/25/2024 10:32:50 AM Contract Manager Approval Ituttl1 01/25/2024 10:59:31 AM **Budget Analyst Approval** nrezaie 01/29/2024 09:34:03 AM 01/29/2024 10:46:57 AM **BOE** Agenda Approval nrezaie **BOE Final Approval** Pending



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DHHS

Stacie Weeks, JD MPH Administrator

DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

# **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 28551 Humboldt 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: 28632

Legal Entity Truckee Meadows Fire and Protection

Name: District

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: **Truckee Meadows Fire and Protection** 

District

& POLICY

Address: 3663 Barron Wav

Appropriation Unit: 3243-24

Is budget authority Yes

If "No" please explain: Not Applicable

403

City/State/Zip Reno, NV 89511

Agency Code:

available?:

Alexis Hill, Chair, Board of Fire Commissioniers 775-447-3017

Vendor No.: T40283400A

Contact/Phone:

**NV Business ID:** Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2028

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

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

Contract start date:

or b. other effective date 07/01/2024 a. Effective upon Board of No

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

**Not Applicable** 

3. Termination Date: 06/30/2028 Contract term: 4 years

4. Type of contract: **Interlocal Agreement GEMT Fire District** Contract description:

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing reimbursement for emergency transportation services provided to Medicaid recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$24,215,625.00

Other basis for payment: FY25: \$4,200,000; FY26: \$5,250,000; FY27: \$6,562,500; FY28: \$8,203,125

# II. JUSTIFICATION

7. What conditions require that this work be done?

DHCFP needs fire districts to provide emergency transportation. The Title XIX of the Social Security Act and accompanying regulations require that states cover medical care, services, and fulfill administrative requirements necessary to operate the Medicaid program efficiently. The transportation services ensure individuals get needed care.

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 provide these services.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing No

Division?

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

Not Applicable

b. Soliciation 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.

No

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

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

b. Is the contract part of an IT investment project over No

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 SFY 2021-2024. 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

- Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:

Patricia O'Flinn, Management Analyst III Ph: null

20. Contract Status:

**Contract Approvals:** 

User Approval Level Signature Date 01/17/2024 12:04:04 PM **Budget Account Approval** aroma2 Division Approval laaron 01/17/2024 22:29:14 PM Department Approval staciew4 01/22/2024 08:59:47 AM Contract Manager Approval 01/24/2024 10:09:20 AM trya4 **Budget Analyst Approval** 01/29/2024 10:05:50 AM nrezaie **BOE** Agenda Approval nrezaie 01/29/2024 11:44:21 AM **BOE Final Approval** Pending

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28844

Legal Entity

Greenscapes of Nevada, LLC

Name:

Agency Name: DHHS - PUBLIC AND BEHAVIORAL

ivaille.

Contractor Name: Greenscapes of Nevada, LLC

HEALTH

Address:

2221 Losee Rd.

Appropriation Unit: 3161-07

Is budget authority

Yes

City/State/Zip

North Las Vegas, NV 89030

available?:

Agency Code:

If "No" please explain: Not Applicable

406

Contact/Phone:

Bryan Vellinga 702-533-2428

Vendor No.:

T27033446

NV Business ID: NV20131448439

To what State Fiscal Year(s) will the contract be charged? 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-S2555 JW

2. Contract start date:

a. Effective upon Board of

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

NA

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: 03/12/2028

Contract term: 4 years and 12 days

4. Type of contract: Contract

Contract description: Landscaping Services

5. Purpose of contract:

This is a new contract to provide ongoing landscaping services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$369,600.00

Other basis for payment: Installments payable upon receipt of invoice and approval of services.

# II. JUSTIFICATION

7. What conditions require that this work be done?

Southern Nevada Adult Mental Health Services campus requires landscaping maintenance as needed.

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 knowledge and are not equipped to provide continual landscaping services and maintenance as needed at Southern Nevada Adult Mental Health Services campus located at 6161 West Charleston Boulevard.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

Rhino's Turf

NLS Grounds Management, LLC

Diverscape, Inc.

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #40DHHS-S2555, 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: 10/27/2023 Anticipated re-bid date: 01/12/2028

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

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 long standing history in good standing with SNAMHS. Most current awarded RFP #40DHHS-S2555.

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

No If "Yes", please provide details of the litigation 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:

Calvin Peterson, Facility Manager Ph: 702-486-5135

20. Contract Status:

Approval Level	User	Signature Date
Budget Account Approval	ijanssen	02/07/2024 17:16:40 PM
Division Approval	ijanssen	02/07/2024 17:16:42 PM
Department Approval	ijanssen	02/07/2024 17:16:45 PM
Contract Manager Approval	ijanssen	02/07/2024 17:16:49 PM
Budget Analyst Approval	cdavis	02/13/2024 13:07:35 PM
BOE Agenda Approval	nrezaie	02/14/2024 09:49:01 AM
BOE Final Approval	Pending	

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

Appropriation Unit: 3165-25

1. Contract Number: 28719

Legal Entity NEVADA PUBLIC HEALTH

Name: FOUNDATION, INC.

**DHHS - PUBLIC AND BEHAVIORAL** Contractor Name: **NEVADA PUBLIC HEALTH** Agency Name: **HEALTH** 

FOUNDATION, INC.

Agency Code: 406 Address: 3476 Executive Pointe Way

Suite 10

Is budget authority Yes City/State/Zip Carson City, NV 89706

available?:

If "No" please explain: Not Applicable Contact/Phone: Natalie Gautereaux 775-884-0392

> Vendor No.: T81018059 **NV Business ID:** NV19961104052

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

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

Agency Reference #: 18315

Contract start date:

X

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

Contract term: 3 years and 120 days

4. Type of contract: Contract

Contract description: Professional stipend

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides education services to social workers to meet the Social Workers Board Licensure requirements for continuing education hours.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$250,000.00

Other basis for payment: See cost schedule and Scope of work.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada received a \$250,000 Transformation Transfer Initiative award from NASMHPD to address behavioral health workforce challenges in the state in direct support of Nevada's ongoing development of a successful Crisis Care Response System, including the work being done on the 988 system, specifically in rural and frontier Nevada. The approach involves growing the number of clinical site supervisors via the issuance of a \$5,000 annual stipend. The aim of the initiative is to increase the number of available internship opportunities for post-graduate clinical social work students seeking licensure in the state.

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

Lack of manpower and / or expertise

9. Were quotes or proposals solicited?

No

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

Yes

07/31/2027

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

b. Soliciation Waiver: Not Applicable

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

NPHF has a longstanding history of successfully executing various DPBH initiatives. The organization is also working closely with DHHS leadership on complimentary projects.

No

d. Last bid date:

08/01/2023

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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-NV23-17896

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

No If "Yes", please provide details of the litigation 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:

Approval Level	User	Signature Date
Budget Account Approval	ijanssen	01/31/2024 15:13:02 PM
Division Approval	ijanssen	01/31/2024 15:13:06 PM
Department Approval	ijanssen	01/31/2024 15:13:09 PM
Contract Manager Approval	ijanssen	01/31/2024 15:13:13 PM
Budget Analyst Approval	cdavis	02/01/2024 10:53:21 AM
BOE Agenda Approval	nrezaie	02/05/2024 08:27:50 AM
BOE Final Approval	Pending	

For Board Use Only
Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28497

Legal Entity

STRATEGIC PROGRESS, LLC

Name:

Agency Name: DHHS - PUBLIC AND BEHAVIORAL

-

Contractor Name: STRATEGIC PROGRESS, LLC

HEALTH

406

Address: PO BOX 34294

Appropriation Unit: 3170-44

Is budget authority

Yes

City/State/Zip

RENO, NV 89533-4294

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Cyndy Gustafson 702/241-8033

Vendor No.:

T27029824A

NV Business ID:

NV20051774907

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

the contractor will be paid by multiple funding sources.

2024-2025

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if

General Funds Federal Funds 0.00 % **100.00 %**  Fees Bonds 0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 18291

2. Contract start date:

X

a. Effective upon Board of

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

NA

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date:

09/29/2024

Contract term:

**211 days** 

4. Type of contract:

Contract

Contract description:

**Project Management** 

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17901 which provides consulting, marketing, and education services. This service agreement provides project management services.

6. NEW CONTRACT

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

Other basis for payment: Cost schedule for various tasks.

# II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide project management support for the Bureau Subaward Life Cycle Process. This will include development and completion of templates and tools, research and data analysis support, reporting and technical assistance, and project management of subaward process to include adherence to timelines subgrantee communications and monitoring of lifecycle status.

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

Lack of employee expertise in this field.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Not Applicable

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

MSA vendor 99SWC-NV23-17901

d. Last bid date: 08/08/2023 Anticipated re-bid date: 08/31/2027

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

# III. OTHER INFORMATION

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

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

10% Administrative minus 1 hour for total of \$13,500.

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

No

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

No

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

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

Not Applicable

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

Yes If "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 vendor 99SWC-NV23-17901

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

No If "Yes", please provide details of the litigation 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 11/17/2023 19:01:40 PM **Division Approval** 11/17/2023 19:01:44 PM ijanssen **Department Approval** ijanssen 02/02/2024 11:45:45 AM Contract Manager Approval 02/02/2024 11:45:48 AM ijanssen **Budget Analyst Approval** cdavis 02/12/2024 13:13:11 PM **BOE** Agenda Approval nrezaie 02/13/2024 08:14:50 AM

BOE Final Approval Pending

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28880

Legal Entity

KPS/3

Name:

Agency Name: **HEALTH** 

**DHHS - PUBLIC AND BEHAVIORAL** 

Contractor Name: KPS/3

406 Agency Code:

Address: 500 Ryland #300

Appropriation Unit: 3218-24

Is budget authority

Yes

City/State/Zip

Reno, NV 89502

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Joshua Bartlett and Sarah Polito 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 % Federal Funds 100.00 % Bonds 0.00 % 0.00 % Other funding 0.00 % Highway Funds

Agency Reference #: SA 18337

2. Contract start date:

a. Effective upon Board of **Yes** or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 01/31/2025 Contract term: 336 days 4. Type of contract: Contract

Contract description: **Consulting Marketing** 

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 services to build awareness of mpox.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$250,000.00

Other basis for payment: As invoiced monthly by the Contractor and approved by the State

#### JUSTIFICATION

7. What conditions require that this work be done?

Marketing Services, Conference Planning Services, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis and Report Development on an as needed basis. MSA#99SWC-S2340. KPS3 will continue to manage, optimize, and refresh the awareness campaign targeted towards healthcare providers and select Nevada groups who are at higher risk to help educate and inform these audiences to help fight against mpox. The campaign will continue to build awareness and education, avoid stigma, and help keep Nevadans safe.

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

Marketing Services, Conference Planning Services, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis and Report Development on an as needed basis. MSA#99SWC-S2340. KPS3 will continue to manage, optimize, and refresh the awareness campaign targeted towards healthcare providers and select Nevada groups who are at higher risk to help educate and inform these audiences to help fight against mpox. The campaign will continue to build awareness and education, avoid stigma, and help keep Nevadans safe.

9. Were quotes or proposals solicited?

No No

Was the solicitation (RFP) done by the Purchasing

Division?

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

Not Applicable

b. Soliciation Waiver: Not Applicable

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

Marketing Services, Conference Planning Services, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis and Report Development on an as needed basis. MSA#99SWC-S2340.

d. Last bid date:

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over

\$50,000?

No No

-,---

NO

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

Yes If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Statewide Contract #: MSA 99SWC-NV23-17886

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 02/09/2024 12:28:04 PM **Division Approval** 02/09/2024 12:28:06 PM dcastro Department Approval dcastro 02/09/2024 12:28:08 PM Contract Manager Approval dcastro 02/09/2024 12:28:12 PM 02/14/2024 07:26:17 AM **Budget Analyst Approval** cdavis **BOE** Agenda Approval nrezaie 02/14/2024 09:20:51 AM

BOE Final Approval Pending

Contract #: 28880 Page 2 of 2 **36** 

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28837

Legal Entity

Greenscapes of Nevada, LLC

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name: **FAMILY SERVICES** 

Contractor Name:

**Greenscapes of Nevada, LLC** 

Agency Code: 409

Address:

2221 Losee Road

Appropriation Unit: 3646-07

Is budget authority

Yes

City/State/Zip

North Las Vegas, NV 89030

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Bryan Vellinga 702-533-2428

Vendor No.:

2024-2028

T27033446

**NV Business ID:** 

NV20131448439

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

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

General Funds X Federal Funds

Highway Funds

59.00 % 41.00 % 0.00 % Fees **Bonds** 

Other funding

0.00 % 0.00 %

NA

0.00 %

Agency Reference #:

RFP # 40DHHS-S2555 PSMs Initials: JW

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

03/12/2028 3. Termination Date:

Contract term: 4 years and 12 days

4. Type of contract: Contract

Contract description: Landscaping Services

5. Purpose of contract:

This is a new contract to provide ongoing landscaping services for the West Charleston Boulevard location in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$195.032.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The Division of Child & Family Services has a campus of approximately 3 1/2 acres that needs to be cared for pursuant to NRS Chapter 433, through the use of landscaping and grounds maintenance service including lawn care, tree trimming, pruning and irrigation services.

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

There is no state agency that offers this service in the Las Vegas area and the agency does not have dedicated staff to perform this task.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

Diverscape, Inc. Rhino's Turf

NLS Grounds Management, LLC

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #40DHHS-S2555, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

No

d. Last bid date: 10/27/2023 Anticipated re-bid date: 01/12/2028

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

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 been providing services to DCFS 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:

Candy Bradley, PO I Ph: (702) 486-8064

20. Contract Status:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	02/02/2024 07:13:05 AM
Division Approval	dfrohlic	02/05/2024 10:58:10 AM
Department Approval	mwillia9	02/05/2024 15:16:02 PM
Contract Manager Approval	sknigge	02/05/2024 16:07:47 PM
Budget Analyst Approval	pokeefe	02/09/2024 09:03:38 AM
BOE Agenda Approval	nrezaie	02/09/2024 15:03:21 PM
BOE Final Approval	Pending	

For Board Use Only
Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 27426

Legal Entity

Pipe Maintenance Service, INC.

Name:

Agency Name: **DEPARTMENT OF CORRECTIONS** 

Contractor Name:

Pipe Maintenance Service, INC.

Address:

4505 Andrew Street

Appropriation Unit: 3760-09

Is budget authority

Yes

City/State/Zip

North Las Vegas, NV 89081

available?:

Agency Code:

If "No" please explain: Not Applicable

440

Contact/Phone:

Chris Allen 702-642-9381

Vendor No.: T81032110

NV Business ID: NV19951147697

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 %

2. Contract start date:

a. Effective upon Board of

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

NA

Examiner's approval?

Anticipated BOE meeting date

05/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2028

3. Termination Date: Contract term:

4 years and 61 days

4. Type of contract:

Contract

Contract description:

Septic/Grease South

5. Purpose of contract:

This is a new contract to provide ongoing septic and grease trap pumping services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$113,305.00

Other basis for payment: Upon satisfactory completion of services and submission of invoice.

# II. JUSTIFICATION

7. What conditions require that this work be done?

These services are required for the health of Nevada Department of Corrections staff and inmates.

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

Historically, Nevada Department of Corrections has outsourced pumping the septic and grease traps at their facilities because this service requires the expertise of a company with the equipment necessary to pump the waste material from the grease traps and septic and haul it away to a safe environment. No other State agency performs this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

O'Flaherty Plumbing & Heating

Ebert & Sons LLC

Waters Vaccum Truck Services

b. Soliciation Waiver: Not Applicable

Contract #: 27426 Page 1 of 2 **38** 

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

Pursuant to RFP #44DOC-S2219, and in accordance with NRS 333, the selected vendor was the only vendor who submitted a proposal for southern Nevada and are the current vendor.

No

d. Last bid date: 03/09/2023 Anticipated re-bid date: 01/03/2028

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

b. Is the contract part of an IT investment project over

\$50,000?

# III. OTHER INFORMATION

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

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

Not Applicable

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

Nο

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

**Nevada Corporation** 

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** zhoeflin 12/28/2023 08:03:42 AM **Division Approval** zhoeflin 12/28/2023 08:03:45 AM Department Approval kshe1 01/02/2024 16:45:41 PM Contract Manager Approval 01/02/2024 16:45:44 PM kshe1 **Budget Analyst Approval** 02/14/2024 14:11:22 PM vyoungb **BOE** Agenda Approval bmacke1 02/15/2024 12:39:41 PM

BOE Final Approval Pending

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28722

Legal Entity

S.P.&B. UTILITIES SERVICES, INC.

Name:

**DEPARTMENT OF CORRECTIONS** Agency Name:

Contractor Name: S.P.&B. UTILITIES SERVICES, INC.

Address:

**430 STOKER AVE STE 207** 

Appropriation Unit: All Budget Accounts - Category 09

Is budget authority

City/State/Zip

RENO, NV 89503-5052

available?:

Agency Code:

If "No" please explain: Not Applicable

440

Contact/Phone:

Linda Peterson 775-240-6778

Vendor No.:

T80794830

**NV Business ID:** 

NV19831010170

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 Federal Funds

100.00 %

Fees

0.00 %

0.00 % Highway Funds 0.00 % **Bonds** Other funding 0.00 % 0.00 %

2. Contract start date:

a. Effective upon Board of

or b. other effective date No

04/01/2024

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

03/31/2028

3. Termination Date: Contract term:

4 years

4. Type of contract:

Contract

Water/Waste Systems

5. Purpose of contract:

Contract description:

This is a new contract to provide ongoing monitoring of water and waste water systems for the facilities in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$750.193.42

# II. JUSTIFICATION

7. What conditions require that this work be done?

To preserve State property, and to ensure the health and safety of staff and inmates at correctional facilities are maintained.

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

Technical expertise and certification required by Nevada Division of Environmental Protection to monitor and test water distribution systems and waste water treatment. Employees for the Department do not have the necessary qualifications or equipment to provide these services. No other State agency offers 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):

Sustainable Water Solutions

Rogeaux

SPB Utilities Services

OFlaherty Plumbing and Heating

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #44DOC-S2415, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee. They were the only vendor to submit a response and are the current contracted vendor.

d. Last bid date: 09/28/2023 Anticipated re-bid date: 09/01/2027

10. a. Does the contract contain any IT components?b. Is the contract part of an IT investment project overNo

b. Is the contract part of an IT investment project over \$50.000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Approval Level	User	Signature Date
Budget Account Approval	mschobe2	01/03/2024 10:02:40 AM
Division Approval	mmarkovi	01/03/2024 12:28:51 PM
Department Approval	kshe1	01/03/2024 16:28:30 PM
Contract Manager Approval	kshe1	01/03/2024 16:28:33 PM
Budget Analyst Approval	vyoungb	02/14/2024 12:23:23 PM
BOE Agenda Approval	bmacke1	02/15/2024 12:44:10 PM
BOE Final Approval	Pending	

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28830

Legal Entity COMPUTER PROJECTION SYSTEMS,

Name: LLC

Agency Name: PUBLIC UTILITIES COMMISSION Contractor Name: COMPUTER PROJECTION SYSTEMS,

LLC dba CCS PRESENTATION

SYSTEMS

Agency Code: 580 Address: 2870 S. Jones Blvd #3

Appropriation Unit: 3920-26

Is budget authority Yes City/State/Zip Las Vegas, NV 89146

available?:

If "No" please explain: Not Applicable Contact/Phone: Gilbert Medina 702-869-0020

Vendor No.: PUR0004170

NV Business ID: NV19991030769

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 % Regulatory Assessments

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

Agency Reference #: RFP # HM 58PUC-S2517

2. Contract start date:

a. Effective upon Board of Yes or b. other effective date: NA

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2024
Contract term: 120 days
4. Type of contract: Contract

Contract description: Video Conf Replacmnt

5. Purpose of contract:

This is a new contract to provide replacement of video conferencing systems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$213,137.02

Other basis for payment: Payment will be made upon receipt, review, and approval of detailed invoice not to exceed \$213,137.02

# II. JUSTIFICATION

7. What conditions require that this work be done?

The old equipment is failing and is needed for the commission to perform their duties

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

No one at the PUC is qualified to perform all the tasks needed.

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing Yes

Division?

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

Dragonfli Media Technologies

Machabee

Solotech U.S. Corporation

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #58PUC-S2517, 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:

10/30/2023

Anticipated re-bid date:

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

Yes

b. Is the contract part of an IT investment project over

Yes

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Taxation and the services are satisfactory.

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

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

Not Applicable

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

LLC

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

No b. If "No", please explain:

# dba CCS PRESENTATION SYSTEMS

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

Yes

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

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Approval Level	User	Signature Date
Budget Account Approval	nshafer	02/16/2024 13:08:24 PM
Division Approval	nshafer	02/16/2024 13:08:27 PM
Department Approval	bpotte1	02/16/2024 13:32:10 PM
Contract Manager Approval	nshafer	02/16/2024 13:58:48 PM
EITS Approval	ljean	02/20/2024 08:11:19 AM
Budget Analyst Approval	stilley	02/20/2024 15:54:19 PM
BOE Agenda Approval	stilley	02/20/2024 15:54:22 PM
BOE Final Approval	Pending	



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

# MEMORANDUM

**TO:** Stephanie Mullen, Executive Director, PUC

Nichole Shafer, Administrative Services Officer II, PUC

Gray Ronk, Manager, Information Technology, PUC

**CC:** Tim Galluzi, State Chief Information Officer, OCIO

Robert Dehnhardt, State Chief Information Security Officer, OCIO

Jason Benshoof, Client Services Unit, OCIO

David Axtell, State Chief Enterprise Architect, OCIO

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

**SUBJECT**: TIN Completion Memo – PUC – TIN 754 – Hearing Room Upgrade – BA

3920

**DATE:** August 17, 2023

We have completed our review for the Public Utilities Commission's (PUC) – *Hearing Room Upgrade* – TIN 754.

The submitted TIN, for an estimated value of \$211,000.00 in the FY24/FY25 biennium (100% State Fees), is for audio and video equipment replacement in Carson City and Las Vegas Hearing Rooms.

Carson City and Las Vegas PUC locations have an immediate requirement to overhaul the audio and video equipment. Hearing Room A is the central venue for all commission hearings and workshops. This necessity stems from the need to accommodate new meeting formats and replace deteriorating components.

The modifications in each hearing room will mirror each other, ensuring a standardized setup. The required enhancements include the integration of a Teams Room and specific features to facilitate smooth communication and control across both locations. The setup will enable presets for camera views, the ability to control equipment between Carson City and Las Vegas, and comprehensive control from a single interface.

Additionally, the new equipment will include display monitors for the witness location, large monitors for attendees to view remote participants, controllable cameras, table microphones with no ceiling mics, wireless microphones, and capabilities to present from a laptop. There should also be a provision for separate mutable audio output for broadcasting to the public, accompanied by ceiling speakers.

Finally, at least a year's worth of support and maintenance is required as part of the upgrade, ensuring continued efficiency and functionality of the newly installed systems.

This investment in overhauling the audio and video equipment in hearing rooms reflects a commitment to modernizing and standardizing technology, which necessitates careful consideration of cybersecurity measures. Implementing these technological enhancements requires that all new devices, interfaces, and communication channels are designed with robust security protocols to protect against unauthorized access and potential cyber threats. Emphasizing security in the planning and deployment stages will ensure the confidentiality, integrity, and availability of information and systems related to the commission hearings and workshops, aligning with best practices in today's dynamic cyber environment.

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.

For Board Use Only
Date: 03/12/2024

# **CONTRACT SUMMARY**

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 23205 Amendment 6

Number: Legal Entity

Unisys Corporation

Name:

Agency Name: DPS-RECORDS, Contractor Name: Unisys Corporation

COMMUNICATIONS, AND

COMPLIANCE

Agency Code: 655 Address: 801 Lakeview Drive

Appropriation Unit: 4709-22 Suite 100

Is budget authority Yes City/State/Zip Bluebell, PA 19422

available?:

If "No" please explain: Not Applicable Contact/Phone: Patrick Doyle 916-806-2939

Vendor No.:

NV Business ID: NV19841004708

To what State Fiscal Year(s) will the contract be charged? 2021-2027

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 10.00 % X Fees 90.00 % Program

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

Agency Reference #: RFP #65DPS-S763

2. Contract start date:

a. Effective upon Board of No or b. other effective date 07/01/2020

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 06/30/2027

Termination Date:

Contract term: 7 years
4. Type of contract: Contract

Contract description: NCJIS Modernization

5. Purpose of contract:

This is the sixth amendment to the original contract which provides computer programming and related services for the replacement of the Nevada Criminal Justice Information System. The amendment increases the maximum amount from \$37,088,850.13 to \$38,488,746.13 due to the increased need for these services.

# 6. CONTRACT AMENDMENT

amount:

		Trans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$36,237,516.00	\$36,237,516.00	\$36,237,516.00	Yes - Action
	a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
	b. Amendment 2:	\$51,869.13	\$51,869.13	\$51,869.13	Yes - Info
	c. Amendment 3:	\$138,524.00	\$138,524.00	\$190,393.13	Yes - Action
	d. Amendment 4:	\$304,850.00	\$304,850.00	\$304,850.00	Yes - Action
	e. Amendment 5:	\$356,091.00	\$356,091.00	\$356,091.00	Yes - Action
2.	Amount of current amendment (#6):	\$1,399,896.00	\$1,399,896.00	\$1,399,896.00	Yes - Action
3.	New maximum contract	\$38,488,746.13			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

This contract allows for the replacement of the current system used for storing and accessing Nevada criminal justice information. The owner of the current proprietary system has informed the Department of Public Safety (DPS) of the intent to retire within the next few years and has agreed to work with DPS during the implementation of a new system. The system is critical in supporting the safety of law enforcement agencies and communities and for the State to maintain compliance with Federal and State regulations regarding the access and storage of criminal history.

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

State employees do not have the skill set to complete the tasks for this level of modernization project.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation Waiver: Not Applicable

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

Pursuant to RFP #65DPS-S763, 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:

07/19/2019

Anticipated re-bid date:

07/01/2026

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

Yes

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Approval Level	User	Signature Date
Budget Account Approval	jkolenut	01/22/2024 11:43:30 AM
Division Approval	thick2	01/24/2024 08:52:29 AM
Department Approval	kdefe1	01/24/2024 14:26:16 PM
Contract Manager Approval	mcosenti	01/25/2024 14:19:11 PM
EITS Approval	ljean	01/26/2024 08:03:23 AM
Budget Analyst Approval	khawkin1	02/01/2024 13:41:10 PM
BOE Agenda Approval	bmacke1	02/13/2024 17:44:33 PM



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

# MEMORANDUM

**TO:** Erica Souza, Administrator, RCCD, DPS

Jason Kolenut, Administrative Services Officer, RCCD, DPS

Tom Dorsey, IT Manager III, DPS

Brett Patterson, Business Process Analyst III, RCCD, DPS

**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 – DPS – TIN 811 – *Unisys Corporation*,

Amendment 6 – BA 4709

**DATE:** January 17, 2024

We have completed our review for the Department of Public Safety's (DPS) – *Unisys Corporation*, *Amendment 6* – TIN 811.

The submitted TIN, for an estimated value of \$1,399,896.00 in the FY24/FY25 biennium (100% ARPA funding), is to renew the existing contract with Unisys Corporation.

This investment involves key client dependencies, network and Azure infrastructure, IT Service Management, help desk and support, portal identity and access management, middleware service, message switching with user interface, electronic content management, NCJIS/NCIC Validations, Wanted

Person/Warrants, Portal Search, Hot Files, Computerized Criminal History, Store and Forward, Brady Firearm Check, Civil Name Check, Personal Identification, and Civil Applicant Processing.

The agency considers this investment and final implementation to have an ongoing high security risk, as personal identification information is transported, stored, and/or processed using the solution which includes custom developed software with other systems interfacing to be accessed from outside of SilverNet and it is subject to federal and/or other security standards.

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

For Board Use Only
Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 27421 Amendment 1

Number:

Legal Entity Gerardo Hernandez Zuniga DBA Zuniga

Name: House Cleaning

Agency Name: DEPARTMENT OF WILDLIFE Contractor Name: Gerardo Hernandez Zuniga DBA

Zuniga House Cleaning

Agency Code: 702 Address: 665 Bullion Road #21

Appropriation Unit: 4460-09

Is budget authority Yes City/State/Zip Elko, NV 89801

available?:

If "No" please explain: Not Applicable Contact/Phone: Lorena Zuniga 775/385-2440

Vendor No.: T29046757 NV Business ID: NV20131592058

Info Accum \$

Action Accum \$

Agenda

To what State Fiscal Year(s) will the contract be charged? 2023-2027

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

General Funds 0.00 % X Fees 100.00 % Sportsmen Revenue

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

Agency Reference #: 23-59

2. Contract start date:

a. Effective upon Board of No or b. other effective date 05/03/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

16 113 6 11 1

If "Yes", please explain

Not Applicable

3. Previously Approved 04/30/2024

Termination Date:

Contract term: 3 years and 363 days

4. Type of contract: **Contract** 

Contract description: Elko Janitorial Svc

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing janitorial services for the Elko office. This amendment extends the termination date from April 30, 2024 to April 30, 2027 and increases the maximum amount from \$26,000 to \$104,000 due to the continued need for these services.

Trans \$

#### CONTRACT AMENDMENT

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1.	The max amount of the original contract:	\$26,000.00	\$26,000.00	\$26,000.00	Yes - Info
2.	Amount of current amendment (#1):	\$78,000.00	\$78,000.00	\$104,000.00	Yes - Action
3.	New maximum contract amount:	\$104,000.00			
	and/or the termination date of the original contract has changed to:	04/30/2027			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Janitorial services are needed to keep the NDOW Elko Office clean and sanitary.

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

Buildings and Grounds does not provide janitorial services in this area.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

b. Soliciation Waiver: Not Applicable

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

Contractor has provided service in the past and has proved exemplary service. A proven record of outstanding performance.

d. Last bid date: 02/21/2023 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

No

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Approval Level	User	Signature Date
Budget Account Approval	jwilkin3	01/02/2024 08:57:12 AM
Division Approval	cbalcon	01/03/2024 09:37:54 AM
Department Approval	jneubau2	01/25/2024 10:57:43 AM
Contract Manager Approval	abarredo	01/26/2024 10:23:11 AM
Budget Analyst Approval	dspeed1	02/09/2024 11:42:34 AM
BOE Agenda Approval	bmacke1	02/15/2024 15:42:36 PM

For Board Use Only
Date: 03/12/2024

# CONTRACT SUMMARY

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28578

Legal Entity

**OVERTON POWER DISTRICT #5** 

Name:

Agency Name: DCNR - PARKS DIVISION Contractor Name: OVERTON POWER DISTRICT #5

...

Address: PO BOX 395

Appropriation Unit: 4162-11

Is budget authority Yes

City/State/Zip

**OVERTON, NV 89040-0395** 

available?:

Agency Code:

If "No" please explain: Not Applicable

704

Contact/Phone: 702/397-2512 Vendor No.: T80720450

NV Business ID: Governmental Agency

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

General Funds 100.00 % Federal Funds 0.00 %

Bonds

0.00 % 0.00 %

Highway Funds 0.00 %

Other funding

0.00 %

2. Contract start date:

a. Effective upon Board of

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

NA

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

12/31/2025

Overton

3. Termination Date: Contract term:

1 year and 305 days

4. Type of contract:

Interlocal Agreement

Contract description:

5. Purpose of contract:

This is a new interlocal agreement which provides electrical equipment and service at Valley of Fire State Park Visitor Center.

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 Nevada Division of State Parks seeks to utilize the services of OPD to provide electrical equipment upgrades for new service for a new visitor center at Valley of Fire State Park.

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

State employees do not have the expertise or specialized equipment to perform this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

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

NRS 277.180 NRS 354.474

Contract #: 28578

Page 1 of 2

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

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

b. Is the contract part of an IT investment project over

\$50,000?

# **III. OTHER INFORMATION**

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

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

Not Applicable

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

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

No

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

If "Yes", please explain

Not Applicable

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

If "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 Parks has had several contracts with Overton Power throughout the years with satisfactory completion.

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

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	ethick1	12/13/2023 13:23:56 PM
Division Approval	ethick1	12/21/2023 14:16:00 PM
Department Approval	ethick1	12/21/2023 14:16:02 PM
Contract Manager Approval	ethick1	12/21/2023 14:16:05 PM
Budget Analyst Approval	rjacob3	01/26/2024 09:50:05 AM
BOE Agenda Approval	vmilazz1	02/16/2024 09:09:10 AM
BOE Final Approval	Pending	

43 Contract #: 28578 Page 2 of 2

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28877

Legal Entity

SWCA, INC.

Name:

**DCNR - PARKS DIVISION** Agency Name: 704 Agency Code:

Contractor Name:

SWCA, INC.

Address:

PO BOX 7217

Appropriation Unit: 4162-95

Is budget authority

Yes

City/State/Zip

**CAROL STREAM, IL 60197-7212** 

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Henrik Christensen 602/274-3831

Vendor No.: **NV Business ID:**  T27024217C NV20011181091

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.

Fees General Funds 50.00 %

50.00 %

**Bonds** 

0.00 % 0.00 %

Federal Funds Highway Funds

Examiner's approval?

0.00 %

Other funding

0.00 %

Agency Reference #: 70CNR-S2564

2. Contract start date:

X

Effective upon Board of

Yes or b. other effective date:

03/2024

NA

Anticipated BOE meeting date

Retroactive?

No

If "Yes", please explain

**Not Applicable** 

04/08/2028

3. Termination Date: Contract term:

4 years and 38 days

4. Type of contract:

Contract

Contract description:

**SWCA Outdoor rec** 

5. Purpose of contract:

This is a new contract to provide historic context for Nevada's outdoor recreation.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$335,372.84

# II. JUSTIFICATION

7. What conditions require that this work be done?

The development, enhancement and refinement of statewide outdoor recreation historic context for the State of Nevada.

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

State employees do not have the time or expertise to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

Geosyntec Consultants Logan Simpson Design Paleo West Archaeology **SWCA Inc** 

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

44 Contract #: 28877 Page 1 of 2

Pursuant to RFP #70CNR-S2564, 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Approval Level	User	Signature Date
Budget Account Approval	ethick1	02/09/2024 09:15:49 AM
Division Approval	ethick1	02/09/2024 09:15:51 AM
Department Approval	ethick1	02/09/2024 09:15:53 AM
Contract Manager Approval	ethick1	02/09/2024 09:15:57 AM
Budget Analyst Approval	rjacob3	02/13/2024 10:51:28 AM
BOE Agenda Approval	vmilazz1	02/16/2024 13:14:19 PM
BOE Final Approval	Pending	

For Board Use Only
Date: 03/12/2024

# **CONTRACT SUMMARY**

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 25938 Amendment 3

Number:

Legal Entity DON M. LAZORKO CONSTRUCTION,

Name: INC.

Agency Name: DCNR - FORESTRY DIVISION Contractor Name: DON M. LAZORKO CONSTRUCTION,

INC.

Agency Code: 706 Address: PO BOX 728

Appropriation Unit: 4195-07

Is budget authority Yes City/State/Zip VERDI, NV 89439-7320

available?:

If "No" please explain: Not Applicable Contact/Phone: Don Lazorko 775/345-7320

Vendor No.: T27035934 NV Business ID: NV20041421345

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

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

 X
 General Funds
 100.00 %
 Fees
 0.00 %

 Federal Funds
 0.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Agency Reference #: NDF22-006

2. Contract start date:

a. Effective upon Board of No or b. other effective date 06/01/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 06/30/2026

Termination Date:

Contract term: 4 years and 30 days

4. Type of contract: **Contract** 

Contract description: General Contractor

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing general contracting services for facilities in western Nevada. This amendment increases the maximum amount from \$285,000 to \$440,000 due to the increased need for these services.

#### CONTRACT AMENDMENT

		Trans \$	Into Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$80,000.00	\$80,000.00	\$80,000.00	Yes - Info
	a. Amendment 1:	\$120,000.00	\$120,000.00	\$200,000.00	Yes - Action
	b. Amendment 2:	\$85,000.00	\$85,000.00	\$85,000.00	Yes - Info
2.	Amount of current amendment (#3):	\$155,000.00	\$155,000.00	\$240,000.00	Yes - Action
3.	New maximum contract amount:	\$440,000.00			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Facility related emergency and non-emergency conditions may require immediate attention to address safety and health related liabilities. This contract will allow the division to address these situations expeditiously.

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

State employees do not possess the knowledge or expertise to perform these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Division?

Nο

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

b. Soliciation Waiver: Not Applicable

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

This vendor was selected as the best value to the division and State and has a history of satisfactory performance with the division.

d. Last bid date: 03/22/2022 Anticipated re-bid date: 03/16/2026

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

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 been under contract with the division for since SFY17 and service has 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 Approvalhedmonds01/25/2024 17:10:18 PMDivision Approvalhedmonds01/25/2024 17:10:28 PMDepartment Approvalhedmonds01/25/2024 17:10:38 PMContract Manager Approvalrmorse02/06/2024 14:47:44 PM

Budget Analyst Approval BOE Agenda Approval rjacob3 vmilazz1 02/08/2024 10:30:16 AM 02/16/2024 13:34:19 PM

For Board Use Only Date: 03/12/2024

# CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28740

Legal Entity

Architectural Resources Group, Inc.

Name:

**DCNR - STATE LANDS** Agency Name: 707

Contractor Name: Architectural Resources Group, Inc.

Address:

PIER 9 SUITE 107

Appropriation Unit: 4206-39

Is budget authority

Yes

City/State/Zip

**SAN FRANCISCO, CA 94111** 

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Kitty Vieth 4154211680

Vendor No.: **NV Business ID:**  T29045252 NV20091559958

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 % Federal Funds 0.00 % **Highway Funds** 

Fees X **Bonds** 

0.00 % 100.00 %

0.00 %

Other funding

0.00 %

2. Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

NA

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

12/31/2026

3. Termination Date: Contract term:

2 years and 334 days

4. Type of contract:

Contract

Contract description:

**VAN SICKLE VC** 

5. Purpose of contract:

This is a new contract to provide architectural and design services for the continued development of Van Sickle Bi-State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$1.393.860.00

Other basis for payment: Per attached cost proposal.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Architectural and engineering design services are required for the continuation of Van Sickle Bi-State Park, Phase 3. This work is to be performed on the Nevada side of the bi-state park in Stateline, NV.

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

Agency staff does not have the equipment and qualifications to perform this work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

- b. Soliciation Waiver: Professional Service (As defined in NAC 333.150)
- c. Why was this contractor chosen in preference to other?

Vendor is a registered architect. This vendor was directly selected as the best fit for the project and the site. ARG has unique and extensive qualifications and experience designing visitor centers in park settings. They previously completed a contract designing the visitor center to 30% and have an understanding of the project.

d. Last bid date:

Anticipated re-bid date:

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

No No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

State Lands contracted with this vendor for services. The quality of the services performed was satisfactory.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Fromherz, Kevin, NTRT Program Manager Ph: 775-684-2736

Lepire, Marc, Supervisor Engineer Ph: 775-684-2791

20. Contract Status:

Approval Level	User	Signature Date
Budget Account Approval	avance	01/08/2024 12:55:52 PM
Division Approval	avance	01/29/2024 11:25:30 AM
Department Approval	kwilliam	01/29/2024 13:36:03 PM
Contract Manager Approval	avance	01/29/2024 15:08:11 PM
Budget Analyst Approval	rjacob3	02/16/2024 07:57:40 AM
BOE Agenda Approval	vmilazz1	02/16/2024 09:17:07 AM
BOE Final Approval	Pending	

For Board Use Only
Date: 03/12/2024

# **CONTRACT SUMMARY**

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28756

Legal Entity

DP VIDEO PRODUCTIONS, LLC

Name:

Agency Name: **DETR - REHABILITATION DIVISION** 

Contractor Name:

**DP VIDEO PRODUCTIONS, LLC** 

Address:

6984 SMILING CLOUD AVE

Appropriation Unit: 3265-42

Is budget authority

Yes

City/State/Zip

**HENDERSON, NV 89011-5013** 

available?:

Agency Code:

If "No" please explain: Not Applicable

901

Contact/Phone:

Emire Stitt 702/468-9901

Vendor No.:

T29019963A

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

2024-2028

NV Business ID: NV20041136819

What is the an area of fire to that will be an all the another area to a late of the decrease of the second of the

What is the source of funds that will be used to pay the contractor? 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 #: 3812-28-REHAB (99SWC-NV23-17906)

No

2. Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

NA

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

07/31/2027

3. Termination Date: Contract term:

3 years and 151 days

4. Type of contract:

Other (include description): Service Agreement

Contract description: W

**Website Development** 

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17906 which provides consulting, marketing and education services. This service agreement provides website and mobile application services to help youth with disabilities navigate the transition from high school to post-secondary education or employment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$4,160,645.00

Other basis for payment: As invoiced by the Contractor and approved by the State. Contract not to exceed \$4,160,645.00.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Under the terms of the grant award provided by the US Department of Education, through the Nevada Department of Education, the project must establish a project-specific website geared toward actionable items, such as information that is for the youth service professional or project participant resources for children and youth with disabilities such as interest inventories, career exploration including virtual employer tours, job duties, educational courses that support specific careers, resources for transitioning from middle to high school or high school to post-secondary education or employment.

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 create a website and mobile application of this nature and scale.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation Waiver: Not Applicable

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

DP Video was selected from the list of vendors in Statewide Contract# 99SWC-NV23-17906 due to their experience creating and maintaining the current VR Nevada website. Additionally, this vendor is familiar with the accessibility needs of individuals with disabilities. DP Video has proven in the past, the ability to comply with Section 508 of the American with Disabilities Act along with Web Content Accessibility Guidelines and is consistent in meeting these standards to provide access to digital products for all users regardless of their abilities.

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

Yes

\$50,000?

## III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 service to Rehabilitation Division since July 2014 and various DHH agencies since March 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:

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:

Mechelle Merrill, Rehabilitation Division - Deputy Administrator of Programs Ph: 775-687-6862

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	clarki1	01/23/2024 13:30:57 PM
Division Approval	cedlefse	01/30/2024 09:14:07 AM
Department Approval	cedlefse	01/30/2024 09:14:11 AM
Contract Manager Approval	wcune1	01/31/2024 09:01:47 AM
EITS Approval	ljean	02/02/2024 08:04:50 AM
Budget Analyst Approval	twollan1	02/14/2024 10:31:23 AM



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

## MEMORANDUM

**TO:** Drazen Elez, Administrator, DETR

Brett Martinez, Deputy Administrator, DETR

Laxmi Bokka, IT Chief Manager, DETR

Jill Martin, Management Analyst III, DETR

CC: Tim Galluzi, State Chief Information Officer, OCIO

Robert Dehnhardt, State Chief Information Security Officer, OCIO

Sean Montierth, Computing Services Unit, OCIO

David Axtell, Deputy CIO - Chief Technology Officer, OCIO

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

**SUBJECT**: TIN Completion Memo – DETR – TIN 785 – Nevada Transitions Roadmap

through Innovative Partnerships Project (TRIP) - BA 3265, 3254

**DATE:** November 7, 2023

We have completed our review for the Department of Employment, Training and Rehabilitation's (DETR) – *Nevada Transitions Roadmap through Innovative Partnerships Project (TRIP)* – TIN 785.

The submitted TIN, for an estimated value of \$2,813,250.00 in the FY24/FY25 biennium, \$897,000.00 in the FY26/FY27 biennium, and \$448,500.00 in FY28 (100% Federal Grant), is to support development of a seamless system of transition services for Nevada's children and youth with disabilities.

The Nevada State Department of Education (NDE) Office of Inclusive Education has secured Disability Innovation Funds (DIF) spanning a 5-year period for a project aimed at establishing a seamless transition

service system for children and youth with disabilities. In collaboration with key partners, including the State of Nevada Bureau of Vocational Rehabilitation, independent living centers, school districts, and academic institutions, the project aligns with the DIF Pathways to Partnerships Innovative Model Demonstration Project Absolute Priority. This endeavor addresses challenges related to collaboration, funding coordination, and the provision of seamless transition services by required partners.

The State of Nevada Bureau of Vocational Rehabilitation (NBVR) plays a pivotal role in this initiative. NBVR will spearhead the development of the project's website and mobile app, engaging in marketing and outreach efforts in partnership with other stakeholders. Additionally, NBVR will lead focus groups to gather valuable input for the roadmap tool's development. They will actively manage website maintenance and improvement efforts while promoting the use of the Nevada TRIP website among appropriate participants. This project is vital as it aligns with federal mandates for providing essential education and transition services for students with disabilities, focusing on enhancing academic and functional achievements and facilitating their transition to various post-school activities.

The Nevada TRIP Project will have minimal impact on the state's server and network infrastructure, as it will rely on custom-developed software on Cloud Based Hosting Services to achieve its objectives.

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)

## **DESCRIPTION OF CONTRACT**

1. Contract Number: 28641

Legal Entity

Nevadaworks

Name:

**DETR - EMPLOYMENT SECURITY** Agency Name: 902 Agency Code:

Appropriation Unit: 4770-12

Contractor Name:

**Nevadaworks** 

Address:

639 Isbell Road

Ste 420

Is budget authority

Yes

City/State/Zip

Reno, NV 89509

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Milton Stewart 775-337-8600

Vendor No.:

T27003177

**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

100.00 % Wage Assessment, Career Enhancement

**Program** 

Federal Funds Highway Funds 0.00 % 0.00 % **Bonds** 

Other funding

0.00 % 0.00 %

NA

Agency Reference #:

3809-27-ESD

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval? Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

12/31/2026

3. Termination Date: Contract term:

2 years and 305 days

4. Type of contract:

Interlocal Agreement

Contract description:

**Training Services** 

5. Purpose of contract:

This is a new interlocal agreement to provide training, skills enhancement, and career pathway development.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$625,000.00

Other basis for payment: As invoiced by vendor and approved by the state.

## II. JUSTIFICATION

7. What conditions require that this work be done?

CEP funding was implemented to assist unemployed and underemployed for specialized training projects for occupational categories determined to be in high-growth, high-demand occupations, and emerging industries in Nevada.

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

Agency does not have the skill or expertise necessary for this project.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

## 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

Approved Cost Allocation Plan - 5.48%

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided satisfactory services to DETR since 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** kwoodwar 01/19/2024 09:50:19 AM **Division Approval** sterr2 01/19/2024 09:58:33 AM Department Approval sterr2 01/19/2024 09:58:35 AM Contract Manager Approval wcune1 01/23/2024 12:11:36 PM 02/13/2024 14:18:29 PM **Budget Analyst Approval** twollan1 **BOE** Agenda Approval mranki1 02/14/2024 10:31:08 AM **BOE** Final Approval Pending

# MASTER SERVICE AGREEMENT SUMMARY

						EXCEPTIONS
BOE	D=D= #	07475 4 0 5 1 0 1	001/7040700			FOR
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR
						EMPLOYEES
		VARIOUS STATE	DANVILLE SERVICES	OTHER:	\$10,000,000	
		AGENCIES	OF NEVADA, LLC	VARIOUS AGENCIES	Ψ. σ,σσσ,σσσ	
4			ent to the original contrac		g disabilities	support and
1.			ement services. This ame			ount from
	Description:		,000 due to the increased		3.	
			03/08/2022 - 01/31/2026			
		VARIOUS STATE	FRONTIER	OTHER:	\$10,750,000	
		AGENCIES	ENVIRONMENTAL	VARIOUS AGENCIES		
2.		This is a new contract to	SOLUTIONS, INC.  provide ongoing Abando	ned Mine I and program	and hat nate	a installation
۷.	Contract	services.	provide origoring Abando	ned wille Land program	i and bat gati	e installation
	Description:		Upon Approval -			
	•		02/12/2028	Contract # 28769		
		VARIOUS STATE	GERI LYNN GROSSAN	OTHER:	\$1,900,000	)
		AGENCIES	DBA NUTRITION	VARIOUS AGENCIES		
			MOVES!			
3.	0	This is the first amendment to the original contract which provides ongoing dietician and nutrition services. This amendment increases the maximum amount from \$100,000 to \$2,000,000 due to the				
		increased need for these		n amount from \$100,00	0 to \$2,000,0	oud due to the
	Description.		06/27/2022 - 04/30/2026	Contract # 26111		
		VARIOUS STATE	PINNACLE	OTHER:	\$16,000,000	
		AGENCIES	COMMUNITY	VARIOUS AGENCIES	***********	
			SERVICES LIMITED			
4.			PARTNERSHIP			
٦.	_		ent to the original contrac			
	Contract		ces. This amendment inci		nount from \$4	40,000,000 to
	Description:		increased need for these 05/10/2022 - 04/30/2026			
			TANCELL CARE, LLC	OTHER:	\$20,000,000	)
		AGENCIES	TANOLLE OAKL, LLO	VARIOUS AGENCIES	Ψ20,000,000	
			ent to the original contrac		g autism trea	tment assistance
_			pport, support services fo		_	
5.	Contract	community-based living	arrangements, disabilities	s support, respite care, a	and supportiv	e living
	Description:	arrangement services. This amendment increases the maximum amount from \$10,000,000 to				
			increased need for these			
			05/10/2022 - 01/31/2026		<b>#40 500 000</b>	
		VARIOUS STATE AGENCIES	TRANSITION SERVICES, INC.	OTHER: VARIOUS AGENCIES	\$12,500,000	)
			-		a community	work experience
6		This is the first amendment to the original contract which provides ongoing community work experience programs, customized employment, employment support, job development, and pre-employment				
6.			<u> </u>		•	· ·
6.	Contract	programs, customized e	<u> </u>	support, job developme	nt, and pre-e	mployment .
6.	Contract Description:	programs, customized e	mployment, employment ent increases the maximur	support, job developme	nt, and pre-e	mployment .

# MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
		VARIOUS STATE		OTHER:	\$1,000,000	)
		AGENCIES	ENVIRONMENTAL, INC.	VARIOUS AGENCIES		
7.	This is a new contract to provide ongoing Abandoned Mine Land program and bat gate installation					
7.	Contract	services.				
	Description:		Upon Approval -			
		Term of Contract:	02/12/2028	Contract # 28770		

## **CONTRACT SUMMARY**

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

## I. DESCRIPTION OF CONTRACT

1 1. Contract Number: 25446 Amendment

Number:

Legal Entity DANVILLE SERVICES OF NEVADA,

Name:

Agency Name: **MSA MASTER SERVICE** Contractor Name: DANVILLE SERVICES OF NEVADA, **AGREEMENTS** 

Agency Code: MSA Address: 4343 N. Rancho Dr.

Appropriation Unit: 9999 - All Categories Suite 234

LAS VEGAS, NV 89130 Is budget authority Yes City/State/Zip

available?:

If "No" please explain: Not Applicable Contact/Phone: Laura Sandle 702-354-5102

> Vendor No.: T80959541 NV20011078355 **NV Business ID:**

> > Info Accum \$

Action Accum \$

Agenda

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 No or b. other effective date 03/08/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

01/31/2026

3. Previously Approved Termination Date:

> Contract term: 3 years and 330 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 \$30,000,000 to \$40,000,000 due to the increased need for these services.

### CONTRACT AMENDMENT

1.	The max amount of the original contract:	\$30,000,000.00	\$30,000,000.00	\$30,000,000.00 Yes - Action
2.	Amount of current amendment	\$10,000,000.00	\$10,000,000.00	\$10,000,000.00 Yes - Action

Trans \$

(#1): 3.

\$40,000,000.00 New maximum contract

amount:

### 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.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation 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: 06/01/2026

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

b. Is the contract part of an IT investment project over No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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** 01/09/2024 13:17:28 PM Ideloach **Division Approval** Ideloach 01/09/2024 13:17:32 PM Department Approval Ideloach 01/09/2024 13:17:36 PM Contract Manager Approval ascaffid 02/06/2024 11:15:23 AM Iramire7 02/16/2024 11:25:57 AM **Budget Analyst Approval BOE** Agenda Approval stilley 02/16/2024 11:26:12 AM

## CONTRACT SUMMARY

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

## **DESCRIPTION OF CONTRACT**

1. Contract Number: 28769

Legal Entity

Frontier Environmental Solutions, Inc.

Name:

**MSA MASTER SERVICE** Agency Name:

Contractor Name: Frontier Environmental Solutions, Inc.

**AGREEMENTS** 

Address: 8118 Coyote Trail Ave.

Agency Code: MSA Appropriation Unit: 9999 - All Categories

Is budget authority

Yes

City/State/Zip

Invokern, CA 93527

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Ed Winchester 760-608-1869 Pendina

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

NV20212243289

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 Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Various Agencies

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

NA

Examiner's approval?

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: \$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

Yes

Division?

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

Mountain States Restoration

**Broadbent** McGinlev

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

MSA<sub>2</sub> Contract #: 28769 Page 1 of 2

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

No

\$50,000?

## III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer II Ph: 775-684-0157

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date Budget Account Approval Ideloach 01/19/2024 14:51:19 PM **Division Approval** Ideloach 01/19/2024 14:51:21 PM Department Approval Ideloach 01/19/2024 14:51:23 PM Contract Manager Approval 01/19/2024 15:00:26 PM nfese1 Iramire7 01/31/2024 09:10:15 AM **Budget Analyst Approval BOE** Agenda Approval 02/08/2024 12:29:09 PM stilley **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 1. Contract Number: 26111 Amendment

Number:

Legal Entity GERI LYNN GROSSAN

Name:

**GERI LYNN GROSSAN DBA** Agency Name: **MSA MASTER SERVICE** Contractor Name: **AGREEMENTS** 

**NUTRITION MOVES!** 

Agency Code: MSA Address: 7721 LEAVORITE DR

Appropriation Unit: 9999 - All Categories

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89128-4094

available?:

If "No" please explain: Not Applicable Contact/Phone: Geri Grossan 702-499-1040

> Vendor No.: T29030525 **NV Business ID:** NV20111319055

> > Info Accum \$

Action Accum \$

Agenda

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 No or b. other effective date 06/27/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 04/30/2026

Termination Date:

Contract term: 3 years and 308 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 dietician and nutrition services. This amendment increases the maximum amount from \$100,000 to \$2,000,000 due to the increased need for these services.

Trans \$

### CONTRACT AMENDMENT

1.	The max amount of the original contract:	\$100,000.00	\$100,000.00	\$100,000.00 Yes - Action
2.	Amount of current amendment (#1):	\$1,900,000.00	\$1,900,000.00	\$1,900,000.00 Yes - Action

3. \$2,000,000.00 New maximum contract

amount:

### 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.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Multiple Agencies, Agencies are satisfied.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

No b. If "No", please explain:

## Doing Business As

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** 01/09/2024 15:26:58 PM Ideloach **Division Approval** Ideloach 01/09/2024 15:27:01 PM Department Approval Ideloach 01/09/2024 15:27:04 PM Contract Manager Approval ascaffid 02/06/2024 11:31:34 AM Iramire7 02/08/2024 12:05:02 PM **Budget Analyst Approval BOE** Agenda Approval stilley 02/16/2024 11:16:28 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 1. Contract Number: 25867 Amendment

Number:

Legal Entity PINNACLE COMMUNITY SERVICES

LIMITED PARTNERSHIP Name:

Agency Name: **MSA MASTER SERVICE** Contractor Name: PINNACLE COMMUNITY SERVICES **AGREEMENTS** 

LIMITED PARTNERSHIP

Agency Code: MSA Address: 3435 W CHEYENNE AVE

Appropriation Unit: 9999 - All Categories **SUITE 101** 

Is budget authority Yes City/State/Zip **NORTH LAS VEGAS, NV 89032** 

available?:

If "No" please explain: Not Applicable Contact/Phone: LARRY TOKARSKI 702-798-2700

> Vendor No.: T81075406 **NV Business ID:** NV20001154973

> > Info Accum \$

Action Accum \$

Agenda

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 %

100.00 % VARIOUS AGENCIES Highway Funds 0.00 % X Other funding

Agency Reference #: S1737-RV

2. Contract start date:

a. Effective upon Board of No or b. other effective date 05/10/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 04/30/2026

Termination Date:

Contract term: 3 years and 356 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 case management and disabilities support services. This amendment increases the maximum amount from \$40,000,000 to \$56,000,000 due to the increased need for these services.

Trans \$

### CONTRACT AMENDMENT

1.	The max amount of the original contract:	\$40,000,000.00	\$40,000,000.00	\$40,000,000.00 Yes - Action
2.	Amount of current amendment (#1):	\$16,000,000.00	\$16,000,000.00	\$16,000,000.00 Yes - Action

3. \$56,000,000.00 New maximum contract

amount:

### 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.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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:

LP

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approvai Levei	User	Signature Date
Budget Account Approval	Ideloach	01/09/2024 15:25:11 PM
Division Approval	ldeloach	01/09/2024 15:25:14 PM
Department Approval	Ideloach	01/09/2024 15:25:16 PM
Contract Manager Approval	ascaffid	02/06/2024 11:49:56 AM
Budget Analyst Approval	Iramire7	02/08/2024 12:05:38 PM
BOE Agenda Approval	stilley	02/16/2024 11:19:45 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: 25837 Amendment 1

Number: Legal Entity

TANCELL CARE, LLC

Name:

Agency Name: MSA MASTER SERVICE Contractor Name: TANCELL CARE, LLC

AGREEMENTS

Agency Code: MSA Address: 1500 E TROPICANA AVE

Appropriation Unit: 9999 - All Categories SUITE 248

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89119-8325

available?:

If "No" please explain: Not Applicable Contact/Phone: Louie Tandiono-Cellona 702-476-0262

Vendor No.: T27042527

Info Accum \$

Action Accum \$

Agenda

NV Business ID: NV20181283232

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 No or b. other effective date 05/10/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

NOT Applicable

01/31/2026

3. Previously Approved Termination Date:

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 autism treatment assistance programs, behavioral support, support services for the blind and visually impaired, case management, community-based living arrangements, disabilities support, respite care, and supportive living arrangement services. This amendment increases the maximum amount from \$10,000,000 to \$30,000,000 due to the increased need for these services.

### 6. CONTRACT AMENDMENT

		φ	γ	rigeriae
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):	\$20,000,000.00	\$20,000,000.00	\$20,000,000.00 Yes - Action
3.	New maximum contract	\$30,000,000.00		

Trans \$

## II. JUSTIFICATION

amount:

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

Nο

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

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

## III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 15:21:45 PM
Division Approval	Ideloach	01/09/2024 15:21:47 PM
Department Approval	Ideloach	01/09/2024 15:21:54 PM
Contract Manager Approval	ascaffid	02/06/2024 11:35:41 AM
Budget Analyst Approval	Iramire7	02/16/2024 11:27:11 AM
BOE Agenda Approval	stilley	02/16/2024 11:30:04 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 1. Contract Number: 26093 Amendment

Number:

Legal Entity TRANSITION SERVICES, INC.

Name:

Agency Name: **MSA MASTER SERVICE** Contractor Name: TRANSITION SERVICES, INC.

**AGREEMENTS** 

Agency Code: MSA Address: 2408 LAS VERDES ST

Appropriation Unit: 9999 - All Categories

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89102-3848

available?:

If "No" please explain: Not Applicable Contact/Phone: Sally Rothfuss 702-383-1106

> Vendor No.: T81029761 NV19981182644 **NV Business ID:**

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 %

100.00 % Various Agencies Highway Funds 0.00 % X Other funding

Agency Reference #: S1737-RV

2. Contract start date:

a. Effective upon Board of No or b. other effective date 06/27/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 04/30/2026

Termination Date:

Contract term: 3 years and 308 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 community work experience programs, customized employment, employment support, job development, and pre-employment services. This amendment increases the maximum amount from \$7,500,000 to \$20,000,000 due to the increased need for these services.

### CONTRACT AMENDMENT

		Trans \$	Info Accum \$	Action Accum \$ Agenda
1.	The max amount of the original contract:	\$7,500,000.00	\$7,500,000.00	\$7,500,000.00 Yes - Action
2.	Amount of current amendment	\$12,500,000.00	\$12,500,000.00	\$12,500,000.00 Yes - Action

3. \$20,000,000.00 New maximum contract

amount:

### 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.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

b. Soliciation 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.

No

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

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

b. Is the contract part of an IT investment project over No

\$50,000?

### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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 13:42:24 PM **Division Approval** 01/09/2024 13:42:27 PM Ideloach Department Approval Ideloach 01/09/2024 13:42:31 PM Contract Manager Approval ascaffid 02/06/2024 11:28:07 AM **Budget Analyst Approval** Iramire7 02/08/2024 12:04:08 PM **BOE** Agenda Approval stilley 02/16/2024 11:12:26 AM

## CONTRACT SUMMARY

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

## **DESCRIPTION OF CONTRACT**

1. Contract Number: 28770

Legal Entity

Transcon Environmental, Inc.

Name:

**MSA MASTER SERVICE** Agency Name:

**AGREEMENTS** 

Contractor Name: Transcon Environmental, Inc.

Agency Code: MSA

Address:

1745 S. Alma School Road

Suite 220

Appropriation Unit: 9999 - All Categories Is budget authority

available?:

Yes

City/State/Zip

Mesa, AZ 85210

If "No" please explain: Not Applicable

Contact/Phone:

Carolyn Baum 707-786-6502

Vendor No.:

T29048222

**NV Business ID:** 

NV20151718699

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 Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding 100.00 % Various Agencies

Contract start date:

a. Effective upon Board of

Yes or b. other effective date:

Examiner's approval?

03/2024

NA

Anticipated BOE meeting date 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: \$1.000.000.00

## 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

Yes

Division?

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

Broadbent

HydroGeoLogic

McGinley

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

MSA 7 Contract #: 28770 Page 1 of 2

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

No

\$50,000?

## III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer II Ph: 775-684-0175

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 01/19/2024 14:44:36 PM Budget Account Approval Ideloach **Division Approval** Ideloach 01/19/2024 14:44:40 PM Department Approval Ideloach 01/19/2024 14:44:42 PM Contract Manager Approval 01/19/2024 15:00:49 PM nfese1 Iramire7 01/31/2024 09:08:04 AM **Budget Analyst Approval BOE** Agenda Approval 02/08/2024 12:32:12 PM stilley **BOE** Final Approval Pending

BOE	DEDT #	CTATE A CENCY	CONTRACTOR	FUNDING COURCE	ANAOLINIT	EXCEPTIONS FOR
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR EMPLOYEES
	030	ADVOCATE	REGULATORY CONSULTING, LLC	OTHER: REGULATORY ASSESSMENTS		Professional Service
1.	Contract Description:	an expert witness in the fi applications of electric, na from \$436,875 to \$526,87	dment to the original contribled of economics in analy atural gas, and water utiliting due to the increased new 106/09/2020 - 06/10/2024	zing revenue requirementies. This amendment included for these services.	nts for gener	al rate
2.	030	ATTORNEY GENERAL'S OFFICE - TORT CLAIMS FUND	ANDREA MICHELLE MILLER-FINCH	OTHER: TORT CLAIMS		Professional Service
	Contract Description:	Caldarone, Defendant, ca	provide ongoing expert wi ase No. 2:21-cv-01155-CD  11/15/2023 - 06/30/2026	S-BNW.	Ratcliff, Plai	ntiff, v. Carlos
		ATTORNEY GENERAL'S		OTHER:	¢22.200	Drofossional
3.	030	OFFICE - TORT CLAIMS FUND	GARETS	TORT CLAIMS		Professional Service
	Contract Description: This is a new contract to provide expert witness services for Gabriel Plank, Plaintiff v. Department Motor Vehicles, et al, Defendant.  Term of Contract:  11/10/2023 - 11/01/2027   Contract # 28750					epartment of
4.	040	SECRETARY OF	ELECTION SYSTEMS & SOFTWARE, INC.		\$19,712	2
	Contract	This is a new contract to provide programming of voting equipment and on-site support for counties participating in a mock election.				
	Description:	Term of Contract:	02/13/2024 - 03/31/2024	Contract # 28897		
E	051		SOCIAL ENTREPRENEURS, INC.	OTHER: TRANSFER FROM ENDOWMENT ACCOUNT	\$84,906	
	This is a new service agreement under statewide contract #99SWC-NV23-17884 which provide Contract consulting, marketing, and education services. This service agreement provides ongoing adver Description: marketing, and media services for the Women + Money: The Financial Empowerment Summit.				g advertising,	
			01/29/2024 - 06/30/2024			
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	#1 SERVICES, LLC DBA VEGAS VIEW WINDOW CLEANING		\$97,220	
	Contract Description:	Vegas.	provide ongoing window o		McCarran Ce	enter in Las

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
7.	082	ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ERIC BARRY DBA EB HOMES	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$14,700	
	Contract	This is a new contract to	provide an ADA access ra	mp at the Laxalt building	g located in 0	Carson City.
	Description:	Term of Contract:	01/18/2024 - 12/01/2024	Contract # 28542		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS		BUILDINGS AND GROUNDS RENTAL INCOME	\$67,665	
	Contract	Nevada State Capitol.	provide installation and re		ty camera sy	stem at the
		Term of Contract:	01/30/2024 - 11/30/2024			
9.	082	ADMINISTRATION -	HIGH QUALITY CONCEPTS DBA BEST JANITORIAL SERVICES OF NV		\$41,265	
	Contract Description: This is a new contract to provide custodial services for the Washoe Building at the McCar Las Vegas.					arran Center in
		Term of Contract:	02/02/2024 - 05/01/2024			
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	BRET ALLEN DBA NEWT CONCRETE CONSTRUCTION	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$52,899	
		This is a new contract to	provide replacement of bro	oken concrete walkways	s. removal of	tree roots at the
			Illation of catch basin pipir	•		
		the Governor's Mansion.		.9,		
	-		01/31/2024 - 11/30/2024	Contract # 28638		
		DEPARTMENT OF	RICK'S FLOOR	OTHER:	\$34,750	)
		ADMINISTRATION -	COVERING, INC.	BUILDINGS AND	<b>,</b> , , , , ,	
	082	STATE PUBLIC WORKS		GROUNDS RENTAL		
11.		- BUILDINGS AND GROUNDS		INCOME		
	Contract	State Capitol Building.	provide removal and repla	·	e second floo	r of the Nevada
	Description.	Term of Contract:	01/30/2024 - 03/01/2024	Contract # 28643		

BOE						EXCEPTIONS FOR
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR
						EMPLOYEES
		DEPARTMENT OF	JOSE GUZMAN &	OTHER:	\$50,000	D
	000	ADMINISTRATION -	SABRINA TELLEZ DBA	BUILDINGS AND		
	082	STATE PUBLIC WORKS		GROUNDS RENTAL		
12.		- BUILDINGS AND GROUNDS	CARPET & UPHOLSTERY	INCOME		
		This is a new contract to p		eaning for state-owned r	properties in	northern
	Contract Description:	Nevada.				
	'	Term of Contract:	01/31/2024 - 10/31/2027		<b>#</b> 40.00	
		DEPARTMENT OF ADMINISTRATION -	TELE/DATA	OTHER:	\$40,000	)
	082	STATE PUBLIC WORKS	CONTRACTORS, INC.	BUILDINGS AND GROUNDS RENTAL		
	062	- BUILDINGS AND	TECHNOLOGIES	INCOME		
13.		GROUNDS	TEOTINOLOGILO	IIVOONIE		
	Contract	This is a new contract to	provide ongoing service, r	epair, replacement, mod	dification, an	d installation of
	Contract Description:	audio-visual equipment fo	or state-owned buildings in	southern Nevada.		
	•		01/31/2024 - 12/05/2027	Contract # 28603		
	082	DEPARTMENT OF	XCEL MAINTENANCE	OTHER:	\$46,440	)
		ADMINISTRATION -	SERVICES, INC.	BUILDINGS AND		
		STATE PUBLIC WORKS		GROUNDS RENTAL		
14.		- BUILDINGS AND GROUNDS		INCOME		
		This is a new contract to p	rovide ianitorial services	for the Fureka Building	located at th	e McCarran
	Contract Description:	Center in Las Vegas.	•		iooaloa al lii	C Woodinan
	Description.	Term of Contract:	11/01/2023 - 04/30/2024			
		DEPARTMENT OF	ARRINGTON WATKINS	GENERAL	\$77,010	Professional
		ADMINISTRATION -	ARCHITECTS, LLC			Service
	000	STATE PUBLIC WORKS - DEPARTMENT OF				
	082	CORRECTIONS CIP				
		PROJECTS - NON-				
15.		EXEC				
		This is the first amendme	nt to the original contract	which provides profession	onal archited	tural/engineering
		services for the Southern				
	Contract	CIP Project: CIP Project N	No. 23-M04; SPWD Contr	act No. 115639. This an	nendment ind	creases the
	Description:	maximum amount from \$			and bid doc	uments.
		Term of Contract:	09/12/2023 - 06/30/2027	Contract # 28075		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR	
						EMPLOYEES	
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON- EXEC	CORE WEST, INC.	HIGHWAY	\$14,154	Professional Service	
			dment to the original contr				
	Contract		ices for the Department o				
	Description:		Project No. 21-P06; SPV			dment increases	
			m \$205,912 to \$220,066 c 02/08/2022 - 06/30/2025		cations.		
		DEPARTMENT OF	TATE SNYDER KIMSEY		\$13.50	0 Professional	
			ARCHITECTS, LTD.		<b>V</b> 10,00	Service	
	082	STATE PUBLIC WORKS	DBA TSK				
		- STATEWIDE CIP					
17.		PROJECTS - NON- EXEC					
17.		_	nt to the original contract	which provides profession	onal architec	tural/engineering	
	Contract	services for the Department of Motor Vehicles Silverado Ranch - Advance Planning CIP Project: CIP					
		Project No. 21-P06; SPW				num amount from	
	Description.	\$4,126,423 to \$4,139,923			screens.		
		Term of Contract:	11/09/2021 - 06/30/2025		<b>^-</b>		
		DEPARTMENT OF	GEORGE M. ROGERS,	GENERAL	\$52,30	0 Professional Service	
		ADMINISTRATION - STATE PUBLIC WORKS	CHARTERED DBA			Service	
	082	- VETERANS CIP	ARCHITECT				
		PROJECTS - NON-					
		EXEC					
18.		This is a new contract to p	•				
10.		Nevada Veterans Memori					
		design development, con	<b>O</b>	• •			
		administration services fo lights, the patching and re					
		bases and the operable p					
		Contract No. 116092.	a. aorr ar ario contor or are	siir oriapor opaco. Or		00, 0. 110	
		Term of Contract:	01/18/2024 - 06/30/2027	Contract # 28522			

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES	
19.	082	STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON- EXEC	CURTAIN WALL DESIGN AND CONSULTING, INCORPORATED	GENERAL	·	DProfessional Service	
	This is a new contract to provide professional architectural/engineering services for the Pioche Conservation Camp - Roofing Replacement, Multipurpose Shop and Office Buildings CIP project t include consulting services for the installation of a single-ply membrane roofing system on the New Description: Division of Forestry's multipurpose shop and office buildings: CIP Project No. 23-S01-12; SPWD Contract No. 116104.						
20.	082	Term of Contract:  DEPARTMENT OF  ADMINISTRATION -  STATE PUBLIC WORKS - DEPARTMENT OF  ADMINISTRATION CIP  PROJECTS - NON-  EXEC	02/01/2024 - 06/30/2027 CURTAIN WALL DESIGN AND CONSULTING, INCORPORATED	GENERAL	\$19,500	Professional Service	
	Contract Description:	This is a new contract to p Nevada Child and Adoles	cent Services - Roofing R	eplacement, Buildings 1 oofing system: CIP Proj	3, 14, and 1	5 CIP Project to	
21.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON- EXEC	CURTAIN WALL DESIGN AND CONSULTING, INCORPORATED	HIGHWAY	\$10,700	Professional Service	
	Contract Description:	over the existing metal ro	•	Express Office Building ( of a decor style single-p th; SPWD Contract No.	CIP Project to oly membran	o include roofing	

						EXCEPTIONS FOR	
BOE	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS	
#						AND/OR	
						EMPLOYEES	
		DEPARTMENT OF	CURTAIN WALL	GENERAL	\$15,90	0 Professional	
		ADMINISTRATION -	DESIGN AND			Service	
		STATE PUBLIC WORKS - DEPARTMENT OF	CONSULTING, INCORPORATED				
		ADMINISTRATION CIP	INCORPORATED				
		PROJECTS - NON-					
22.		EXEC					
			orovide professional archi	tectural/engineering ser	vices for the	Jean	
			ofing Replacement, Indust				
	Contract	building envelope consult	ing services for the install	ation of a roofing systen	n on the Mul	tipurpose and	
	•		ne Nevada Division of Fore	estry's shop and office b	ouildings: CIF	P Project No. 23-	
		S01-10; SPWD Contract	*	1-			
			02/01/2024 - 06/30/2027		<b>#00.50</b>	Duete este est	
		DEPARTMENT OF	HARRIS CONSULTING	GENERAL 42%	\$29,500	O Professional	
		ADMINISTRATION - STATE PUBLIC WORKS	ENGINEERS, LLC	FEDERAL 58%		Service	
	082	- DEPARTMENT OF					
		ADMINISTRATION CIP					
		PROJECTS - NON-					
23.		EXEC					
	This is a new contract to provide professional architectural/engineering services for the Nevac						
		National Guard - Fire Alarm Replacement, Henderson Armory CIP Project to include construction					
		documents, permitting services, and bid assistance for the replacement of the fire alarm system: CIP Project No. 23-S03g-1; SPWD Contract No. 116003.					
		Project No. 23-S03g-1; S	PWD Contract No. 116003	3.			
		Term of Contract:	01/19/2024 - 06/30/2027		<b>\$05.00</b>	Drofossional	
		DEPARTMENT OF ADMINISTRATION -	JP ENGINEERING, LLC	FEDERAL 58%	\$95,000	OProfessional Service	
		STATE PUBLIC WORKS		I LDLINAL 30 /6		Service	
	082	- DEPARTMENT OF					
		ADMINISTRATION CIP					
		PROJECTS - NON-					
24.		EXEC					
			provide professional archi				
		· ·	County Training Center -		•		
		_	e investigation, design de	•			
	•		or the installation of a fire s	• •	ne Washoe (	County Armory:	
			3; SPWD Contract No. 11				
		Term of Contract:	01/19/2024 - 06/30/2027	Contract # 28415			

						EXCEPTIONS		
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	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	\$40,000	Professional Service		
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Northern Nevada Correctional Center, Central Plant and Operations Building - Roofing Replacement CIP Project to include drawings, cost estimating, bidding assistance, and construction administration services for the installation of a new roofing system: CIP Project No. 23-S01-7; SPWD Contract No. 116026.						
		Term of Contract: DEPARTMENT OF	01/19/2024 - 06/30/2027 TANEY ENGINEERING,		\$70.900	Professional		
	082		LLC	BONDS	\$7.500	Service		
		CONSERVATION AND NATURAL RESOURCES						
26.		AND AGRICULTURE CIP PROJECTS - NON- EXEC						
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Valley of Fire State Park - Reconfigure West Entrance CIP Project to include civil plans, electrical engineering design, bidding services, construction administration, record drawings, and aerial topographic survey for the design and construction of a reconfigured west entrance to incorporate additional entrance lanes that can utilize self-pay stations, and an upgraded fee booth and shade structure over the vehicular check-in lanes at the existing entry contact station: CIP Project No. 23-C23; SPWD Contract No. 116006.						
			01/26/2024 - 06/30/2027					
	082	STATE PUBLIC WORKS - CULTURAL AFFAIRS CIP PROJECTS - NON-	SAAREM CONSULTING ENGINEERS, LLC	GENERAL	\$73,700	Professional Service		
		EXEC						
27.	Contract Description:	Curatorial Center - HVAC services, prime consulting ventilating, and air condit and anthropological collethe replacement of the extended.	provide professional archi System Renovation CIP of g services, and mechanical ioning equipment in the arctions, addition of exterior clisting southeast overhead	Project to include structoral design for the design eas of the building that wall insulation on the eldoor: CIP Project No. 2	ural and elect and construct are used to s xisting maso	trical engineering stion of heating, store historical nry walls, and		
		Term of Contract:	01/31/2024 - 06/30/2027	Contract # 28540				

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES	
	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - CULTURAL AFFAIRS CIP PROJECTS - NON- EXEC	SAAREM CONSULTING ENGINEERS, LLC	GENERAL	\$20,700	Professional Service	
28.	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Marjorie Russell Research Center - Heating and Air Conditioning Upgrade CIP project to include electrical and structural engineering services, drawings, plan checking, bid support, and commissioning support for the replacement of heating, ventilating, and air conditioning equipment in the areas of the building that are used to store historical clothing and textile collections: CIP Project No. 23-M42; SPWD Contract No. 116115.					
		Term of Contract:	01/26/2024 - 06/30/2027		<b>#</b> 22 <b>F</b> 0	Drofossional	
	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF MOTOR VEHICLES CIP PROJECTS - NON- EXEC	ARCHITECTS +, LLC	BONDS	\$23,500	Professional Service	
29.		This is a new contract to provide professional architectural/engineering services for the Department of Motor Vehicles, Carson City - Seismic Replacement of Raised Server Room Floor CIP Project to include design development with design documents, construction documents, bid review, and submission with construction administration phases for the design and construction of a seismic rated raised server room floor and the temporary relocation and support of the existing server racks to maintain operations during construction: CIP Project No. 23-M22; SPWD Contract No. 116057.					
		Term of Contract:	01/31/2024 - 06/30/2027		<b>A</b>		
30.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON- EXEC	ARCHITECTS +, LLC	GENERAL 75% BONDS 25%		Derofessional Service	
		This is a new contract to provide professional architectural/engineering services for the Blasdel Building - Elevator Modernization and Renovation CIP Project to include architectural, electrical, and mechanical					

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	LUMOS & ASSOCIATES, INC.	GENERAL	\$11,250	Professional Service	
	Contract	Nevada Children's Home locate and mark undergro	provide professional archi - Demolition of Cottages ound utilities: CIP Project I 01/25/2024 - 06/30/2027	CIP project to include a No. 23-C19; SPWD Cor	utility and fie	ld survey to	
	082	ADMINISTRATION - STATE PUBLIC WORKS	IN2IT ARCHITECTURE	OTHER: AGENCY FUNDED CIP		Professional Service	
32.	Contract Description:	Nevada Adult Mental Hea architectural services, str estimating for the structur area: CIP Project No. 24-	provide professional archi lth Services, Building 6 - luctural engineering, const ral assessment of the stor A010-2(a); SPWD Contra  01/31/2024 - 06/30/2025	Mezzanine Structural Ro ruction administration, s age floor to assess the l ct No. 116130.	etrofit CIP Pr specifications	oject to include , and cost	
	102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT		GENERAL	\$21,850		
33.	Contract Description:	This is the first amendment to the original contract which provides ongoing website design and maintenance support services and marketing branding materials. This amendment increases the maximum amount from \$111,000 to \$132,850 due to the increased need for these services.  Term of Contract: 06/14/2023 - 06/13/2027 Contract # 27488					
34.	240	VETERANS SERVICES - OFFICE OF VETERANS SERVICES	AND CONCRETE, LLC	FEDERAL	\$18,000		
		This is a new contract to Term of Contract:	provide curbing installation   02/02/2024 - 12/31/2025				
35.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	MEDLIFE TRANSPORTATION, LLC	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	\$29,000		
			provide non-emergency m  02/08/2024 - 01/31/2026				

POE.						EXCEPTIONS FOR
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR EMPLOYEES
		DEPARTMENT OF	PIVIUM, INC.	OTHER:	\$48,264	
		VETERANS SERVICES	,	PRIVATE/COUNTY	. ,	
	240	- SOUTHERN NEVADA		35%		
36.		VETERANS HOME		FEDERAL 65%		
		ACCOUNT				
		This is a new contract to			ment.	
	Description:	Term of Contract:	01/26/2024 - 01/31/2026		<b>#</b> 40.046	
		DEPARTMENT OF	STONE SECURITY, LLC		\$18,640	)
	0.40	VETERANS SERVICES		PRIVATE/COUNTY		
27	240	- SOUTHERN NEVADA		35%		
37.		VETERANS HOME ACCOUNT		FEDERAL 65%		
	Contract	This is a new contract to	rovide installation of secu	rity equipment		
			02/01/2024 - 04/30/2026			
	Docomption.	STATE PUBLIC	ERIN LEE CONLEY	FEE:	\$23,976	3
	315	CHARTER SCHOOL		SPONSORSHIP	Ψ20,010	
38.		AUTHORITY				
		This is a new contract to	provide external reviews o	of charter school applica	tions and am	nendments.
		Term of Contract:	01/31/2024 - 11/30/2027			
		DEPARTMENT OF	ZEPHYR POINT	FEDERAL	\$17,640	)
		ADMINISTRATION -	PRESBYTERIAN			
	332	NEVADA STATE	CONFERENCE			
	332	LIBRARY, ARCHIVES	CENTER			
39.		AND PUBLIC RECORDS				
		- STATE LIBRARY				
	Contract		provide lodging and confe	rence room services for	the Director	's Summit
	Description:	conference. Term of Contract:	04/40/2024 05/24/2024	Contract # 20724		
		DEPARTMENT OF	01/19/2024 - 05/31/2024 BEATTY LIBRARY	OTHER:	¢10.400	Evennt
		ADMINISTRATION -	DISTRICT	REVENUE	\$10,400	Exempt
		STATE LIBRARY,	DISTRICT	REVENUE		
	332	ARCHIVES AND				
	332	PUBLIC RECORDS -				
40.		LIBRARY				
		COOPERATIVE				
	Operators at	This is a new revenue into	erlocal agreement to provi	ide ongoing membershi	p to the Neva	ada Library
	Contract	Cooperative.				·
	Description:	Term of Contract:	07/01/2023 - 06/30/2027	Contract # 27988		
		DEPARTMENT OF	GLOBAL TECHNICAL	GENERAL 25%	\$50,000	Sole Source
		HEALTH AND HUMAN	COMMUNICATIONS,	FEDERAL 75%		
	400	SERVICES -	LLC			
41.	.50	DIRECTOR'S OFFICE -				
		DEVELOPMENTAL				
	01	DISABILITIES	ana dala manbila Assasi	Diam Lanaura de la tra	ation or i	_
		This is a new contract to			ation service	25.
	Description:	Term of Contract:	10/01/2023 - 09/30/2024	Contract # 28708		

						EXCEPTIONS
BOE	DEDT "	OTATE A OFNOV	CONTRACTOR	FUNDING COURSE	ANACHINIT	FOR
#	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR
						EMPLOYEES
		DEPARTMENT OF	SHAWN ALLEN	GENERAL 36%	\$23,080	
		HEALTH AND HUMAN	BUTTER	FEDERAL 64%	Ψ20,000	
	400	SERVICES - AGING				
42.	402	AND DISABILITY				
42.		SERVICES - DESERT				
	•	REGIONAL CENTER				
			provide ongoing plumbing		e services.	
	Description:	Term of Contract:	04/01/2024 - 03/31/2028 SOCIAL		¢20.25(	
		DEPARTMENT OF HEALTH AND HUMAN	ENTREPRENEURS,	FEDERAL	\$28,250	
		SERVICES - AGING	INC.			
		AND DISABILITY				
	402	SERVICES - ADULT				
		PROTECTIVE				
43.		SERVICES & LONG-				
		TERM CARE				
		OMBUDSMAN			47004	
	Contract	_	eement under statewide condition of the december of the decemb			
			Vulnerable Adult Fatality F		vides corisui	tation services to
	Description.	Term of Contract:	02/13/2024 - 12/31/2024	1		
		DEPARTMENT OF	CARSON CITY	OTHER:	\$51,722	2Exempt
		HEALTH AND HUMAN	REGIONAL	REVENUE		
		SERVICES - HEALTH	TRANSPORTATION			
	403	CARE FINANCING AND	COMMISSION			
44.		POLICY -				
		INTERGOVERNMENTAL TRANSFER PROGRAM	•			
	_		erlocal agreement to provi	ide ongoing paratransit	services for	Medicaid eligible
	Contract		onoda agroomen to prom	ad ongonig paramanon		meaneana engliste
	Description:	Term of Contract:	07/01/2024 - 06/30/2028	Contract # 28637		
		DEPARTMENT OF	SOUTH LYON COUNTY		\$50,000	Exempt
		HEALTH AND HUMAN	HOSPITAL DISTRICT	REVENUE		
	400	SERVICES - HEALTH				
	403	CARE FINANCING AND POLICY -				
		INTERGOVERNMENTAL				
45.		TRANSFER PROGRAM				
			Iment to the original reven	ue interlocal agreemen	t which provi	des ongoing
		funds for the state's share	e of the Inpatient and Outp	patient Public Upper Pay	ment Limit S	Supplemental
		_	on-state government-owne			
	Description:		amount from \$1,011,190 to	\$1,061,190 due to the	increased no	eed for these
		services.	07/04/0000 00/00/0004	0		
		Term of Contract:	07/01/2020 - 06/30/2024	Contract # 22743		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES		
46.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	STOREY COUNTY	OTHER: REVENUE		7Exempt		
	Contract Description:	This is a new revenue interlocal agreement to provide medical care of indigent persons within the Medicaid County Match Program.						
	Description.	Term of Contract:	07/01/2023 - 06/30/2027	Contract # 28568				
47.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	SOCIAL ENTREPRENEURS, INC.	FEDERAL	\$52,160	D		
	0	•	eement under statewide c					
		consulting, marketing, an		•	vides consui	ting and training		
	Description.	services to address treatr						
		Term of Contract:	01/01/2024 - 09/30/2024		<b>COO</b> 40	7		
48.		DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNICABLE DISEASES	DP VIDEO PRODUCTIONS, LLC	FEDERAL	\$83,497			
		This is a new service agre						
		consulting, marketing, an		s service agreement pro	vides websit	e maintenance		
	Description:	for the Office of HIV, Ryan						
		Term of Contract:	01/01/2024 - 03/31/2024		1 4			
49.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	KPS/3	FEDERAL	\$27,72	5 Exempt		
			eement under statewide c					
	Contract	consulting, marketing, an	d education services. This	s service agreement pro	vides integra	ation of new		
	Description:	content to the Office of St						
		Term of Contract:	02/02/2024 - 07/31/2024	Contract # 28675				

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES		
50.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	RENOWN MEDICAL SCHOOL ASSOCIATES NORTH, INC.	FEDERAL	\$14,784			
	Contract Description:							
51.	406	Term of Contract:  DEPARTMENT OF  HEALTH AND HUMAN  SERVICES - PUBLIC  AND BEHAVIORAL  HEALTH - PUBLIC  HEALTH  IMPROVEMENTS	01/01/2024 - 12/31/2025 PUBLIC HEALTH SUPPORTIVE SERVICES, LLC	FEDERAL		Professional Service		
		consulting, marketing, an support the Data Modern		s service agreement pro				
52.	407	Term of Contract:  DEPARTMENT OF  HEALTH AND HUMAN  SERVICES - WELFARE  AND SUPPORTIVE  SERVICES -  ADMINISTRATION	02/02/2024 - 11/30/2024 DP VIDEO PRODUCTIONS, LLC	FEDERAL	\$46,500	D		
		This is a new service agreement under statewide contract #99SWC-NV23-17906 which provides						
53.	407	Term of Contract:  DEPARTMENT OF  HEALTH AND HUMAN  SERVICES - WELFARE  AND SUPPORTIVE  SERVICES -  TEMPORARY  ASSISTANCE FOR  NEEDY FAMILIES	01/01/2024 - 12/31/2024 NEVADA PUBLIC HEALTH FOUNDATION, INC.	FEDERAL	\$98,950	D		
	Contract Description:	consulting, marketing, an	eement under statewide c d education services. This ecutors, judges, and servi	s service agreement pro ice providers to increas	vides educa	tion and		

						EXCEPTIONS	
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	FOR SOLICITATIONS AND/OR EMPLOYEES	
54.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES -	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	GENERAL 45% FEDERAL 55%	\$14,02	l Exempt	
	Contract Description:	amount from \$5,080,987	infrastructure and an inter and graduate social work to \$5,095,008 due to the i	nsive quality training and students. This amendr ncreased need for these	d profession ment increas	al development	
			01/01/2021 - 06/30/2026		40.00		
55.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY	NEVADA P.E.P., INC.	GENERAL	\$3,892	2	
		ADMINISTRATION	nt to the original contract :	which provides engoing	ourport com	vices for the	
	Contract	This is the first amendment to the original contract which provides ongoing support services for the Washoe County Children's Mental Health Consortium. This amendment increases the maximum amount from \$6,588 to \$10,480 due to the increased need for these services.					
			08/21/2023 - 06/30/2025				
			EIDE BAILLY, LLP	FEDERAL	\$15.100	Professional	
56.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - FAMILY SUPPORT PROGRAM		I EDETAL	ψ10,100	Service	
	Contract	This is a new contract to p	orovide technical assistan	ce consulting and subre	cipient moni	toring training.	
	Description:		01/29/2024 - 06/30/2024	Contract # 28289			
57.	409	SERVICES - CHILD AND FAMILY SERVICES - FAMILY SUPPORT PROGRAM		FEDERAL		Exempt	
37.	Contract Description:	\$112,798 to \$191,298 due	ation of the Family First Pr ie 30, 2024 to September	evention Services Act. 7 29, 2024 and increases or these services.	This amendn	nent extends the	

вое	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS
#	<i>D</i> 2111 <i>n</i>	CIMENOLING	CONTINUEDR	TONDING COOKCE	7111100111	AND/OR EMPLOYEES
58.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SUMMIT VIEW YOUTH CENTER	LLC	GENERAL	\$98,000	
	Contract	16866 which acement of a				
	Description:		01/23/2024 - 06/30/2025			
59.	409	DEPARTMENT OF	INDEPENDENT CONSULTING, LLC DBA	GENERAL	\$24,383	3
		CENTER				
	Contract	This is a new contract to			pretation ser	vices.
	Description:		02/01/2024 - 01/31/2028			
60.	409	HEALTH AND HUMAN SERVICES - CHILD AND	DBA BLAIS	GENERAL 79% FEDERAL 21%	\$12,500	
	Contract	This is a new contract to postate residential facility	•	d monthly visits for child	dren that are	placed in an out-
	Description:	,	02/12/2024 - 01/31/2026	Contract # 28818		
			KD ELECTRIC	GENERAL	\$53,632	
61.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES				
		This is a new contract to p		<u>.                                      </u>	i, and parking	g lot lighting.
	Description:		01/19/2024 - 06/30/2024			
62.	409		SIERRA NEVADA CONSTRUCTION, INC.	GENERAL	\$69,770	
	Contract	This is a new contract to	provide repair, reseal, and	slurry for parking lots.		
			01/18/2024 - 06/30/2024			

						EXCEPTIONS FOR
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS AND/OR EMPLOYEES
63.	409	HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES		GENERAL 55% FEDERAL 45%	\$12,000	
	Contract Description:	emergency repairs on the \$24,572 due to the increa	nt to the original contract of generator. This amendmentsed need for these service 109/27/2022 - 08/31/2026	ent increases the contra		
64.		OFFICE OF THE MILITARY		FEDERAL	\$95,869	
	CONTRACT	classrooms.	orovide renovation of the I 02/08/2024 - 09/30/2026	·	ne expansior	of student
65.	440	DEPARTMENT OF CORRECTIONS - LOVELOCK CORRECTIONAL CENTER	D & D PLUMBING, INC.	GENERAL	\$38,336	5
			provide emergency boiler			
			07/01/2023 - 06/30/2024			
	500	COMMISSION ON MINERAL RESOURCES - DIVISION OF MINERALS	TERRITORY6	FEE: MINING CLAIM	\$90,000	
66.	Contract Description:	services for the Abandone March 31, 2024 to March to the continued need for	ment to the original contract Mine Land program. The 31, 2026 and increases the these services.	nis amendment extends ne maximum amount fro	the terminat	ion date from
67.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS	HIGHWAY		Exempt
			greement to provide a con	-	resource al	location study.
	Description:	Term of Contract:	01/23/2024 - 12/31/2024	Contract # 28760		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES		
68.	658	DEPARTMENT OF PUBLIC SAFETY - TRAFFIC SAFETY	CARAHSOFT TECHNOLOGY CORPORATION	FEE: MOTORCYCLE REVENUE 50% OTHER: REVENUE 50%	\$13,26			
			eement under statewide creement provides access to actional programs.   02/02/2024 - 09/15/2026	o a web-based survey				
	702	DEPARTMENT OF WILDLIFE - HERITAGE - NON-EXEC	SPEEDGOAT WILDLIFE SOLUTIONS, LLC	FEDERAL	\$20,000			
69.	Description:	large ungulates. This ame and increases the maxim services.	nt to the original contract vendment extends the term um amount from \$37,500	ination date from June to \$57,500 due to the c	30, 2024 to J	une 30, 2025		
		Term of Contract: DEPARTMENT OF	12/01/2021 - 06/30/2025 PURCELL ELECTRICAL		\$40,000 Pr	refereignel		
	702	WILDLIFE -	PROFESSIONAL	SPORTSMEN		ervice		
		DIRECTOR'S OFFICE	CORPORATION DBA PK		36	51 VICE		
70.		BIRECTOR 3 OF FICE	ELECTRICAL, INC.	FEDERAL 50%				
	Contract	This is a new contract to I	-		ing services			
		This is a new contract to provide electrical engineering design and consulting services.  Term of Contract: 01/31/2024 - 11/30/2027   Contract # 28532						
			U.S. DEPARTMENT OF	OTHER:	\$48,150 E>	cempt		
		WILDLIFE - LAW	AGRICULTURE -	REVENUE	ψ 10, 100 2	tompt		
71.		ENFORCEMENT	FOREST SERVICE					
	Contract	This is new revenue inter	local agreement to provide	e ongoing dispatch serv	vices.			
	Description:	Term of Contract:	01/01/2024 - 12/21/2026	Contract # 28530				
		DEPARTMENT OF	OREGON STATE	FEDERAL	\$30,092 Ex	kempt		
		WILDLIFE - GAME	UNIVERSITY					
72.		MANAGEMENT						
	Contract		greement to provide ongoi	ng diagnostic and disea	ase surveillar	nce services for		
	Description:	wildlife health.	07/04/0004 00/00/0000	O				
	•	Term of Contract:	07/01/2024 - 06/30/2028		000			
		DEPARTMENT OF CONSERVATION AND	ARTISTIC FENCE COMPANY, INC.	GENERAL	\$80,000			
	706	NATURAL RESOURCES						
73.	700	- FORESTRY -						
. 0.		ADMINISTRATION						
			orovide fencing services ir	western Nevada.				
			02/12/2024 - 06/30/2028					

						EXCEPTIONS FOR	
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT		
74.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	JESSICA CHERI LEMAY DBA JESSI LEMAY PHOTOGRAPHY	FEDERAL	\$20,000		
	Contract	This is a new contract to	provide photo and video s	ervices for the Forest	Legacy progr	am.	
			02/09/2024 - 12/31/2027				
75.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - ADMINISTRATION	RHP MECHANICAL SYSTEMS	GENERAL 87% OTHER: NURSERY 13%	\$90,000		
	Contract Description:	This is the third amendme conditioning and plumbin maximum amount from \$	ent to the original contract g services for facilities in v 200,000 to \$290,000 due t	vestern Nevada. This a to the increased need	amendment ir	ncreases the	
			05/16/2022 - 06/30/2026		400 -00-		
76.	706		MT. CHARLESTON FIRE PROTECTION DISTRICT	REVENUE	\$28,560E	xempt	
	Contract Description:	This is a new revenue int Protection Program.	erlocal agreement to provi	de wildland fire servic	e services under the Wildland Fire		
	Description.	Term of Contract:	12/01/2023 - 06/30/2025	Contract # 28772			
77.		DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - NURSERIES	SIMPLE POWER, INC. DBA SIMPLE POWER SOLAR	OTHER: NURSERY	\$80,000		
	Contract	This is a new contract to	provide maintenance and	repair services for the	solar panels	at the Eastlake	
	Description:	Nursery.					
	Description.	Term of Contract:					
78.	748	DEPARTMENT OF BUSINESS AND INDUSTRY - REAL ESTATE - ADMINISTRATION	ADVANTAGE APPRAISAL SERVICES, LLC	GENERAL 59.3% FEE: LICENSING AND ADMINISTRATIVE 40.7%	\$15,800		
			provide ongoing residentia				
		Term of Contract:	01/26/2024 - 06/30/2025				
79.	748	DEPARTMENT OF BUSINESS AND INDUSTRY - REAL ESTATE - ADMINISTRATION	DENNIS BADGER & ASSOCIATES, INC.	GENERAL 59.3% FEE: LICENSING AND ADMINISTRATIVE 40.7%	\$20,700		
			provide ongoing residentia		raisal reviews	S	
	Description:	Term of Contract:	01/26/2024 - 06/30/2025	Contract # 28520			

						EXCEPTIONS
DOE.						FOR
BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	SOLICITATIONS
#						AND/OR
						EMPLOYEES
		DEPARTMENT OF	ADT COMMERCIAL,	HIGHWAY	\$45,148	3
	810	MOTOR VEHICLES -	LLC			
80.		FIELD SERVICES				
			provide security solutions,		oring.	
	Description:	Term of Contract:	02/13/2024 - 07/31/2028	FEDERAL	¢24.000	) Everent
		DEPARTMENT OF EMPLOYMENT,	ODYSSEY CHARTER SCHOOL OF NEVADA	FEDERAL	\$34,600	Exempt
		TRAINING &	SCHOOL OF NEVADA			
	901	REHABILITATION -				
	301	REHABILITATION -				
81.		VOCATIONAL				
0		REHABILITATION				
			nt to the original interlocal	agreement which provi	des ongoing	pre-employment
	Contract		mendment increases the			
	Description:	the increased need for th	ese services.			
		Term of Contract:	01/18/2023 - 06/30/2024	Contract # 27148		
		DEPARTMENT OF	GREENSCAPES OF	FEDERAL	\$30,018	3
	902	EMPLOYMENT,	NEVADA, LLC			
		TRAINING &				
		REHABILITATION -				
82.		EMPLOYMENT				
		SECURITY - SPECIAL				
		FUND	 provide ongoing landscap	ing convices at the Ct I	ouis building	located in Lag
	Contract Description:	Vegas.	provide origoing landscap	ing services at the St. L	ouis building	located in Las
		Term of Contract:	02/12/2024 - 06/30/2025	Contract # 28757		
		DEPARTMENT OF	TIMBERIDGE	FEDERAL	\$27,500	)
		EMPLOYMENT,	PLUMBING AND		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		TRAINING &	HEATING, INC.			
	902	REHABILITATION -				
83.		EMPLOYMENT				
03.		SECURITY - SPECIAL				
		FUND				
	Contract		provide replacement of the	e sewage ejection syste	m located at	the East Third
	Description:	Street location in Carson		0 1 1 # 00770		
	•	rerm of Contract:	02/12/2024 - 06/30/2025		¢40.500	
		DEPARTMENT OF EMPLOYMENT,	OTIS ELEVATOR COMPANY	OTHER: COST ALLOCATED	\$19,500	)
		TRAINING &	COMPAINT	COSTALLOCATED		
	902	REHABILITATION -				
		EMPLOYMENT				
84.		SECURITY				
			nt to the original contract	which provides ongoing	maintenance	e, monitoring.
	Contract		amendment increases the			
		the increased need for th				
		Term of Contract:	06/20/2022 - 05/13/2026	Contract # 26026		

BOE #	DEPT#	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES			
		LICENSING BOARDS	COULSON &	FEE:	\$10,000	Professional			
	B003	AND COMMISSIONS -	ASSOCIATES, LTD	LICENSURE		Service			
85.	D003	AUDIOLOGY AND							
00.		SPEECH PATHOLOGY							
			provide financial audit ser	ovide financial audit services.					
		Term of Contract:	09/01/2023 - 06/30/2024	Contract # 28285					
	B005	LICENSING BOARDS	STRATEGIES 360, INC.	FEE:	\$72,000				
		AND COMMISSIONS -		LICENSURE					
86.		CHIROPRACTIC							
00.		PHYSICIANS							
		1 0 00							
	Description:	Term of Contract:	01/31/2024 - 06/30/2025	Contract # 28505					
		LICENSING BOARDS	LIPPARELLI LEGAL	FEE:	\$40,000	Professional			
87.		AND COMMISSIONS -	SERVICES PROF, LLC	LICENSURE		Service			
		MEDICAL EXAMINERS							
			provide ongoing hearings						
	Description:	Term of Contract:	02/08/2024 - 11/30/2025	Contract # 28528					

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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: 23152 Amendment 2

Number: Legal Entity

GARRETT GROUP REGULATORY

Date:

Name: CONSULTING, LLC

Agency Name: ATTORNEY GENERAL'S OFFICE Contractor Name: GARRETT GROUP REGULATORY

CONSULTING, LLC

**4028 OAKDALE FARM CIR** 

Agency Code: 030 Address: DBA GARRET GROUP CONSULTING

Appropriation Unit: **1038-10** 

Is budget authority Yes City/State/Zip EDMOND, OK 73013-7495

available?:

If "No" please explain: Not Applicable Contact/Phone: HEATHER GARRETT 405/205-9502

Vendor No.: T27042775

NV Business ID: NV20181314419

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 % Regulatory Assessments

Agency Reference #: 19957

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **06/09/2020** 

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 06/10/2024

Termination Date:

Contract term: 4 years and 2 days

4. Type of contract: **Contract** 

Contract description: Professional Service

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing professional services as an expert witness in the field of economics in analyzing revenue requirements for general rate applications of electric, natural gas and water utilities and perform other tasks. This amendment increases the maximum amount from \$436,875 to \$526,875 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:	\$165,000.00	\$165,000.00	\$165,000.00 Yes - Action
	a. Amendment 1:	\$271,875.00	\$271,875.00	\$271,875.00 Yes - Action
2.	Amount of current amendment (#2):	\$90,000.00	\$90,000.00	\$90,000.00 Yes - Info
3.	New maximum contract amount:	\$526,875.00		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory requirement to represent consumers' interests in matters before the Public Utilities Commission and any legislature, board or commission with jurisdiction over Nevada regulated public utilities.

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

Specialized expertise is required by our office to adequately protect the public interest.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

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

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

Garrett Group Consulting Group was chosen in preference to others for their specialized expertise, availability and reasonable rate.

d. Last bid date:

Anticipated re-bid date:

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

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

Yes If "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, the Garrett Group Consulting Inc is engaged under contract with the Bureau of Consumer Protection and the service has been verified as satisfactory.

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

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

Not Applicable

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

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
 01/04/2024 15:18:27 PM

 Division Approval
 jhoba2
 01/04/2024 15:18:33 PM

 Department Approval
 jhoba2
 01/04/2024 15:18:38 PM

 Contract Manager Approval
 pmcco1
 01/08/2024 12:21:08 PM

Contract #: 23152 Page 2 of 3

1

1

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2

**CONTRACT SUMMARY** 

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28748

Legal Entity

ANDREA MICHELLE MILLER-FINCH

Date:

Name:

Agency Name: ATTORNEY GENERAL'S OFFICE

Contractor Name: ANDREA MICHELLE MILLER-FINCH

Address:

8819 Brown Drive

Appropriation Unit: 1348-15

Is budget authority

City/State/Zip

Frankfort, IL 60423

available?:

Agency Code:

If "No" please explain: Not Applicable

030

Contact/Phone:

Andrea Miller Finch, DDS 775

Vendor No.:

T29047796

**NV Business ID:** 

NV20232921528

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 %

Yes

Fees

0.00 %

Federal Funds 0.00 %

Bonds

0.00 %

Highway Funds 0.00 % X Other funding 100.00 % TORT CLAIMS

2. Contract start date:

a. Effective upon Board of

No or b. other effective date

11/15/2023

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

Yes

If "Yes", please explain

We are requesting this contract to be retroactive to November 15, 2023, due to our office having a significant turnover for the past 9 months, with several of these months, hovering around a 50% vacancy rate in the Fiscal Division.

With these vacancies and the training of new staff, we did not have the resources available to accurately complete/process this contract sooner

3. Termination Date:

06/30/2026

Contract term:

2 years and 227 days

4. Type of contract:

Contract

Contract description:

**Expert Witness** 

5. Purpose of contract:

This is a new contract to provide ongoing expert witness assistance for a lawsuit Evan Ratcliff v. Carlos Caldarone, Case No. 2:21-cv-01155-CDS-BNW (Subject Lawsuit).

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$25,000.00

Other basis for payment: Please see contract for detailed rates

### II. JUSTIFICATION

7. What conditions require that this work be done?

The vendor will assist in providing a legal expert opinion by reviewing case files, preparing written reports, charts, and summaries as well as possibly providing testimony at depositions and trials.

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

No

Division?

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

Contract #: 28748 Page 1 of 2

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

- 18. Not Applicable
- 19. Agency Field Contract Monitor:

LEO HENDGES, Deputy Attorney Genreal Ph: (702) 486-3795

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** jhoba2 01/09/2024 14:39:23 PM **Division Approval** ihoba2 01/09/2024 14:39:27 PM Department Approval jhoba2 01/09/2024 14:39:31 PM Contract Manager Approval vmilazz1 02/04/2024 22:39:30 PM **Budget Analyst Approval** vmilazz1 02/04/2024 22:39:32 PM

#### AARON D. FORD Attorney General

#### CRAIG A. NEWBY First Assistant Attorney General

CHRISTINE JONES BRADY Second Assistant Attorney General



### STATE OF NEVADA OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street Carson City, Nevada 89701

#### TERESA BENITEZ-THOMPSON Chief of Staff

LESLIE NINO PIRO General Counsel

HEIDI PARRY STERN  $Solicitor\ General$ 

### **MEMORANDUM**

To: **Budd Milazzo** 

Governor's Finance Office

From: Tanya Lyons, Administrative Services Officer I

Date: January 17, 2024

Subject: Retroactive Approval for Contract #28748 ANDREA MILLER

FINCH, DDS

We are requesting this contract to be retroactive to November 10, 2023, due to our office having a significant turnover for the past (9) months, with several of these months hovering around a 50% vacancy rate in the Fiscal Division.

With these vacancies and the training of new staff, we did not have the resources available to accurately complete/process this contract sooner.

For Board Use Only 02/04/2024

Date:

CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28750

Legal Entity

STEPHEN BRENT GARETS

Name:

ATTORNEY GENERAL'S OFFICE Agency Name:

030

Contractor Name:

STEPHEN BRENT GARETS

Address:

dba GARETS CONSULTING, LLC

P.O. Box 2699

Appropriation Unit: 1348-15

Is budget authority Yes City/State/Zip

Corvallis, OR 97339

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Stephen Garets 541-760-2833

Vendor No.: **NV Business ID:**  T29047848 NV20232928742

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 Federal Funds

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

**Highway Funds** 0.00 % X Other funding

100.00 % TORT CLAIMS

2. Contract start date:

a. Effective upon Board of

No

or b. other effective date

11/10/2023

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

Yes

If "Yes", please explain

We are requesting this contract to be retroactive to November 10, 2023, due to our office having a significant turnover for the past (9) months, with several of these months hovering around a 50% vacancy rate in the Fiscal Division.

With these vacancies and the training of new staff, we did not have the resources available to accurately complete/process this contract sooner.

3. Termination Date:

11/01/2027

Contract term:

3 years and 356 days

4. Type of contract:

Contract

Contract description:

**Expert Witness** 

5. Purpose of contract:

This is a new contract to provide expert witness assistance for a lawsuit re: Gabriel Plank vs. Department of Motor Vehicles et al.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$33,200.00

Other basis for payment: Upon Invoice (\$425 per hour for case review, analysis, preparation, consultation, travel; \$600 per hour for motorcycle riding services; \$600 per hour for testimony in arbitration, deposition or trial)

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The vendor will assist in providing a legal expert opinion by reviewing case files, preparing written reports, charts, and summaries as well as possibly providing testimony at depositions and trials.

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

No

Division?

Contract #: 28750 Page 1 of 2 a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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 No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

LAURIE GINN, Deputy Attorney General Ph: (775) 684-4603

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** ihoba2 01/09/2024 14:40:13 PM **Division Approval** jhoba2 01/09/2024 14:40:17 PM Department Approval 01/09/2024 14:40:21 PM jhoba2 Contract Manager Approval tlyon1 01/17/2024 12:03:07 PM **Budget Analyst Approval** vmilazz1 02/04/2024 22:28:48 PM

### AARON D. FORD Attorney General

### CRAIG A. NEWBY First Assistant Attorney General

CHRISTINE JONES BRADY Second Assistant Attorney General



# STATE OF NEVADA OFFICE OF THE ATTORNEY GENERAL

100 North Carson Street Carson City, Nevada 89701

#### TERESA BENITEZ-THOMPSON Chief of Staff

LESLIE NINO PIRO General Counsel

HEIDI PARRY STERN Solicitor General

### **MEMORANDUM**

To: Budd Milazzo

Governor's Finance Office

From: Tanya Lyons, Administrative Services Officer I

**Date:** January 17, 2024

Subject: Retroactive Approval for Contract #28750 Garets Consulting LLC

We are requesting this contract to be retroactive to November 10, 2023, due to our office having a significant turnover for the past (9) months, with several of these months hovering around a 50% vacancy rate in the Fiscal Division.

With these vacancies and the training of new staff, we did not have the resources available to accurately complete/process this contract sooner.

For Board Use Only

Date:

02/13/2024

#### **CONTRACT SUMMARY**

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

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28897

Legal Entity

**ELECTION SYSTEMS & SOFTWARE** 

Name:

Agency Name: SECRETARY OF STATE'S OFFICE

Contractor Name: E

**ELECTION SYSTEMS & SOFTWARE** 

Address:

11208 JOHN GALT BLVD

Appropriation Unit: 1051-31

Is budget authority

Yes

City/State/Zip

**OMAHA, NE 68137-2320** 

available?:

Agency Code:

If "No" please explain: Not Applicable

040

Contact/Phone:

800/247-8683

Vendor No.:

T32012761

NV Business ID:

NV19971341563

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
Highway Funds

0.00 % 0.00 % Bonds

0.00 % 0.00 %

Agency Reference #: 040

2. Contract start date:

a. Effective upon Board of

No

or b. other effective date

Other funding

02/13/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

03/31/2024

Contract term:

46 days

4. Type of contract:

Contract

Contract description:

**Mock Election - ES&S** 

5. Purpose of contract:

This is a new contract to provide election project creation and on-site support for 2 counties for the 2024 Nevada Mock Election.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$19,712.50

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The state must run a mock election in order to implement the Voter Registration and Elections Management System (VREMS) pursuant to AB422 (2021). Two counties (Lander and Carson) are using voting equipment (tabulators, voting machines, voter verifiable paper audit trails, mail ballot readers, etc.) which have been purchased through Election Systems and Software. For each election, this vendor is required to develop and modify the election data to appropriately program the voting equipment ensuring all candidates, contests, and voter data is appropriately coded for the equipment.

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

The equipment used by the counties is proprietary and is only able to be coded by Election Systems and Software.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

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

Not Applicable

b. Soliciation Waiver: Not Applicable

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

The equipment used by the counties is proprietary and is only able to be coded by Election Systems and Software.

d. Last bid date:

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

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

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

Not Applicable

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

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

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

If "Yes", please explain

Not Applicable

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

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

The vendor has provided services to the Secretary of State's office and those services have been satisfactory.

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

If "Yes", please provide details of the litigation 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 02/13/2024 11:06:04 AM **Budget Account Approval** dbowma1 **Division Approval** dbowma1 02/13/2024 11:06:07 AM Department Approval dbowma1 02/13/2024 11:06:11 AM Contract Manager Approval adale 02/13/2024 11:07:34 AM **Budget Analyst Approval** 02/13/2024 14:49:34 PM mranki1

For Board Use Only 01/29/2024

Date:

#### CONTRACT SUMMARY

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

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28681

Legal Entity

Social Entrepreneurs, Inc.

Name:

TREASURER - COLLEGE SAVINGS Agency Name:

Contractor Name: Social Entrepreneurs, Inc.

Agency Code: 051

**TRUST** 

Address:

6548 South McCarran Blvd

Kelly Marschall 775.324.4567

Suite B

Appropriation Unit: 1092-21 Is budget authority

City/State/Zip

Reno, NV 89509

available?:

If "No" please explain: Not Applicable

Contact/Phone: 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.

General Funds Federal Funds

0.00 % 0.00 %

Yes

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Transfer from Endowment Account

Contract start date:

a. Effective upon Board of

No

or b. other effective date

01/29/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

06/30/2024 152 days

Contract term: 4. Type of contract:

Contract

Contract description:

Marketing

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 advertising, marketing and media services for the "Women + Money: The Financial Empowerment Summit" on April 11, 2024.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$84,905.78

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 State Treasurer's Office is contracting with a qualified marketing firm to assist with the coordination of the planning and management of the "Women + Money: The Financial Empowerment Summit."

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, as these services are outside the scope of the expertise of staff members.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

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

The Abbi Agency Social Entrepreneurs, Inc Estipona Group

b. Soliciation 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: Women and Money Financial Empowerment Summit.

No

d. Last bid date: 08/01/2023 Anticipated re-bid date: 07/30/2027

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

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

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:** 

Signature Date Approval Level User **Budget Account Approval** Ihoove1 01/05/2024 16:55:59 PM 01/05/2024 16:56:02 PM **Division Approval** Ihoove1 Department Approval Ihoove1 01/05/2024 16:56:06 PM Contract Manager Approval iveit 01/08/2024 12:29:23 PM **Budget Analyst Approval** stilley 01/29/2024 16:11:20 PM

For Board Use Only 02/07/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28650

Legal Entity #1 Services, LLC dba Vegas View

Name: Window Cleaning

Agency Name: ADMIN - STATE PUBLIC WORKS Contractor Name: DIVISION

#1 Services, LLC dba Vegas View

Date:

Window Cleaning

Agency Code: 082 Address: 2378 Rock Slide Cir.

Appropriation Unit: 1349-12

Is budget authority Yes City/State/Zip Las Vegas, NV 89115

available?:

If "No" please explain: Not Applicable Contact/Phone: JB Barbosa 702-965-2065

Vendor No.: T29047715 NV Business ID: NV20222605911

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

Contract start date:

a. Effective upon Board of No or b. other effective date 02/07/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 01/31/2025
Contract term: 359 days

4. Type of contract: Contract

Contract description: Window Cleaning

5. Purpose of contract:

This is a new contract to provide ongoing window cleaning services at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$97,220.00** Payment for services will be made at the rate of \$24,305.00 per quarterly

#### II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide ongoing window cleaning services to remove dirt and grime in order to prolong the life of the windows in addition to keeping the buildings appearance clean and neat.

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 and expertise to facilitate this service.

9. Were quotes or proposals solicited? YesWas the solicitation (RFP) done by the PurchasingNo

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

G&S Window Cleaning Vegas VIP Cleaning Vegas View Window Cleaningvvv Enzi's Cleaning Service Real Window Cleaning

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Vegas View Window Cleaning 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?

No If "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:

Ryan Reigle, Facility Supervisor III Ph: 702-486-4305

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 slon5
 12/27/2023 09:16:23 AM

 Division Approval
 nmann
 12/27/2023 16:46:29 PM

 Department Approval
 ssands
 01/30/2024 15:03:57 PM

 Contract Manager Approval
 ssands
 01/30/2024 15:04:00 PM

 Budget Analyst Approval
 klay0
 02/07/2024 09:23:32 AM

For Board Use Only 01/18/2024

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: 28542

Legal Entity

BARRY, ERIC DBA EB HOMES

Name:

Agency Name: ADMIN - STATE PUBLIC WORKS

Contractor Name:

BARRY, ERIC DBA EB HOMES

DIVISION

082

Address: PO BOX 3687

Appropriation Unit: 1349-14

Is budget authority

City/State/Zip

CARSON CITY, NV 89702

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Eric Barry 775-450-1712

Vendor No.:

T29047864

NV Business ID:

2024-2025

NV20101834262

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds 0.00 % 0.00 %

Yes

Fees Bonds 0.00 % 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

No or b. other effective date

01/18/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

12/01/2024

Contract term:

318 days

4. Type of contract:

Contract

Contract description:

**ADA Ramp at Laxalt** 

5. Purpose of contract:

This is a new contract to provide an ADA access ramp at the Laxalt building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,700.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

CAT14-FY24-022 project for ADA ramp compliance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Building and Grounds does not have the manpower or equipment needed to facilitate.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This is a CAT 14-FY24-022 under Public Works

d. Last bid date: Anticipated re-bid date:

Contract #: 28542 Page 1 of 2

10. a. Does the contract contain any IT components?b. Is the contract part of an IT investment project over \$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

- 18. Not Applicable
- 19. Agency Field Contract Monitor:

Michael Johnson, Facility Supervisor Ph: 775-684-1816

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 slon5
 11/27/2023 09:47:21 AM

 Division Approval
 jkidd
 11/27/2023 11:30:47 AM

 Department Approval
 ssands
 12/26/2023 13:32:11 PM

 Contract Manager Approval
 tledezma
 01/04/2024 14:34:43 PM

 Budget Analyst Approval
 klay0
 01/18/2024 08:24:38 AM

For Board Use Only 01/30/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28636

Legal Entity BERRY ENTERPRISES, INC. DBA

Name: SIERRA ELECTRONICS

**ADMIN - STATE PUBLIC WORKS** Contractor Name: BERRY ENTERPRISES, INC. DBA Agency Name: DIVISION

SIERRA ELECTRONICS

690 GLENDALE, STE, 9B Agency Code: 082 Address:

Appropriation Unit: 1349-14

Is budget authority Yes City/State/Zip **SPARKS, NV 89431** 

available?:

If "No" please explain: Not Applicable Contact/Phone: Matt Kent 775-359-1121

> Vendor No.: PUR0000741 **NV Business ID:** NV19801013254

2024-2025 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 % Federal Funds 0.00 % **Bonds** 0.00 %

Highway Funds 0.00 % X Other funding 100.00 % Buildings and Grounds Rent Income

Contract start date:

a. Effective upon Board of No or b. other effective date 01/30/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/30/2024 Contract term: 305 days

Contract 4. Type of contract:

**Install Cameras** Contract description:

5. Purpose of contract:

This is a new contract to provide the installation and replacement of the security camera system at the Nevada State Capitol. CAT14-FY24-009.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$67,665.27

#### JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide installation and replacement of the camera systems in order to provide an elevated level of security camera coverage and recording capabilities at the Nevada State Capitol. CAT14-FY24-009.

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 No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Surveillance Systems (SSI)

Rex Moore Sierra Electronics

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Sierra Electronics provided the lowest bid.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes agency has been verified as satisfactory:

Sierra Electronics has been a vendor to various agencies since 1999 and the agency is satisfied with their work.

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Michael Johnson, Facility Manager Ph: 775-684-1800

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 12/13/2023 10:40:53 AM **Budget Account Approval** slon5 **Division Approval** nmann 12/27/2023 15:09:30 PM Department Approval ssands 01/04/2024 15:12:03 PM Contract Manager Approval tledezma 01/04/2024 15:47:48 PM **Budget Analyst Approval** 01/30/2024 16:32:48 PM klay0

For Board Use Only 02/02/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28639

Legal Entity

HIGH QUALITY CONCEPTS, INC. DBA

Date:

Name:

Agency Name: ADMIN - STATE PUBLIC WORKS

Contractor Name:

**BEST JANITORIAL SERVICES OF NV** 

DIVISION
Agency Code: 082

Address:

2545 CHANDLER AVE., SUITE 7

Appropriation Unit: 1349-12

Is budget authority

Yes

City/State/Zip

LAS VEGAS, NV 89120

available?:

If "No" please explain: Not Applicable

Contact/Phone:

RAFAEL ROMANO 702-736-4785

Vendor No.:

T29044601

NV Business ID:

2024

NV20011238130

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds 0.00 % 0.00 % Fees Bonds 0.00 % 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

**No** or b. other effective date

02/02/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

05/01/2024

Contract term:

88 days

4. Type of contract:

Contract

Contract description:

**Custodial Services** 

5. Purpose of contract:

This is a new contract to provide custodial services for the Washoe Building at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$41,265.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Provide custodial services for our newly acquired building for 4.5-month time. We were give approval by the Administrator of State Purchasing to complete and agency level RFP. This is a short term contract to provide janitorial coverage while completing the RFP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower to facilitate for this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

High Quality Concepts Xcel Maintenance AJ Services Valley Wide Janitorial

Contract #: 28639 Page 1 of 2

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

High Quality Concepts Inc. provided the lowest quote.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

High Quality Concepts Inc. has been a vendor to various agencies since 2022 and the agency is satisfied with their work.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

#### Doing business as

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Ryan Reigle, Facility Supervisor III Ph: 702-486-4305

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 slon5
 12/14/2023 11:06:44 AM

 Division Approval
 nmann
 12/27/2023 12:47:41 PM

 Department Approval
 ssands
 01/04/2024 15:52:38 PM

 Contract Manager Approval
 tledezma
 01/04/2024 16:02:17 PM

 Budget Analyst Approval
 klay0
 02/02/2024 14:07:02 PM

For Board Use Only 01/31/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28638

Legal Entity

ALLEN, BRET DBA

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name:

**NEWT CONCRETE CONSTRUCTION** 

Date:

Agency Code:

DIVISION

Address:

PO BOX 20104

Appropriation Unit: 1349-14

082

Yes

City/State/Zip

**CARSON CITY, NV 89721-0104** 

Is budget authority available?:

If "No" please explain: Not Applicable

Bret Allen 775/851-2466

Contact/Phone: Vendor No.:

T29035167

**NV Business ID:** 

NV20101212689

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 Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Buildings and Grounds Rent Income

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable 3. Termination Date:

11/30/2024

Contract term:

304 days

4. Type of contract:

Contract

Contract description:

Replace Concrete

5. Purpose of contract:

This is a new contract to provide the replacement of broken concrete walkways, and the removal of tree roots at the Stewart Facility, as well as the installation of catch basin piping, and the removal and replacement of the staircase at the Governor's Mansion. CAT14-FY24-020.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$52,899.00

#### JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide the replacement of broken concrete walkways, remove tree roots, install catch basin piping as well as the removal and replacement of the staircase. CAT14-FY24-020.

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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

J&M Construction Madole Construction **Newt Concrete** 

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Newt Concrete Construction provided the lowest bid.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Newt Concrete Construction has been a vendor to various agencies since 2014 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 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:

#### doing business as

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

**Budget Analyst Approval** 

Phil Nemanic, Facility Supervisor II Ph: 775-691-1952

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date
Budget Account Approval slon5 12/27/2023 15:45:38 PM
Division Approval nmann 12/27/2023 15:50:25 PM
Department Approval ssands 01/04/2024 15:18:44 PM
Contract Manager Approval tledezma 01/04/2024 15:47:37 PM

klay0

01/31/2024 15:10:56 PM

For Board Use Only 01/30/2024

#### **CONTRACT SUMMARY**

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28643

Legal Entity

RICK'S FLOOR COVERING, INC.

Date:

Name:

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Contractor Name:

RICK'S FLOOR COVERING, INC.

Agency Code: 082

Address:

3640 SOUTH CURRY ST.

Appropriation Unit: 1349-14

Is budget authority

Yes

City/State/Zip

**CARSON CITY, NV 89703** 

available?:

If "No" please explain: Not Applicable

Contact/Phone:

RICK CORELLI 775-885-2355

Vendor No.:

T32011411

NV Business ID:

2024

NV20001249736

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds 0.00 % 0.00 % Fees Bonds 0.00 % 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

**No** or b. other effective date

01/30/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

03/01/2024

3. Termination Date: Contract term:

31 days

4. Type of contract:

Contract

Contract description:

Floor Replacement

5. Purpose of contract:

This is a new contract to provide the removal and replacement of the carpet on the 2nd floor of the Nevada State Capitol Building. CAT14-FY23-025.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$34,750.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide installation and replacement of the 2nd floor carpet in the Nevada State Capitol building. CAT14-FY23-025.

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 manpower needed to complete this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Sierra Floor Covering Rick's Floor Covering Inc Rogers Carpet One

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Rick's Floor Covering Inc provided the lowest bid.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Rick's Floor Covering Inc has been a vendor to various agencies since 2022 and the agency is satisfied with their work.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Michael Johnson, Facility Manager Ph: 775-690-8208

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 12/14/2023 14:53:59 PM **Budget Account Approval** slon5 **Division Approval** nmann 12/14/2023 15:24:03 PM Department Approval ssands 12/26/2023 13:21:11 PM Contract Manager Approval tledezma 01/04/2024 15:54:24 PM **Budget Analyst Approval** 01/30/2024 16:44:57 PM klay0

For Board Use Only 01/31/2024

12

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28610

Legal Entity

Guzman, Jose dba

**ADMIN - STATE PUBLIC WORKS** 

Name:

**Right On Time Carpet & Upholstery** Contractor Name:

Agency Name: DIVISION

082

Address: **4737 Beckworth Court** 

Appropriation Unit: 1349-12

Is budget authority

Yes

City/State/Zip

Carson City, NV 89706

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Jose Guzman 775-342-5734

Vendor No.:

2024-2028

T29047983

**NV Business ID:** 

NV20151246697

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Buildings and Grounds Rent Income

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

10/31/2027

Contract term:

3 years and 273 days

4. Type of contract:

Contract

Contract description:

Carpet Cleaning

5. Purpose of contract:

This is a new contract to provide ongoing carpet cleaning for various state-owned properties in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$50.000.00

Other basis for payment: FY24 \$10,000; FY25 \$15,000; FY26 \$15,000 & FY27 \$10,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Contract needed for carpet cleaning on a continual basis to manage 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 to complete this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Bruce's Varpet Cleaning** Right On Time Carpet CJ's Carpet Cleaning

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

Contract #: 28610 Page 1 of 2 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: 11/13/2023 Anticipated re-bid date: 11/13/2027

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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, Buildings and Grounds since 2016, 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 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:

#### doing business as

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:** 

User Signature Date Approval Level **Budget Account Approval** 12/06/2023 16:27:40 PM slon5 Division Approval nmann 12/12/2023 14:21:48 PM Department Approval ssands 12/13/2023 13:54:42 PM Contract Manager Approval 12/13/2023 13:54:45 PM ssands **Budget Analyst Approval** 01/31/2024 10:45:12 AM klay0

For Board Use Only 01/31/2024

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: 28603

Legal Entity TELEDATA CONTRACTORS, INC. DBA

Name: TELEDATA TECHNOLOGIES

Agency Name: ADMIN - STATE PUBLIC WORKS Contractor Name: TELEDATA CONTRACTORS, INC.

DIVISION DBA TELEDATA TECHNOLOGIES

OR Address: 7060 W. WARM SPRINGS RD.

Agency Code: 082 Address: 7060 W. WARM SPRINGS

Appropriation Unit: 1349-12 STE. 190

Is budget authority

Yes

City/State/Zip

LAS VEGAS, NV 89113

available?:

If "No" please explain: Not Applicable Contact/Phone: MICHAEL SWANSON 702/933-7600

Vendor No.: T29048057

NV Business ID: NV20021250516

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 No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 12/05/2027

Contract term: 3 years and 309 days

4. Type of contract: Contract
Contract description: Audio-Visual

5. Purpose of contract:

This is a new contract to provide ongoing service, repair, replacement, modification and new installation of audiovisual equipment to various state-owned buildings in southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$40,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide ongoing audio-visual equipment services to various state-owned buildings/properties throughout Southern Nevada.

No

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 expertise to support this service.

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

AVSP Consulting Inc Teledata Technologies CCS Presentation Systems

b. Soliciation 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:

Teledata Technologies has a been a vendor to various agencies since 2003 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:

MARTIN FISHER, FACILITY MANAGER Ph: 702-486-4099

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 12/08/2023 14:21:49 PM **Budget Account Approval** slon5 **Division Approval** nmann 12/12/2023 11:39:23 AM Department Approval ssands 12/15/2023 07:23:44 AM Contract Manager Approval tledezma 01/09/2024 08:47:03 AM **Budget Analyst Approval** 01/31/2024 16:39:08 PM klay0

For Board Use Only 01/23/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28524

Legal Entity

Xcel Maintenance

Name:

Address:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: Xcel Maintenance

DIVISION

7260 W. Azure Drive, PMB 108

Agency Code: 082

Appropriation Unit: 1349-12 Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89130

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Kathia Winchell 702-341-9235

Vendor No.: NV Business ID: T81103343

2024

NV20021426879

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds

0.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

100.00 % Buildings and Grounds Rent Income

Contract start date:

a. Effective upon Board of

No or b. other effective date 11/01/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

It was necessary for services to begin prior to the execution of the contract due to agencies moving into the building.

3. Termination Date:

04/30/2024 181 days

Contract term:

Contract

4. Type of contract: Contract description:

Janitorial Coverage

5. Purpose of contract:

This is a new contract to provide janitorial services for the Eureka Building located at the McCarran Center in Las Vegas.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$46,440.00

#### 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 (6-months) 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

AJ Services Valley Wide Janitorial Xcel Maintenance Best Janitoiral

b. Soliciation 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?

Nο

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Xcel has been contracted with Buildings and Grounds since 2002. Agency is satisfied with the work.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Ryan Reigle, Facility Supervisor III Ph: 702-486-4305

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 slon5
 12/06/2023 16:17:08 PM

 Division Approval
 nmann
 12/12/2023 11:46:07 AM

 Department Approval
 ssands
 12/27/2023 07:27:15 AM

 Contract Manager Approval
 ssands
 12/27/2023 11:25:40 AM

 Budget Analyst Approval
 klay0
 01/23/2024 08:48:20 AM

Joe Lombardo Governor

Carson City Office:

515 East Musser Street, Suite 102

Carson City, Nevada 89701

Buildings & Grounds Section

Phone: (775) 684-4141

Phone: (775) 684-1800



# STATE OF NEVADA DEPARTMENT OF ADMINISTRATION PUBLIC WORKS DIVISION

Jack Robb Director

Matthew Tuma Deputy Director

Kent A. LeFevre

Administrator

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

SUBJECT: Retroactive Contract for Janitorial Services - McCarran Buildings

The State Public Works Division, Buildings and Grounds (B&G) Section is requesting the contract with Xcel Maintenance, be retroactive to November 1, 2023, to provide janitorial services in the Eureka Building. 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.

For Board Use Only
Date: 02/02/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

Agency Code:

1. Contract Number: 28075 Amendment 1

Number:

Address:

Legal Entity ARRINGTON WATKINS ARCHITECTS,

Name: Ll

Agency Name: ADMIN - STATE PUBLIC WORKS Contractor Name: ARRINGTON WATKINS ARCHITECTS,

DIVISION

600 S. LAS VEGAS BLVD.,

Appropriation Unit: 1550-33 STE. 6C

appropriation offic. 1330-33

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89101

available?:

If "No" please explain: Not Applicable

Contact/Phone: 725-867-9980

Vendor No.: T29047494

NV Business ID: NV20041116632

Info Accum ¢

Action Accum ¢

\ aondo

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 #: 115639

2. Contract start date:

a. Effective upon Board of No or b. other effective date 09/12/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

082

If "Yes", please explain

Not Applicable

.....

06/30/2027

3. Previously Approved Termination Date:

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 that provides professional architectural/engineering services for the Southern Desert Correctional Center - Door Replacement, Locks, and Security Glazing CIP Project: CIP Project No. 23-M04; SPWD Contract No. 115639. This amendment increases the maximum amount from \$1,412,521 to \$1,489,531 due to additional design and bid documents needed.

#### 6. CONTRACT AMENDMENT

		παπο ψ	iiiio Accuiii φ	Action Accorn 9	Agenda
1.	The max amount of the original contract:	\$1,412,521.00	\$1,412,521.00	\$1,412,521.00	Yes - Action
2.	Amount of current amendment (#1):	\$77,010.00	\$77,010.00	\$77,010.00	Yes - Info
3.	New maximum contract amount:	\$1,489,531.00			

Trans ¢

#### II. JUSTIFICATION

7. What conditions require that this work be done?

2023 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 (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. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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?

If "Yes", please provide details of the litigation 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?

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** nmann 01/16/2024 10:29:35 AM 01/16/2024 10:29:43 AM **Division Approval** nmann Department Approval 01/16/2024 10:29:50 AM nmann Contract Manager Approval **lwildes** 01/16/2024 11:42:04 AM **Budget Analyst Approval** klay0 02/02/2024 14:38:15 PM

For Board Use Only 01/29/2024

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: 25290 Amendment 2

Number: Legal Entity

CORE WEST, INC.

Name:

Agency Name: ADMIN - STATE PUBLIC WORKS Contractor Name: CORE WEST, INC.

DIVISION

Agency Code: 082 Address: 7150 CASCADE VALLEY CT.

Appropriation Unit: 1558-16

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89128-0455

available?:

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? 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
 100.00 %
 Other funding
 0.00 %

Agency Reference #: 114581

2. Contract start date:

Χ

a. Effective upon Board of **No** or b. other effective date **02/08/2022** 

Examiner's approval?

Anticipated BOE meeting date 12/2023

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 06/30/2025

Termination Date:

Contract term: 3 years and 142 days

4. Type of contract: **Contract** 

Contract description: OWNER-CMAR

5. Purpose of contract:

This is the second amendment to the original contract which provides Owner Construction Manager at Risk preconstruction services for the Department of Motor Vehicles - Silverado Ranch Facility Advanced Planning CIP project: CIP Project No. 21-P06; SPWD Contract No. 114581. This amendment increases the maximum amount from \$205,912 to \$220,066 due to needed potholing at six locations.

#### 6. CONTRACT AMENDMENT

		Trans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$164,000.00	\$164,000.00	\$164,000.00	Yes - Action
	a. Amendment 1:	\$41,912.00	\$41,912.00	\$41,912.00	Yes - Info
2.	Amount of current amendment (#2):	\$14,154.00	\$14,154.00	\$56,066.00	Yes - Info
3.	New maximum contract amount:	\$220,066.00			

#### 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 Owner-CMAR 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 No

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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
 01/16/2024 08:41:06 AM

 Division Approval
 nmann
 01/16/2024 08:41:18 AM

 Department Approval
 nmann
 01/18/2024 15:44:04 PM

 Contract Manager Approval
 lwildes
 01/18/2024 15:45:33 PM

For Board Use Only 01/18/2024

17

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: 25018 Amendment 5

Number:

Legal Entity TATE SNYDER KIMSEY ARCHITECTS,

Name: LTD. DBA TSK

Agency Name: ADMIN - STATE PUBLIC WORKS

DIVISION

Contractor Name: TATE SNYDER KIMSEY ARCHITECTS,

LTD. DBA TSK

Agency Code: 082 Address: 314 S. WATER ST.

Appropriation Unit: 1558-16

Is budget authority Yes City/State/Zip HENDERSON, NV 89015-7311

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-456-3000

Vendor No.: T80883470 NV Business ID: NV20212004081

To what State Fiscal Year(s) will the contract be charged? 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
 100.00 %
 Other funding
 0.00 %

Agency Reference #: 114488

2. Contract start date:

a. Effective upon Board of No or b. other effective date 11/09/2021

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

Contract term:

3. Previously Approved

06/30/2025

Termination Date:

3 years and 233 days

4. Type of contract: Contract
Contract description: Arch/Eng

5. Purpose of contract:

This is the fifth amendment to the original contract which provides professional architectural/engineering services for the Department of Motor Vehicles Silverado Ranch - Advance Planning CIP Project: CIP Project No. 21-P06; SPWD Contract No. 114488. This amendment increases the maximum amount from \$4,126,423 to \$4,139,923 due to additional design services needed to complete the air handling screens.

# 6. CONTRACT AMENDMENT

		Trans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$3,898,300.00	\$3,898,300.00	\$3,898,300.00	Yes - Action
	a. Amendment 1:	\$53,000.00	\$53,000.00	\$53,000.00	Yes - Info
	b. Amendment 2:	\$17,500.00	\$17,500.00	\$70,500.00	Yes - Info
	c. Amendment 3:	\$97,000.00	\$97,000.00	\$167,500.00	Yes - Action
	d. Amendment 4:	\$60,623.00	\$60,623.00	\$60,623.00	Yes - Info
2.	Amount of current amendment (#5):	\$13,500.00	\$13,500.00	\$74,123.00	Yes - Info
3.	New maximum contract	\$4,139,923.00			

#### II. JUSTIFICATION

amount:

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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 11:37:28 AM
Division Approval nmann 12/14/2023 11:37:39 AM

Contract #: 25018 Page 2 of 3

17

Department Approval nmann 12/14/2023 11:37:51 AM
Contract Manager Approval lwildes 12/14/2023 12:15:36 PM
Budget Analyst Approval klay0 01/18/2024 14:17:14 PM

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18

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: 28522

Legal Entity GEORGE M ROGERS CHARTERED

Name: DBA GEORGE M ROGERS

ARCHITECT

Agency Name: ADMIN - STATE PUBLIC WORKS Contractor Name: GEO

DIVISION

r Name: GEORGE M ROGERS CHARTERED

DBA GEORGE M ROGERS

**ARCHITECT** 

Agency Code: 082 Address: 6325 S. JONES BLVD., STE. 100

Appropriation Unit: 1567-37

Is budget authority
Yes
City/State/Zip
LAS VEGAS, NV 89118-3332

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-894-5027

Vendor No.: T32009325

NV Business ID: NV19971103296

To what State Fiscal Year(s) will the contract be charged? 2024-2027

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

 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 #: 116092

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **01/18/2024** 

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027** 

Contract term: 3 years and 163 days

4. Type of contract: Contract
Contract description: Arch / Eng

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Southern Nevada Veterans Memorial Cemetery - Chapel Remodel CIP project to include schematic design, design development, construction drawings, permitting, bidding assistance, and construction administration services for the replacement of windows, door hardware, carpet, ceiling tile, bollards, lights, the patching and repainting of interior and exterior walls, and the removal of decorative column bases and the operable partition in the center of the main chapel space: CIP Project No. 23-M15; SPWD Contract No. 116092.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$52,300.00 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?

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain No

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes 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?

If "Yes", please provide details of the litigation 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?

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

19. Agency Field Contract Monitor:

Phil De La Mare, Project Manager Ph: 775-684-4141

20. Contract Status:

**Contract Approvals:** 

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/14/2023 11:57:05 AM
Division Approval	nmann	12/14/2023 11:57:07 AM
Department Approval	nmann	12/14/2023 11:57:10 AM
Contract Manager Approval	lwildes	12/14/2023 12:16:58 PM
Budget Analyst Approval	klay0	01/18/2024 13:34:19 PM

For Board Use Only 02/01/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28597

Legal Entity **CURTAIN WALL DESIGN &** 

Name: CONSULTING, INC.

**ADMIN - STATE PUBLIC WORKS** Contractor Name: **CURTAIN WALL DESIGN &** Agency Name: DIVISION

CONSULTING, INC.

Agency Code: 082 Address: 2400 S. CIMARRON RD., STE, 125

Appropriation Unit: 1585-73

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89117-7936

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-222-9349 Vendor No.: T29032419

> NV20051436120 **NV Business ID:**

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 100.00 % Fees 0.00 % Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116104

Contract start date:

a. Effective upon Board of No or b. other effective date 02/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

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 Pioche Conservation Camp - Roofing Replacement, Multipurpose Shop and Office Buildings CIP project to include consulting services for the installation of a single ply membrane roofing system on the Nevada Division of Forestry's Multipurpose Shop and Office Buildings: CIP Project No. 23-S01-12; SPWD Contract No. 116104.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$28,000.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** 12/14/2023 15:35:53 PM nmann **Division Approval** nmann 12/14/2023 15:35:56 PM Department Approval 12/14/2023 15:35:58 PM nmann Contract Manager Approval **lwildes** 12/15/2023 08:12:15 AM **Budget Analyst Approval** klay0 02/01/2024 14:47:14 PM

For Board Use Only 02/01/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28601

Legal Entity **CURTAIN WALL DESIGN &** 

Name: CONSULTING, INC.

**ADMIN - STATE PUBLIC WORKS** Contractor Name: **CURTAIN WALL DESIGN &** Agency Name: DIVISION

CONSULTING, INC.

Agency Code: 082 Address: 2400 S. CIMARRON RD., STE, 125

Appropriation Unit: 1585-73

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89117-7936

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-222-9349 Vendor No.: T29032419

**NV Business ID:** NV20051436120

2024-2027 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 100.00 % Fees Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116136

Contract start date:

a. Effective upon Board of No or b. other effective date 02/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

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 Southern Nevada Child and Adolescent Services - Roofing Replacement, Buildings 13, 14, and 15 CIP Project to include consulting services for the installation of a roofing system: CIP Project No. 23-S01-6; SWPD Contract No. 116136.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$19,500.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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 No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

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 15:53:20 PM **Division Approval** 12/14/2023 15:53:23 PM nmann **Department Approval** nmann 12/14/2023 15:53:25 PM Contract Manager Approval **lwildes** 12/15/2023 08:11:34 AM **Budget Analyst Approval** klay0 02/01/2024 14:38:03 PM

For Board Use Only 02/01/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28618

Legal Entity **CURTAIN WALL DESIGN &** 

Name: CONSULTING, INC.

**ADMIN - STATE PUBLIC WORKS** Contractor Name: **CURTAIN WALL DESIGN &** Agency Name: DIVISION

CONSULTING, INC.

Agency Code: 082 Address: 2400 S. CIMARRON RD., STE, 125

Appropriation Unit: 1585-75

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89117-7936

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-222-9349 Vendor No.: T29032419

> **NV Business ID:** NV20051436120

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 100.00 % Other funding 0.00 %

Agency Reference #: 116153

Contract start date:

a. Effective upon Board of No or b. other effective date 02/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

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 Motor Vehicles, Donovan - Roofing Replacement, Express Office Building CIP Project to include roofing consulting services for the design and construction of a decor style single ply membrane roofing system over the existing metal roof: CIP Project No. 23-S01h; SPWD Contract No. 116153.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$10,700.00 Other basis for payment: Monthly progress payments based on services provided

# II. JUSTIFICATION

7. What conditions require that this work be done?

2023 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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?

contain any ri components?

b. Is the contract part of an IT investment project over

No No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** 12/14/2023 16:26:56 PM nmann **Division Approval** nmann 12/14/2023 16:26:59 PM Department Approval 12/14/2023 16:27:01 PM nmann Contract Manager Approval **lwildes** 12/15/2023 08:09:57 AM **Budget Analyst Approval** klay0 02/01/2024 15:07:38 PM

For Board Use Only 02/01/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28617

Legal Entity **CURTAIN WALL DESIGN &** 

Name: CONSULTING, INC.

**ADMIN - STATE PUBLIC WORKS** Contractor Name: **CURTAIN WALL DESIGN &** Agency Name: DIVISION

CONSULTING, INC.

Agency Code: 082 Address: 2400 S. CIMARRON RD., STE, 125

Appropriation Unit: 1585-73

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89117-7936

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-222-9349 Vendor No.: T29032419

> **NV Business ID:** NV20051436120

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.

0.00 % General Funds 100.00 % Fees Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116139

Contract start date:

a. Effective upon Board of No or b. other effective date 02/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

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 Jean Conservation Camp -Roofing Replacement, Industrial and Storage Buildings CIP project to include building envelope consulting services for the installation of a roofing system on the Multipurpose and Visitation Buildings, as well as on the Nevada Division of Forestry's Shop and Office Buildings: CIP Project No. 23-S01-10; SPWD Contract No. 116139.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$15,900.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

Andy Lutz, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** 12/14/2023 16:20:31 PM nmann **Division Approval** nmann 12/14/2023 16:20:34 PM Department Approval 12/14/2023 16:20:36 PM nmann Contract Manager Approval **lwildes** 12/15/2023 08:10:49 AM **Budget Analyst Approval** klay0 02/01/2024 10:32:03 AM

For Board Use Only Date: 01/19/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28404

Legal Entity HARRIS CONSULTING ENGINEERS,

Name:

**ADMIN - STATE PUBLIC WORKS** Contractor Name: Agency Name: HARRIS CONSULTING ENGINEERS, DIVISION

Agency Code: 082 Address: 680 PILOT RD., STE. A

Appropriation Unit: 1585-78

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89119-9015

available?:

If "No" please explain: Not Applicable Contact/Phone: 702-269-1575

Vendor No.: T27003439 **NV Business ID:** NV20011085889

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 42.00 % Fees 0.00 % X Federal Funds 58.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116003

Contract start date:

a. Effective upon Board of No or b. other effective date 01/19/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

Contract term: 3 years and 162 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 Army National Guard - Fire Alarm Replacement, Henderson Armory CIP Project to include construction documents, permitting services, and bid assistance for the replacement of the fire alarm system: CIP Project No. 23-S03g-1; SPWD Contract No. 116003.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$29,500.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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** 12/13/2023 15:20:50 PM nmann **Division Approval** nmann 12/13/2023 15:20:53 PM Department Approval 12/13/2023 15:20:55 PM nmann Contract Manager Approval **lwildes** 12/14/2023 07:53:56 AM **Budget Analyst Approval** klay0 01/19/2024 09:41:23 AM

For Board Use Only 01/19/2024

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: 28415

Legal Entity

JP ENGINEERING, LLC

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: JP ENGINEERING, LLC

Agency Code:

DIVISION

082

Address:

10597 DOUBLE R BLVD., STE, 1

Appropriation Unit: 1585-78

Is budget authority

City/State/Zip

available?:

RENO, NV 89521-8938

If "No" please explain: Not Applicable

Contact/Phone:

775-852-2337

Vendor No.:

T29038896

**NV Business ID:** 

NV20051447455

To what State Fiscal Year(s) will the contract be charged?

Yes

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 X Federal Funds

42.00 % 58.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 116037

Contract start date:

Effective upon Board of

No

or b. other effective date

01/19/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027

3. Termination Date: Contract term:

3 years and 162 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 Army National Guard, Washoe County Training Center - Fire Suppression System CIP Project to include schematic design with site investigation, design development, construction documents, and construction administration services for the installation of a fire suppression system at the Washoe County Armory: CIP Project No. 23-S03g-3; SPWD Contract No. 116037.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$95,000.00 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?

Nο

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes 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?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

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 15:59:11 PM
Division Approval	nmann	12/13/2023 15:59:13 PM
Department Approval	nmann	12/13/2023 15:59:15 PM
Contract Manager Approval	lwildes	12/14/2023 07:58:45 AM
Budget Analyst Approval	klay0	01/19/2024 12:01:58 PM

For Board Use Only 01/19/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28419

Legal Entity

PAUL CAVIN ARCHITECT, LLC

Date:

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name: DIVISION

Contractor Name: PAUL CAVIN ARCHITECT, LLC

Agency Code: 082

Address:

1575 DELUCCHI LN., STE. 120

Appropriation Unit: 1585-73

Is budget authority

Yes

City/State/Zip

RENO, NV 89502-6581

available?:

If "No" please explain: Not Applicable

775-842-0261

Contact/Phone: 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.

General Funds Federal Funds

100.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 116026

Contract start date:

a. Effective upon Board of

No

or b. other effective date

01/19/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027

3. Termination Date: Contract term:

3 years and 162 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 Correctional Center, Central Plant and Operations Building - Roofing Replacement CIP Project to include drawings, cost estimating, bidding assistance, and construction administration services for the installation of a new roofing system: CIP Project No. 23-S01-7; SPWD Contract No. 116026.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$40,000.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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?

b. Is the contract part of an IT investment project over

No No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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** 12/13/2023 16:31:58 PM nmann **Division Approval** nmann 12/13/2023 16:32:02 PM Department Approval 12/13/2023 16:32:04 PM nmann Contract Manager Approval **lwildes** 12/14/2023 08:00:04 AM **Budget Analyst Approval** klay0 01/19/2024 10:54:09 AM

For Board Use Only 01/26/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28514

Legal Entity

TANEY ENGINEERING, LLC

Date:

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: TANEY ENGINEERING, LLC

Agency Code: 082

DIVISION

Address:

6030 S. JONES BLVD., STE. 100

Appropriation Unit: 1591-48

Is budget authority

Yes

City/State/Zip

LAS VEGAS, NV 89118-2659

available?:

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.

General Funds Federal Funds

0.00 %

Fees **Bonds** 

0.00 % 100.00 %

Highway Funds

0.00 % 0.00 %

Other funding

0.00 %

Agency Reference #: 116006

Contract start date:

Effective upon Board of

No or b. other effective date

X

01/26/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027

3. Termination Date: Contract term:

3 years and 155 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 Valley of Fire State Park -Reconfigure West Entrance CIP Project to include civil plans, electrical engineering design, bidding services, construction administration, record drawings, and aerial topographic survey for the design and construction of a reconfigured west entrance to incorporate additional entrance lanes that can utilize self-pay stations, as well as an upgraded fee booth and shade structure over the vehicular check-in lanes at the existing Entry Contact Station: CIP Project No. 23-C23; SPWD Contract No. 116006.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$79,800.00 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

Contract #: 28514 Page 1 of 2 a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Crosby, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	12/14/2023 11:18:47 AM
Division Approval	nmann	12/14/2023 11:18:50 AM
Department Approval	nmann	12/14/2023 11:18:52 AM
Contract Manager Approval	lwildes	12/14/2023 14:36:46 PM
Budget Analyst Approval	klay0	01/26/2024 16:20:48 PM

For Board Use Only 01/31/2024

27

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: 28540

Legal Entity SAAREM CONSULTING ENGINEERS,

Name:

**ADMIN - STATE PUBLIC WORKS** Contractor Name: SAAREM CONSULTING ENGINEERS, Agency Name: DIVISION

2188 ALFRED WAY Agency Code: 082 Address:

Appropriation Unit: 1592-46

Is budget authority Yes City/State/Zip **CARSON CITY, NV 89703-7128** 

available?:

If "No" please explain: Not Applicable Contact/Phone: 775-772-9846

Vendor No.: T32004288

**NV Business ID:** NV20151426231

2024-2027 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 100.00 % Fees Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116114

Contract start date:

a. Effective upon Board of No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

Contract term: 3 years and 150 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 Indian Hills Curatorial Center - HVAC System Renovation CIP Project to include structural and electrical engineering services, prime consulting services, and mechanical design for the design and construction of heating, ventilating, and air conditioning equipment in the areas of the building that are used to store historical and anthropological collections, as well as the addition of exterior wall insulation on the existing masonry walls, and the replacement of the existing southeast overhead door: CIP Project No. 23-M43; SPWD Contract No. 116114.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$73,700.00 Other basis for payment: 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 No

Was the solicitation (RFP) done by the Purchasing

Division?

Contract #: 28540 Page 1 of 2 a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes 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?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

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	12/14/2023 13:34:59 PM
Division Approval	nmann	12/14/2023 13:35:01 PM
Department Approval	nmann	12/14/2023 13:35:04 PM
Contract Manager Approval	lwildes	12/14/2023 13:39:38 PM
Budget Analyst Approval	klay0	01/31/2024 08:05:45 AM

For Board Use Only 01/26/2024

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: 28546

Legal Entity SAAREM CONSULTING ENGINEERS,

Name:

**ADMIN - STATE PUBLIC WORKS** Contractor Name: SAAREM CONSULTING ENGINEERS, Agency Name: DIVISION

2188 ALFRED WAY Agency Code: 082 Address:

Appropriation Unit: 1592-45

Is budget authority Yes City/State/Zip **CARSON CITY, NV 89703-7128** 

available?:

If "No" please explain: Not Applicable Contact/Phone: 775-772-9846

Vendor No.: T32004288 **NV Business ID:** NV20151426231

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.

0.00 % General Funds 100.00 % Fees Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 116115

Contract start date:

 Effective upon Board of No or b. other effective date 01/26/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027 3. Termination Date:

Contract term: 3 years and 155 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 Marjorie Russell Research Center - Heating and Air Conditioning Upgrade CIP project to include electrical and structural engineering services, drawings, plan checking, bid support, and commissioning support for the replacement of heating, ventilating, and air conditioning equipment in the areas of the building that are used to store historical clothing and textile collections: CIP Project No. 23-M42; SWPD Contract No. 116115.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$20,700.00 Other basis for payment: Monthly progress payments based on services provided

#### II. JUSTIFICATION

7. What conditions require that this work be done?

2023 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?

Nο No

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes 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?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

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	12/14/2023 14:09:15 PM
Division Approval	nmann	12/14/2023 14:09:18 PM
Department Approval	nmann	12/14/2023 14:09:21 PM
Contract Manager Approval	lwildes	12/14/2023 14:17:59 PM
Budget Analyst Approval	klay0	01/26/2024 16:45:28 PM

For Board Use Only 01/31/2024

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: 28473

Legal Entity

ARCHITECTS +, LLC

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: ARCHITECTS +, LLC

DIVISION Agency Code:

082

Address:

35 MARTIN ST.

Appropriation Unit: 1593-29

Is budget authority

Yes

City/State/Zip

RENO, NV 89509-2825

available?:

If "No" please explain: Not Applicable

Contact/Phone:

775-329-8001

Vendor No.:

T80870250

**NV Business ID:** 

NV20001117428

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 Federal Funds

0.00 % 0.00 %

Fees **Bonds** 

X

0.00 % 100.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 116057

Contract start date:

Effective upon Board of

No or b. other effective date

03/2024

01/31/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

If "Yes", please explain

Not Applicable 3. Termination Date:

06/30/2027

Contract term: 3 years and 150 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 Motor Vehicles, Carson City - Seismic Replacement of Raised Server Room Floor CIP Project to include design development with design documents, 100% construction documents, bid review, and submission with construction administration phases for the design and construction of a seismic rated raised server room floor and the temporary relocation and support of the existing server racks to maintain operations during construction: CIP Project No. 23-M22; SPWD Contract No. 116057.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$23,500.00 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 CIP�s.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

29 Contract #: 28473 Page 1 of 2

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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	12/14/2023 08:31:39 AM
Division Approval	nmann	12/14/2023 08:31:42 AM
Department Approval	nmann	12/14/2023 08:31:44 AM
Contract Manager Approval	lwildes	12/15/2023 08:09:20 AM
Budget Analyst Approval	klay0	01/31/2024 10:18:10 AM

For Board Use Only 02/07/2024

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: 28620

Legal Entity

ARCHITECTS +, LLC

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: ARCHITECTS +, LLC

DIVISION Agency Code: 082

Address:

35 MARTIN ST.

Appropriation Unit: 1594-37

Is budget authority

Yes

City/State/Zip

RENO, NV 89509-2825

available?:

If "No" please explain: Not Applicable

Contact/Phone:

775-329-8001

T80870250

NV20001117428 **NV Business ID:** 

To what State Fiscal Year(s) will the contract be charged?

2024-2027

Vendor No.:

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds

75.00 %

Fees **Bonds** 

0.00 % 25.00 %

Highway Funds

0.00 % 0.00 %

Other funding

0.00 %

Agency Reference #: 116154

Contract start date:

Effective upon Board of

No or b. other effective date 02/07/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

X

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027

3. Termination Date: Contract term:

3 years and 143 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 Blasdel Building - Elevator Modernization and Renovation CIP Project to include architectural, electrical, and mechanical engineering services, cost estimating, construction documents, and bidding and construction administration services for the renovation of the existing elevator including the motors, controls, and mechanical and electrical systems: CIP Project No. 23-M03-(11); SPWD Contract No. 116154.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$20,000.00 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?

Nο

Was the solicitation (RFP) done by the Purchasing

No

Division?

30 Contract #: 28620 Page 1 of 2

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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

No

b. Is the contract part of an IT investment project over

\$50,000?

### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Signature Date User **Budget Account Approval** nmann 12/14/2023 16:35:16 PM **Division Approval** 12/14/2023 16:35:19 PM nmann Department Approval nmann 12/14/2023 16:35:21 PM Contract Manager Approval **lwildes** 01/29/2024 10:08:25 AM **Budget Analyst Approval** klay0 02/07/2024 08:31:32 AM

For Board Use Only 01/25/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28400

Legal Entity

LUMOS & ASSOCIATES, INC.

Date:

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name:

Contractor Name: LUMOS & ASSOCIATES, INC.

DIVISION Agency Code: 082

Address:

308 N. CURRY ST.

Appropriation Unit: 1594-30

Is budget authority

Yes

City/State/Zip

CARSON CITY, NV 89703

available?:

If "No" please explain: Not Applicable

Contact/Phone:

775-883-7077

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. General Funds 100.00 %

Fees

Federal Funds 0.00 % Highway Funds 0.00 % **Bonds** 0.00 %

Other funding

0.00 %

0.00 %

Agency Reference #: 115962

Contract start date:

a. Effective upon Board of

No

or b. other effective date

01/25/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2027

3. Termination Date: Contract term:

3 years and 156 days

4. Type of contract:

Contract

Contract description:

Arch / Rng

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 utility and field survey to locate and mark underground utilities: CIP Project No. 23-C19; SPWD Contract No. 115962.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$11,250.00 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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

31 Contract #: 28400 Page 1 of 2

b. Soliciation 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 No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 14:30:36 PM **Division Approval** 12/13/2023 14:30:39 PM nmann **Department Approval** nmann 12/13/2023 14:30:42 PM Contract Manager Approval **lwildes** 01/24/2024 12:40:06 PM **Budget Analyst Approval** klay0 01/25/2024 08:49:55 AM

For Board Use Only Date: 01/31/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28545

Legal Entity

IN2IT ARCHITECTURE

Name:

**ADMIN - STATE PUBLIC WORKS** Agency Name: DIVISION

Contractor Name: IN2IT ARCHITECTURE

082 Agency Code:

Address:

5135 S. DURANGO DR. #103

Appropriation Unit: All Appropriations

Is budget authority

No

City/State/Zip

LAS VEGAS, NV 89113

available?:

If "No" please explain: Agency Project:

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

Contact/Phone:

702-852-2252

Maintenance.

Vendor No.:

T29045148

**NV Business ID:** 

NV20131112567

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.

0.00 % 0.00 % Fees

0.00 % 0.00 %

Federal Funds Highway Funds

General Funds

0.00 %

**Bonds** X Other funding

100.00 % Agency Funded CIP

Agency Reference #: 116130

2. Contract start date:

a. Effective upon Board of

No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable 3. Termination Date:

06/30/2025

No

Contract term:

1 year and 150 days

4. Type of contract:

Contract

Contract description:

Arch / Eng

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Southern Nevada Adult Mental Health Services, Building 6 - Mezzanine Structural Retrofit CIP Project to include architectural services, structural engineering, construction administration, specifications, and cost estimating for the structural assessment of the storage floor to assess the load carrying capacity of the area: CIP Project No. 24-A010-2(a); SPWD Contract No. 116130.

#### 6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$77,000.00 Other basis for payment: Monthly progress payments based on services provided

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application - 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. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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?

If "Yes", please provide details of the litigation 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?

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

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	12/14/2023 13:44:58 PM
Division Approval	nmann	12/14/2023 13:45:01 PM
Department Approval	nmann	12/14/2023 13:45:04 PM
Contract Manager Approval	lwildes	12/14/2023 14:03:58 PM
Budget Analyst Approval	klay0	01/31/2024 09:53:32 AM

For Board Use Only
Date: 02/12/2024

#### **CONTRACT SUMMARY**

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 27488 Amendment Number:

Legal Entity

ty THE ABBI AGENCY

Name:

Agency Name: GOVERNOR'S OFFICE OF Contractor Name: THE ABBI AGENCY

ECONOMIC DEVELOPMENT

Agency Code: 102 Address: 1385 HASKELL STREET

Appropriation Unit: 1526-11

Is budget authority Yes City/State/Zip RENO, NV 89509

available?:

If "No" please explain: Not Applicable Contact/Phone: Allegra Demerjian, Client Success

Director 775-323-2977

Vendor No.: T27037235

NV Business ID: NV20081200897

Info Annua C

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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.

 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 No or b. other effective date 06/14/2023

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive? No

If "Yes", please explain

#### Not Applicable

3. Previously Approved **06/13/2027** 

Termination Date:

Contract term: 4 years
4. Type of contract: Contract

Contract description: Website Redesign

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing website design and maintenance support services and marketing branding materials. This amendment increases the maximum amount from \$111,000 to \$132,850 to allow for the development of one (1) intranet page.

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#### 6. CONTRACT AMENDMENT

		rans \$	Into Accum \$	Action Accum \$ Agenda
1.	The max amount of the original contract:	\$111,000.00	\$111,000.00	\$111,000.00 Yes - Action
2.	Amount of current amendment (#1):	\$21,850.00	\$21,850.00	\$21,850.00 Yes - Info
3.	New maximum contract amount:	\$132,850.00		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 231, GOED is responsible for the marketing effort to attract professionals and businesses to this State. The website is a key tool to accommodate the effort. GOED has recently finished a re-brand that will now have to be integrated into the website redesign.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

GOED employees do not have the technical expertise to build and maintain a complex website in which links the numerous entities throughout Nevada for economical development.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

KPS3 **NLRK** 

Notice U Marketing

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #12GOED-S2245, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date:

01/25/2023

Anticipated re-bid date:

09/30/2027

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes agency has been verified as satisfactory:

GOED � 9/28/22 � 9/30/25

GOED � 10/6/21 � 3/31/22 GOED � 7/6/21 � 9/29/23

Silver State Health Insurance Exchange � 4/1/21-3/31/25

NDOW � 4/15/20-4/14/23 NDOW � 7/13/21 � 7/13/25

NDOT � 4/2020 � 12/2020

UNLV � 9/2020 � 11/2020

State Treasurer & #65533; Soffice & #65533; 92020 & #65533; 2/2021

DMV � 7/1/2019 � 6/30/2023

They have all been verified as satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

19. Agency Field Contract Monitor:

# 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** Icopelan 02/01/2024 12:26:06 PM **Division Approval** Icopelan 02/01/2024 12:26:09 PM Department Approval Icopelan 02/01/2024 12:26:14 PM Contract Manager Approval Icopelan 02/01/2024 12:26:16 PM **Budget Analyst Approval** mbro28 02/12/2024 10:56:08 AM

For Board Use Only 02/02/2024

34

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28822

Legal Entity

**Executive Curbing & Concrete** 

Date:

Name:

**DEPARTMENT OF VETERANS** Agency Name:

Contractor Name:

**Executive Curbing & Concrete** 

**SERVICES** Agency Code: 240

Address:

2712 Renwick Cir.

Appropriation Unit: 2560-15

Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89117

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Dean Perra 702-210-0706

Vendor No.:

T32014757

**NV Business ID:** 

NV20222323574

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.

Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

General Funds

0.00 %

Other funding

0.00 %

Contract start date:

X

a. Effective upon Board of

No or b. other effective date 02/02/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

12/31/2025

Contract term:

1 year and 333 days

4. Type of contract:

Contract

Contract description:

**Executive Curbing** 

5. Purpose of contract:

This is a new contract to provide curbing installation.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$18,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

We have several mow strip, and curbing installation projects required to contain grass, and provide needed curbing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the equipment or expertise to perform this type of work

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Executive Curbing and Concrete** 

Pro Curb

Curb Creative

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

Lowest cost, and ability to fulfill all scopes of work for all projects.

Contract #: 28822 Page 1 of 2 d. Last bid date: 12/27/2023 Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

Nο

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contracted previously by NDVS, work completed was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jtheil1	01/29/2024 12:25:37 PM
Division Approval	jtheil1	01/29/2024 12:25:39 PM
Department Approval	jtheil1	01/29/2024 12:25:42 PM
Contract Manager Approval	jclodfel	01/29/2024 13:00:39 PM
Budget Analyst Approval	mranki1	02/02/2024 09:37:37 AM

For Board Use Only 02/08/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28820

Legal Entity

Medlife Transportation LLC

Name:

**DEPARTMENT OF VETERANS** Agency Name:

Contractor Name:

**Medlife Transportation LLC** 

**SERVICES** 

Address:

8170 W Sahara Ave

Suite 102

Appropriation Unit: 2561-13 Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89117

available?:

Agency Code:

If "No" please explain: Not Applicable

240

Contact/Phone:

Daniela Spiridon 702-648-8000

Vendor No.:

T32015361

**NV Business ID:** 

NV20131156150

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 Federal Funds

0.00 % 65.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

35.00 % Private/county

Contract start date:

X

a. Effective upon Board of

No

or b. other effective date

02/08/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

Contract term:

3. Termination Date:

01/31/2026

1 year and 358 days

4. Type of contract:

Contract

Contract description:

Medlife

5. Purpose of contract:

This is a new contract to provide non-emergency medical transportation.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$29.000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Transportation for admissions, and doctor's appointments when exceeds scope able to be fulfilled by transportation team.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Admission transportation, and doctor appointments outside of the scope and coverage of transportation team.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Lowest cost of two bids provided

d. Last bid date: 11/27/2023 Anticipated re-bid date:

35 Contract #: 28820 Page 1 of 2

10. a. Does the contract contain any IT components?b. Is the contract part of an IT investment project over \$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Io If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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** itheil1 02/02/2024 06:59:09 AM **Division Approval** itheil1 02/02/2024 06:59:11 AM Department Approval itheil1 02/02/2024 06:59:14 AM Contract Manager Approval 02/02/2024 08:33:05 AM iclodfel **Budget Analyst Approval** 02/08/2024 09:22:05 AM mranki1

For Board Use Only 01/26/2024

36

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28736

Legal Entity

Pivium, Inc

Name:

**DEPARTMENT OF VETERANS** Agency Name:

Contractor Name:

Pivium, Inc

240

**SERVICES** 

Agency Code: Appropriation Unit: 2561-26 Address:

1515 W. Deer Valley Road

Suite C102

Is budget authority

Yes

City/State/Zip

Phoenix, AZ 85027

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Will Gray 623-271-4650 T27044840

Vendor No.: **NV Business ID:** 

To what State Fiscal Year(s) will the contract be charged?

2024-2026

NV20222537861

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds

0.00 % 65.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

35.00 % Private/County

Contract start date:

X

a. Effective upon Board of

No

or b. other effective date

01/26/2024

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date: Contract term:

01/31/2026

4. Type of contract:

2 years and 6 days

Contract

Contract description:

**Pivium Inc** 

5. Purpose of contract:

This is a new contract to provide installation of a new audio & visual equipment package.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$48,264.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

System at home is unable to keep up with the demand for services to serve our residents.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Scope of project and skill set necessary is beyond abilities of NDVS IT department.

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):

Convirgent Pivium Inc Stone Security

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

Other two vendors could not fulfill Scope of Work for project necessary

Contract #: 28736 Page 1 of 2 d. Last bid date: 12/25/2023 Anticipated re-bid date: 01/31/2026

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

Nο

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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	jtheil1	01/04/2024 14:49:47 PM
Division Approval	jtheil1	01/04/2024 14:49:50 PM
Department Approval	jtheil1	01/04/2024 14:49:55 PM
Contract Manager Approval	jclodfel	01/25/2024 09:12:52 AM
EITS Approval	ljean	01/25/2024 13:16:27 PM
Budget Analyst Approval	mranki1	01/26/2024 14:05:17 PM



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

## MEMORANDUM

**TO:** Fred Wagar, Director, Office of Veterans Services

Joseph Theile, Chief Financial Officer, Office of Veterans Services

Brandon Torres, IT Manager I, Office of Veterans Services

Magdalena Rosol, IT Professional III, Office of Veterans Services

**CC:** Tim Galluzi, State Chief Information Officer, OCIO

Robert Dehnhardt, State Chief Information Security Officer, OCIO

Jason Benshoof, Support Services Unit, OCIO

David Axtell, Deputy CIO - Chief Technology Officer, OCIO

**FROM**: Lisa Jean, TIN Administrator, OCIO

**SUBJECT**: TIN Completion Memo – Veterans – TIN 815 – AV Upgrade SNSVH – BA

2561

**DATE:** January 24, 2024

We have completed our review for the Office of Veterans Services (Veterans) – AV Upgrade SNSVH – TIN 815.

The submitted TIN, for an estimated value of \$48,264.00 in the FY24/FY25 biennium (65% Federal Funds and 35% Private/County funding), is to upgrade a deprecated SNSVH multimedia center used for various activities that includes resident entertainment.

The agency considers this on-premises investment and its final implementation to have an ongoing low security risk, as no personal identification information will be processed, transferred, or stored within the

solution and it has no impact on state infrastructure.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

For Board Use Only 02/01/2024

37

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28808

Legal Entity

Stone Security, LLC

Name:

**DEPARTMENT OF VETERANS** Agency Name: **SERVICES** 

Contractor Name:

Stone Security, LLC

Agency Code: 240

Address:

401 Ryland St.

Appropriation Unit: 2561-26

Suite 200-A

Is budget authority available?:

Yes

City/State/Zip

Reno, NV 89502

If "No" please explain: Not Applicable

Contact/Phone:

Darrin Bingham 435-730-7687

Vendor No.:

T29047206

**NV Business ID:** 

NV20171442903

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 Federal Funds

0.00 % 65.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

X Other funding

35.00 % Private/County

Contract start date:

X

a. Effective upon Board of

No

or b. other effective date

02/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

04/30/2026

Contract term:

2 years and 88 days

4. Type of contract:

**Contract** 

Contract description:

**Stone Security** 

5. Purpose of contract:

This is a new contract to provide installation of security equipment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$18.640.00

### II. JUSTIFICATION

7. What conditions require that this work be done?

Installation for updated Security IT package

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Scope of work, and installation goes beyond specializations of our team

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Convirgent Technologies

Mobile Communications of America

Stone Security

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

Lowest cost, and ability to fulfill entire scope of work

Contract #: 28808 Page 1 of 2 d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

Nο

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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	jtheil1	01/26/2024 09:11:56 AM
Division Approval	jtheil1	01/26/2024 09:12:29 AM
Department Approval	jtheil1	01/26/2024 09:12:35 AM
Contract Manager Approval	jclodfel	01/29/2024 08:32:37 AM
EITS Approval	ljean	01/29/2024 09:22:23 AM
Budget Analyst Approval	mranki1	02/01/2024 09:20:54 AM

For Board Use Only 01/31/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28761

Legal Entity

Erin Conley

Name:

Agency Name:

STATE PUBLIC CHARTER SCHOOL

Contractor Name:

**Erin Conley** 

Agency Code:

**AUTHORITY** 

Address:

2935 Waterchase Way SW Apt 105

Date:

Appropriation Unit: 2711-04

Is budget authority

Yes

City/State/Zip

**Wyoming, MI 49519** 

available?:

If "No" please explain: Not Applicable

315

Contact/Phone:

517-802-8343

Vendor No.:

**NV Business ID:** NV20242999212

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 % 0.00 % Χ Fees **Bonds**  100.00 % Sponsorship fees 0.00 %

Federal Funds Highway Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

11/30/2027

Contract term:

3 years and 304 days

4. Type of contract:

Contract

Contract description:

**External Reviewer** 

5. Purpose of contract:

This is a new contract to provide for external reviews of charter school applications and amendments.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$23.976.00

Payment for services will be made at the rate of \$999.00 per application or other charter amendments

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The agency regularly maintains a pool of qualified peer reviewers to read and evaluate charter school applications and other documents related to the operation and/or authorizing of charter schools.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

In reviewing charter school applications and amendments, it is important that an independent, third party perform a review in addition to SPCSA staff.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Adam Aberman **Brittany Monda** Kristine Barker

38 Contract #: 28761 Page 1 of 2

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

d. Last bid date: 12/15/2023 Anticipated re-bid date: 09/30/2027

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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?

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

User Approval Level Signature Date **Budget Account Approval** ibauer 01/17/2024 16:40:55 PM **Division Approval** jbauer 01/17/2024 16:40:58 PM Department Approval jbauer 01/17/2024 16:41:03 PM Contract Manager Approval 01/17/2024 16:41:06 PM ibauer **Budget Analyst Approval** twollan1 01/31/2024 17:22:01 PM

For Board Use Only 01/19/2024

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: 28724

Legal Entity Zephyr Point Presbyterian Conference

Name: Center

Agency Name: ADMIN - NV ST LIBRARY,

Contractor Name: Zephyr Point Presbyterian Conference

Center

ARCHIVES AND PUBLIC RECORDS
Agency Code: 332

Address: 660 Highway 50

Appropriation Unit: 2891-12

Is budget authority Yes

City/State/Zip Zephyr Cove, NV 89448

available?:

If "No" please explain: Not Applicable Contact/Phone: Maria DeLallo 775-588-6759

Vendor No.: T29048154 NV Business ID: NV20071762404

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
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

2. Contract start date:

X

a. Effective upon Board of No or b. other effective date 01/19/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive? No

If "Yes", please explain

#### Not Applicable

Termination Date: 05/31/2024
 Contract term: 132 days
 Type of contract: Contract
 Conference

5. Purpose of contract:

This is a new contract to provide lodging and conference room services for the Director's Summit Conference May 29 to May 31, 2024, located at Zephyr Point Presbyterian Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$17,640.00 Other basis for payment: Conference Center is requesting a deposit of \$2,700.00,

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Through professional learning and resources, the Library Planning and Development division of the Nevada State Library, Archives and Public Records assists Nevada Libraries in building capacity to best serve their communities. The Director's Summit will be an interactive and engaging gathering of library leaders across the State of Nevada. They will learn from guest speakers, connect and collaborate with their peers, and strengthen their capacity to tackle the complex and difficult challenges of library management.

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?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Harvey's Lake Tahoe Zephyr Point Hyatt Regency

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

They have the conference space and rooms needed at the best price and we followed purchasing guidelines by supplying three quotes

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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
 jvictor
 01/05/2024 15:16:04 PM

 Division Approval
 nmann
 01/05/2024 16:17:50 PM

 Department Approval
 ssands
 01/08/2024 15:48:03 PM

 Contract Manager Approval
 ssands
 01/19/2024 15:09:59 PM

 Budget Analyst Approval
 Iramire7
 01/19/2024 15:24:25 PM

For Board Use Only 02/08/2024

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: 27988

Legal Entity

**Beatty Library District** 

Name:

ADMIN - NV ST LIBRARY. Agency Name:

Contractor Name: Beatty Library District

Agency Code: 332

**ARCHIVES AND PUBLIC RECORDS** 

Address:

**Fourth & Ward Street** 

Appropriation Unit: 2895-00

**PO Box 129** 

Is budget authority

Yes

City/State/Zip

**Beatty, NV 89003** 

available?:

If "No" please explain: Not Applicable

Contact/Phone:

702-553-2257

Vendor No.: **NV Business ID:** 

To what State Fiscal Year(s) will the contract be charged?

Government Entity

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 Federal Funds

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Χ Other funding

100.00 % Revenue

2. Contract start date:

a. Effective upon Board of

No or b. other effective date 07/01/2023

Examiner's approval?

Anticipated BOE meeting date

03/2023

Retroactive?

If "Yes", please explain

The Nevada Library Cooperative respectfully requests the 4-year membership revenue contracts for fiscal years 2024 through 2027 be retroactive to July 1, 2023. The contracts were unable to move forward pending an administrative review of the CoOp's budget account status. Pending 3rd party legal review, the attorney for the State Library and Administrative Services Division agreed to move the CoOp's contracts forward.

3. Termination Date:

06/30/2027

Contract term:

4 years

4. Type of contract:

**Revenue Contract** 

Contract description:

Revenue

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing membership to the Nevada Library Cooperative.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$10,400.00

Payment for services will be made at the rate of \$2,600.00 per year

Other basis for payment: FY24, \$2,600;FY25, \$2,600;FY26, \$2,600 & FY27, \$2,600.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative (formerly CLAN- Cooperative Libraries Automated Network) through joint agreement for the improvement of library services and sharing of resources. Rough joint agreement for the improvement of library services and the sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing
 No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Library Cooperative, (CoOp) (formerly known as CLAN) has been doing contracts through Nevada State Library, Archives & Public Records using cooperative agreements since 1981.

14. Is the contractor currently involved in litigation with the State 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
 jvictor
 07/28/2023 14:01:35 PM

 Division Approval
 jkidd
 07/28/2023 15:32:10 PM

 Department Approval
 ssands
 01/29/2024 08:09:16 AM

 Contract Manager Approval
 ssands
 01/29/2024 08:33:55 AM

 Budget Analyst Approval
 Iramire7
 02/08/2024 15:09:36 PM



To: Jennifer Hamilton, Executive Branch Budget Officer, Governor's Finance Office

From: Kari Ward, Director, Nevada Library Cooperative

**Date:** August 8, 2023

**Re:** Retroactive contract dates request for the Nevada Library Cooperative's

membership revenue contracts

#### Dear Jennifer:

The Nevada Library Cooperative respectfully requests the 4-year membership revenue contracts for fiscal years 2024 through 2027 be retroactive to July 1, 2023.

The contracts were unable to move forward pending an administrative review of the CoOp's budget account status. Pending 3<sup>rd</sup> party legal review, the attorney for the State Library and Administrative Services Division agreed to move the CoOp's contracts forward.

Thank you -

Kari Ward – Director, Nevada Library Cooperative

an Word

For Board Use Only 01/29/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28708

Legal Entity

Global Technical Communications, LLC

Date:

Name:

**DHHS - HEALTH AND HUMAN** Agency Name: SERVICES DIRECTOR'S OFFICE Contractor Name:

**Global Technical Communications**,

Agency Code:

Address:

102 N KROHN PL

Appropriation Unit: 3154-10

Is budget authority

Yes

City/State/Zip

SIOUX FALLS, SD 57103

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Patty Kuglitsch 605/370-6782

Vendor No.: **NV Business ID:**  T32013296 NV2023941745

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.

0.00 % General Funds 25.00 % Fees X Federal Funds 75.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 10/01/2023

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

This contract will utilize the existing framework already in place as this vendor has been working with Nevada Governor's Council on Developmental Disabilities (NGCDD) in the State of Nevada through a previous subgrant for these services. In reviewing 2 CFR 200.92-93, it was determined the relationship with GTC is that of a contractor and not a subrecipient. This contract is an effort to utilize the correct instrument, follow state procurement rules, and prevent an interruption of services.

3. Termination Date: 09/30/2024

Contract term: 1 year

4. Type of contract: Contract

Contract description: **Mobile Communication** 

5. Purpose of contract:

This is a new contract to provide a mobile American Sign Language interpretation services application at no cost to deaf and hard of hearing residents of Nevada as part of the Nevada Mobile Communications Access Project.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$50,000.00

Other basis for payment: Upon Receipt of invoice.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Global Technical Communications provides a user-friendly mobile platform that provides an ASL interpretation services app for marginalized communities. Providing the underserved group with this communication tool helps individuals to become self-sufficient and independent reducing communication barriers created due to their disabilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the tools or knowledge to be able to effectively provide the communication tools that are needed.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Sole Source Contract (As Approved by Chief of Purchasing)

Approval #: 231201 Approval Date: 12/04/2023

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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:** 

User Approval Level Signature Date **Budget Account Approval** Igallow1 01/03/2024 09:18:54 AM **Division Approval** Igallow1 01/03/2024 09:18:57 AM Department Approval Igallow1 01/03/2024 09:19:00 AM Contract Manager Approval Igallow1 01/03/2024 09:19:03 AM khal5 01/29/2024 07:59:18 AM Budget Analyst Approval



Purchasing Use Only:
Approval#: 2020

# 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

# SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

# ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

	Agency Contact Infor	gency Contact Information - Note: Approved copy will be sent to ONLY the contact(s) listed						
1.	STATE AGENCY NAME REQUIRED:		Dept. of Health and Human Services					
1a	Contact Name and Title				Phone Number	Em	Email Address	
	Debi Reynolds, Deputy Director DHHS De			o	775-400-6747	dreynold	ds@dhhs.nv.gov	
	Catherine Nielsen, Exec. Dir, NGCDD				775-684-8620		en@dhhs.nv.gov	
						•		
	Vendor Information:							
	Vendor Name:		Gle	bal Techn	ical Communicati	ons, LLC		
	Contact Name:		Bri	idget Bonh	evo			
1b	b Complete Address:			2 N. Krohn	Place, Sioux Fall	s, SD, 57103		
	Telephone Number:		60:	5-370-6782	,			
	Email Address:		bbo	nheyo@gtco	oms.com			
	Type of Waiver Requ	ested – Check	the a	ıppropriat	e type:			
1c	Sole or Single Source:		X	X				
	Professional Service Exemption:							
	Contract Information							
1d	Is this a new Contract?			Yes:	X	No:		
	If 'No' Enter Amend							
	Enter CETS Number:		#	#				
	Term:							
1e		2 Chools Once		Yes:		No:	X	
16	One (1) Time Purchase? Check One: Contract:			tart Date:	Oct. 1, 2023	End Date:	Sept. 30, 2024	
L	Connact.			iait Date.	Oct. 1, 2023	End Date.	рери. 30, 2024	
	Funding:							
	State Appropriated:			S				
1f	Federal Funds:	75% Federal	Fund	S				
	Grant Funds:							
	Other (Explain):							

Purchasing Use Only:			
Approval #:	231201(0)		

1g Total Estimated Value of this Service Contract, Amendment or Purchase:

\$ 50,000

# Provide a description of work/services to be performed or services with goods to be purchased:

Global Technical Communications (GTC) provides a user-friendly mobile platform that provides an ASL interpretation services app for marginalized communities. It is common for persons with hearing loss to experience communication barriers multiple times a day. Providing the underserved group with this communication tool helps individuals to become independent and self-sufficient, thus reducing communication barriers created due to their disabilities.

What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?

GTC was previously awarded a subgrant to create a venue to apply for service and to provide the ASL application, at no cost to deaf and hard of hearing residents of Nevada.

Nevada Mobile Communication Access Project is a grant funded opportunity in the State of Nevada, ran and operated by GTC in collaboration with the Nevada Commission for Persons who are Deaf and Hard of Hearing (NVCDHH) and supported by the Governor's Council on Developmental Disabilities (NGCDD). The objective of this project is to "reduce identified barriers to accessing technology and digital information for individuals with Intellectual/Developmental Disabilities (I/DD) representing racial and/or ethnic disparities, Deaf/Hard of Hearing, Blind/Visually Impaired and/or those living in rural communities."

Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:

This contract will be utilizing the existing framework already in place as this vendor has been working with NGCDD in the State of Nevada through a previous subgrant for these services. In reviewing 2CFR 200.92-93, it was determined the relationship with GTC is that of a contractor and not a subrecipient. This contract is an effort to utilize the correct instrument, follow state procurement rules, and prevent an interruption of services to our disability community, while an appropriate solicitation process is put forward.

Were alternative services or commodities evaluated?

A. If yes, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.

5

b. *If not*, why were alternatives not evaluated?

This was the only response to NGCDD's Notice of Funding Opportunity.

Purchasing Use Only:	
Approval #:	2312013

Has the agency purchased these services/services with goods in the past? Check One:	Yes	No
NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS</u> MUST ACCOMPANY THIS REQUEST.	X	

a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with</u> <u>this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u>

Term		]	Short	Provide Type of Procurement		
Start Date	End Date	Value	Description	RFP#, RFQ#, Waiver #	CETS #	
10/1/22	9/30/23	\$40,000.00	ASL On- Demand Mobile Platform	NOFO – Subgrant DO 1340	N/A	
		\$				

# What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?

There are Deaf and hard of hearing community members in Nevada which are currently using the ASL Anywhere App, at no cost to them, as provided by GTC. If services were interrupted, this would cause a hardship for those who currently utilize those services. Last year one hundred five (105) consumers in addition to five (5) community service partners received 60-minute packages. Each package was \$480. The Council provided a \$40,000 grant. GTC provided \$12,800 in match to cover the additional costs of the packages, training, and community outreach. If services are interrupted it would also place the NGCDD in jeopardy of not meeting their state plan goals.

# 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?

It is in the best interest for the disability community in Nevada to have GTC continue to provide the ASL Anywhere App. This contract will bridge the time to needed while a new solicitation of services is completed. When the initial subaward was given to GTC, they were the only vendors to respond to the NOFO.

	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No	
9	NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.		X	
	a. If yes, please provide details regarding future obligations or needs.			

6

Purchasing Use Only:		
Approval #:	231701(9)	

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.

Lesa Galloway	
Signature of Agency Representative Initiating Request	
Lesa Galloway	12/1/23
Print Name of Agency Representative Initiating Request	Date
Vanessa Alpers	12/1/23
Vanessa Alpers Signature of Agency Head Authorizing Request	
Vanessa Alpers for Richard Whitley	
Print Name of Agency Head Authorizing Request	Date
or process already installed or in place by the State of Nevada or to assist in o solicit a review of your request from another agency or entity. The signature be has reviewed the information you provided. <b>This signature does not exempt you</b> may be required.	pelow indicates another agency or entity
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 gradual 333.400. This exemption may be rescinded in the event reliable information Purchasing Administrator determines that the service or good sought may in farmanner. Pursuant to NRS 333.700(7), contracts for services do not become effective Board of Examiners (BOE).	on becomes available upon which the act be contracted for in a more effective
If you have any questions or concerns, please contact Cindy Stoe cstoeffler@admin.nv.gov.	ffler at 775-684-0173 or email at
NOTE: If this box is checked, the agency must include the EITS TIN update as an attachment in CETS.	V/CIN approval or approval
Approved by:	
	12/4/2023
Administrator, Purchasing Division or Designee	Date

Solicitation Waiver Revised: June 2022 Page 4

Joe Lombardo *Governor* 



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## DIRECTOR'S OFFICE

Helping people. It's who we are and what we do.



Richard Whitley, MS *Director* 

DATE: 1/2/2024

TO: Amy Stephenson, Director, Governor's Finance Office

THROUGH: Karen Hall, Executive Branch Budget Officer, Governor's Finance Office

FROM: Lesa Galloway, ASO IV, Department of Health and Human Services, Director's Office

SUBJECT: Retroactive Contract

Attached is a new contract between Nevada Governor's Council on Developmental Disabilities and Global Technical Communications, LLC for which we are requesting retroactive approval.

Global Technical Communications, LLC (GTC) provides a user-friendly mobile platform that provides an ASL interpretation services app for marginalized communities. GTC was previously awarded a subgrant to create a venue to provide the ASL application at no cost to deaf and hard of hearing residents of Nevada.

This contract will be utilizing the existing framework already in place as this vendor has been working with NGCDD in the State of Nevada through a previous subgrant for these services. In reviewing 2CFR 200.92-93, it was determined the relationship with GTC is that of a contractor and not a subrecipient.

This contract is an effort to utilize the correct instrument, follow state procurement rules, and prevent an interruption of services to our disability community, while an appropriate solicitation process is put forward. When the initial subaward was given to GTC, they were the only vendors to respond to the NOFO.

We are requesting this contract be retroactive to October 1, 2023.

Please contact me if you have any questions or if I can be of any assistance.

Lesa Galloway, ASO IV, DHHS DO

For Board Use Only 02/13/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28730

Legal Entity

SHAWN ALLEN BUTTER

Name:

Agency Name: DHHS - AGING AND DISABILITY

Contractor Name:

**SHAWN ALLEN BUTTER** 

Agency Code: 402

SERVICES DIVISION

Address:

DBA BUTTER PLUMBING

Appropriation Unit: 3279-07

City/State/Zip

4130 ARCTIC SPRING AVE STE A

Is budget authority

Yes

LAS VEGAS, NV 89115-1870

available?:

If "No" please explain: Not Applicable

Contact/Phone:

SHAWN ALLEN BUTTER 702/655-5214

Date:

Vendor No.:

T29039308

NV Business ID: **2024-2028** 

NV20171408205

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds
X Federal Funds

**36.00** % Fees **64.00** % Bonds

0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

2. Contract start date:

a. Effective upon Board of

**No** or b. other effective date

04/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

03/31/2028

3. Termination Date: Contract term:

4 years

4. Type of contract:

Contract

Contract description:

DRC Plumbing

5. Purpose of contract:

This is a new contract to provide ongoing plumbing repair and maintenance services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$23,080.00

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?

NAC 449.6851(1) A facility must be designed, constructed, equipped, and maintained in a manner that protects the health and safety of the patients and personnel of the facility and members of the general public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Contracted services are used when required repairs or services exceed the skills of state employees.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Anytime Plumbing Elemental Plumbing Pentagon Plumbing Inc Butter Plumbing

Contract #: 28730 Page 1 of 2 **42** 

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This vendor was the only one to respond to our bid request and had a reasonable bid.

d. Last bid date: 11/15/2023 Anticipated re-bid date: 11/15/2027

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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, per DAWN since 2018.

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

User

Yes

- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level Signature Date **Budget Account Approval** gjorgens 01/04/2024 15:16:28 PM 01/08/2024 13:29:17 PM **Division Approval** ecreceli Department Approval ecreceli 01/17/2024 13:59:44 PM Contract Manager Approval maceved1 02/08/2024 12:43:06 PM **Budget Analyst Approval** khal5 02/13/2024 15:36:43 PM

For Board Use Only Date: 02/13/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28807

Legal Entity

SOCIAL ENTREPRENEURS, INC.

Name:

**DHHS - AGING AND DISABILITY** Agency Name: SERVICES DIVISION

Contractor Name: SOCIAL ENTREPRENEURS, INC.

Agency Code:

Address:

6548 S MCCARRAN BLVD STE B

Appropriation Unit: 3282-61

Is budget authority

Yes

City/State/Zip

RENO, NV 89509-6150

available?:

If "No" please explain: Not Applicable

Contact/Phone:

KELLY MARSCHALL 775/324-4567

Vendor No.:

2024-2025

T27004599

**NV Business ID:** 

NV19961250456

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 0.00 % Fees Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Contract start date:

X

a. Effective upon Board of

No or b. other effective date 02/13/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

12/31/2024

Contract term:

322 days

4. Type of contract:

Other (include description): MSA Work Plan

Contract description:

**SEI -Paul Greenwood** 

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 consultation services to establish and maintain a Vulnerable Adult Fatality Review Team in support of Assembly Bill 119 passed during the 2023 Legislative Session.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$28,250.00 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. During the 2023 legislative session, Assembly Bill 119 passed, requiring the establishment of the Vulnerable Adult Fatality Review Committee. APS is utilizing a subject matter expert in this field, Paul Greenwood, to assist with establishing and maintaining a Vulnerable Adult Fatality Review Team. Mr. Greenwood is a retired San Diego District Attorney (DA) with twenty-two years of experience heading up the Elder Abuse Prosecution Unit at the San Diego DA's Office.

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 vulnerable adult fatalities and are utilizing a state service agreement for

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing Division?

Yes

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation 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?

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

Contract Manager Approval

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

Budget Account Approval gjorgens 02/05/2024 15:25:19 PM

Division Approval tric1 02/05/2024 15:42:31 PM

Department Approval dschmid5 02/05/2024 16:15:07 PM

maceved1

Budget Analyst Approval khal5 02/13/2024 17:03:41 PM

02/13/2024 16:07:59 PM

For Board Use Only 01/29/2024

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: 28637

Legal Entity Carson City Regional Transportation

Name: Commission

Agency Name: DHHS - HEALTH CARE FINANCING & POLICY

Contractor Name: Carson City Regional Transportation

Commission

Agency Code: 403 Address: 3505 Butti Way

Appropriation Unit: 3157-00

Is budget authority Yes City/State/Zip Carson City, NV 89701

available?:

If "No" please explain: Not Applicable Contact/Phone: Christopher Martinovich 775-287-0470

Vendor No.: T80990941D

NV Business ID: Governmental Entitiy

To what State Fiscal Year(s) will the contract be charged? 2025-2028

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

 General Funds
 0.00 %
 Fees
 0.00 %

 Federal Funds
 0.00 %
 Bonds
 0.00 %

Highway Funds 0.00 % X Other funding 100.00 % Revenue

Contract start date:

a. Effective upon Board of No or b. other effective date 07/01/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2028** 

Contract term: 4 years

4. Type of contract: Revenue Contract
Contract description: Paratransit Services

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing funds for the non-federal share associated with paratransit services for Medicaid eligible recipients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$51,721.50

Other basis for payment: FY25: \$12,000; FY26: \$12,600; FY27: \$13,230; FY28: \$13,891.50

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Per the Nevada Medicaid State Plan, Attachment 3.1-A, Section 9 and the Medicaid Services Manual, services will be provided to Medicaid eligible recipients who have been assessed and deemed eligible for paratransit rides.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have transportation services in place to provide paratransit rides.

Were quotes or proposals solicited?
 Was the solicitation (RFP) done by the Purchasing
 No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

c. Why was this contractor chosen in preference to other?

Contract #: 28637 Page 1 of 2 **44** 

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

No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 2017 to current. Satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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:

null, null Ph: null

Patricia O'Flinn, Management Analyst III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** 01/17/2024 10:48:32 AM aroma2 **Division Approval** 01/17/2024 22:24:20 PM laaron Department Approval staciew4 01/22/2024 09:00:09 AM **Contract Manager Approval** trya4 01/22/2024 09:07:57 AM **Budget Analyst Approval** 01/29/2024 10:10:19 AM nrezaie

For Board Use Only 02/12/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

2 1. Contract Number: 22743 Amendment

Number:

Legal Entity South Lyon County Hospital District

Name:

Address:

Agency Name: **DHHS - HEALTH CARE FINANCING** 

Contractor Name: **South Lyon County Hospital District** 

Yerington, NV 89447

31 S Main St

& POLICY Agency Code: 403

Appropriation Unit: 3157-00

Is budget authority available?:

If "No" please explain: Not Applicable Contact/Phone: David Bezard 775-463-6531

Vendor No.:

City/State/Zip

**NV Business ID:** Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2021-2024

Yes

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 % Federal Funds 0.00 % Bonds 0.00 %

100.00 % Revenue Highway Funds 0.00 % X Other funding

2. Contract start date:

a. Effective upon Board of or b. other effective date 07/01/2020 No

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

#### **Not Applicable**

3. Previously Approved 06/30/2024

Termination Date:

Contract term: 4 years

4. Type of contract: **Interlocal Agreement** 

Contract description: **UPL IGT** 

5. Purpose of contract:

This is the second amendment to the original revenue interlocal agreement which provides ongoing funds for the state's share of the Inpatient and Outpatient Public Upper Payment Limit (UPL) Supplemental Payment Programs for non-state government-owned and operated hospitals. The supplemental payment programs pay the difference between Medicaid payments and the Medicare amount. This amendment increases the maximum amount from \$1,011,190 to \$1,061,190 due to the increased Inpatient and Outpatient Public UPL supplemental payments.

#### 6. CONTRACT AMENDMENT

		Trans \$	Info Accum \$	Action Accum \$ Agenda
1.	The max amount of the original contract:	\$830,602.00	\$830,602.00	\$830,602.00 Yes - Action
	a. Amendment 1:	\$180,588.00	\$180,588.00	\$180,588.00 Yes - Action
2.	Amount of current amendment (#2):	\$50,000.00	\$50,000.00	\$50,000.00 Yes - Info
3.	New maximum contract amount:	\$1,061,190.00		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmental-owned and operated hospitals. The supplemental program pays the difference between Medicaid payments and the Medicare amount.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Services can only be provided by employees/contractors of the County Hospital.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Hospital District has been a contracted vendor with the DHCFP for many years and service has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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 02/01/2024 18:39:06 PM

 Division Approval
 laaron
 02/05/2024 14:55:58 PM

 Department Approval
 staciew4
 02/06/2024 10:14:33 AM

 Contract Manager Approval
 trya4
 02/06/2024 10:58:50 AM

 Budget Analyst Approval
 nrezaie
 02/12/2024 08:47:52 AM

For Board Use Only 01/29/2024

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: 28568

Legal Entity

Storey County

Name:

**DHHS - HEALTH CARE FINANCING** Agency Name:

Contractor Name: Storey County

& POLICY

Address:

**PO Box 176** 

Agency Code: Appropriation Unit: 3243-00

403

Yes

City/State/Zip

Virginia City, NV 89440

available?:

Is budget authority

Brandie Lopez 775-847-0968

If "No" please explain: Not Applicable

Contact/Phone:

T80054670D

**NV Business ID:** 

Governmental Entity

To what State Fiscal Year(s) will the contract be charged?

2024-2027

Vendor No.:

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if

the contractor will be paid by multiple funding sources.

0.00 % 0.00 % Fees **Bonds**  0.00 % 0.00 %

Federal Funds Highway Funds

General Funds

0.00 %

X Other funding

100.00 % Revenue

Contract start date:

a. Effective upon Board of

No or b. other effective date 07/01/2023

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

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: Contract term:

06/30/2027

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: \$10,357.36

Other basis for payment: Not to exceed \$0.08 per \$100 of assessed valuation of taxable property. FY24 \$3,980.47 and FY25-FY27 \$2,125.63/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. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 01/23/2024 15:48:35 PM

 Division Approval
 laaron
 01/25/2024 10:04:07 AM

 Department Approval
 staciew4
 01/25/2024 10:33:09 AM

 Contract Manager Approval
 ltuttl1
 01/25/2024 11:01:18 AM

 Budget Analyst Approval
 nrezaie
 01/29/2024 10:15:18 AM



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DHHS

Stacie Weeks, JD MPH Administrator

DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

#### **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.

For Board Use Only 02/12/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28493

Legal Entity

SOCIAL ENTREPRENEURS INC

Date:

Name:

Agency Name: DHHS - PUBLIC AND BEHAVIORAL

Contractor Name:

SOCIAL ENTREPRENEURS INC

Agency Code: 406

HEALTH

Address:

6548 S MCCARRAN BLVD STE B

Appropriation Unit: 3170-28

Is budget authority

Yes

City/State/Zip

RENO, NV 89509-6150

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Kelly Marschall 775/324-4567

Vendor No.:

2024-2025

T27004599

NV Business ID:

NV19961250456

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Federal Funds 100.00 % Highway Funds 0.00 % Fees 0.00 % Bonds 0.00 %

Other funding 0.00 %

Agency Reference #: 18269

2. Contract start date:

X

a. Effective upon Board of

No or b. other effective date

01/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

Yes

If "Yes", please explain

Change from DHHS MSA vendor and processing as WO now this vendor is State MSA vendor requiring new processes and additional signature process to complete the contract.

Termination Date: 09/30/2024
 Contract term: 272 days
 Type of contract: Contract

Contract description: Consulting Services

5. Purpose of contract:

This is a new contract to provide consulting and training services to address treatment gaps in continuum care.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$52,159.60

Other basis for payment: Per Cost Schedule

#### II. JUSTIFICATION

7. What conditions require that this work be done?

To address treatment gaps in continuum care. Services will include strategic planning addressing implementation barriers, decrease gaps in continuum care, resource development and linkage, improve implementation of CARA Plans to develop a network of trained peer recovery support specialist.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower and technical expertise.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Contract #: 28493 Page 1 of 2 **47** 

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

MSA vendor 99SWC-NV23-17884

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

MSA 99SWC-NV23-17884

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation 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 11/08/2023 15:46:43 PM **Budget Account Approval** ijanssen **Division Approval** ijanssen 11/08/2023 15:46:46 PM Department Approval 12/21/2023 15:44:08 PM ijanssen Contract Manager Approval ijanssen 02/08/2024 16:32:28 PM **Budget Analyst Approval** 02/12/2024 15:54:12 PM cdavis

Joe Lombardo Governor

Richard Whitley, MS *Director* 



# DEPARTMENT OF HEALTH AND HUMAN SERVICES





Cody Phinney, MPH Administrator

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

### MEMORANDUM

DATE: 11/08/2023

TO: John Borrowman, ASO IV

**Division of Public and Behavioral Health** 

THROUGH: Shannon Odermann Bennett, Health Bureau Chief 5/8

Stephanie Cook, Deputy Bureau Chief

Bureau of Behavioral Health, Wellness, and Prevention (BBHWP)

FROM: Tracy Palmer, Health Program Manager II

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL Social Entrepreneurs, Inc;

THE PURPOSE OF THIS MEMORANDUM: This memorandum requests that the following subgrant(s) be approved for a retroactive start.

The following information is required:

- Name of Subrecipient: Social Entrepreneurs, Inc.
- Services to be provided: Facilitation for Perinatal Health Initiative Action Plan
- Funding source and expenditure category: BA# 3170 CAT 28; SABG
- Requested start date of work: January 1, 2024
- Expected execution date of agreement: N/A
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - Due to the DPBH expiring MSA on 12/31/23, and the new statewide MSA run through State Purchasing, the Bureau was continuously engaged with the DPBH Contracts Unit in training on the new service agreement procedure that took the place of the previous work order process. This training and switch in process caused extensive delays in this process.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:
    - This Perinatal Health Initiative Workgroup has been a continuous work group supporting the work of the Bureau, and most specifically the federal Substance Use Prevention, Treatment, and Recovery Services Block Grant. This workgroup convenes various stakeholders throughout the State to support pregnant and postpartum women with substance use disorders, and other wraparound service supports. This workgroup also supports the new federal grant that the Bureau received to support the expansion of the

- Empower Program with Roseman University. This workgroup is a requirement of that grant, and the work cannot have a pause in services, or our Bureau will be out of compliance with that federal award.
- We are requesting a retro-active start date of January 1, 2024 to not have a gap in the critical role this workgroup plays for our grant deliverables.
- Explain how the program/bureau will prevent future retroactive requests: Moving forward, the Bureau is working on a better tracking component in collaboration with our Division Contract's Unit to ensure all deadline are met and all documents are in order ahead of the appropriate Board of Examiners meeting.

If you have any questions, please contact Abigail Hatefi at (775) 431-7098 or ahatefi@health.nv.gov.

For Board Use Only 02/01/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28721

Legal Entity

DP VIDEO PRODUCTIONS LLC

Name:

**DHHS - PUBLIC AND BEHAVIORAL** Agency Name: **HEALTH** 

Contractor Name:

**DP VIDEO PRODUCTIONS LLC** 

406 Agency Code:

Address:

2024

6984 SMILING CLOUD AVE

Appropriation Unit: 3215-24

Is budget authority

Yes

City/State/Zip

**HENDERSON, NV 89011-5013** 

available?:

X

If "No" please explain: Not Applicable

Contact/Phone:

Emire Stitt 702/468-9901

Vendor No.:

T29019963A

**NV Business ID:** 

NV20041136819

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 0.00 % Fees Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: SA18310

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Discontinuation of DHHS MSA and revisions to SOW negotiations with vendor created delay, coupled with holiday vacations, leading to a shortage of manpower to process this request.

03/31/2024 3. Termination Date: Contract term: 89 days 4. Type of contract: Contract

Contract description: Consulting/Marketing

5. Purpose of contract:

This is a new service agreement under statewide contract 99SWC-NV-23-17906 which provides consulting. marketing, and education services. This service agreement provides website maintenance for the HIV/AIDS program website.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$83.497.00

Other basis for payment: See Cost Schedule and Scope of Work

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Statewide procurement for Consulting, Marketing and Education Services in support of End HIV Nevada campaign. DP Video Productions will oversee the maintenance of a website for the HIV/AIDS Program.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No subject matter experts on marketing or website maintenance work within this office requiring the use of the statewide contract.

9. Were quotes or proposals solicited?

Nο

Was the solicitation (RFP) done by the Purchasing Division?

No

Contract #: 28721 Page 1 of 2 a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Statewide procurement through state purchasing solicitation # 99SWC-S2340; Statewide contract #99SWC-NV23-17906.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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** 01/05/2024 14:37:52 PM dcastro **Division Approval** dcastro 01/05/2024 14:37:54 PM Department Approval 01/05/2024 14:37:56 PM dcastro Contract Manager Approval dcastro 01/05/2024 14:38:00 PM **Budget Analyst Approval** cdavis 02/01/2024 12:50:15 PM



# 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: January 3, 2024

TO: Kitty DeSocio, ASO IV

Division of Public and Behavioral Health

THROUGH: Julia Peek, Deputy Administrator

**Community Health Services** 

FROM: Tory Johnson, Health Program Manager II

Office of HIV

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL – DP Video Productions, SA #18310

This memorandum requests that the following Service Agreement be approved for a retroactive start.

The following information is required:

- Name of Provider: DP Video Productions
- Services to be provided: Statewide procurement for consulting, marketing, and education services.
- Funding source and expenditure category: BA #3215 CAT 24, Sub Org 01, Function Code 1000, Grant
- Requested start date of work: January 1, 2024
- Expected execution date of agreement: March 31, 2024
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - Due to the previous DPBH Master Services Agreement not being continued, which resulted in state purchasing driven procurement and shorten the length of them for the program to work with the vendor, required a stop-gap contractual document. Original timeframe to work with vendor is April 1 March 31.
    - Discussions with the vendor began shortly before Thanksgiving break. A scope of work and budget was provided. Program Manager began the internal process of requesting SA # and putting together the SA.
    - Between submission of the SA on December 9, 2023, until December 26, 2023, there were revisions requested by DPBH Contract Unit, which required Program Manager to work with the vendor to complete. Also, it should be noted that the Program Manager was on annual leave, as well as the vendor was on vacation leave during the Christmas period.
  - O Describe the impact to the program/services if this work is not started prior to the execution of the agreement: The program's external website would no longer be available which is where a lot of the program's information is centrally located for clients and other interested parties.
  - Explain how the program/bureau will prevent future retroactive requests: Continued work will happen during the normal grant period of April 1 March 31 and a stop-gap agreement would no longer be required.

If you have any questions, please contact Tory Johnson at (702) 486-0767 or tojohnson@health.nv.gov.

cc: Contract Unit

Division of Public and Behavioral Health

For Board Use Only 02/02/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28675

Legal Entity

KPS3 INC

Name:

Agency Name:

**DHHS - PUBLIC AND BEHAVIORAL** 

Contractor Name:

**KPS3 INC** 

**HEALTH** 

Agency Code:

406

Address:

**500 RYLAND ST STE 300** 

Appropriation Unit: 3219-16

City/State/Zip

RENO, NV 89502-1662

Is budget authority available?:

Yes

If "No" please explain: Not Applicable

Contact/Phone:

**NV Business ID:** 

775/686-7439 PUR0004720

Vendor No.:

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 Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #:

SA 18314

Contract start date:

X

a. Effective upon Board of

No or b. other effective date

03/2024

02/02/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

If "Yes", please explain

Not Applicable

07/31/2024

3. Termination Date: Contract term:

179 days

4. Type of contract:

Contract

Contract description:

**KPS3 Integration** 

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 integration services of new content to the Office of State Epidemiology website.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$27,725.00

Payment for services will be made at the rate of \$150.00 per hour

Other basis for payment: Payments based on deliverables and cost schedule.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

KPS3 will integrate up to 20 pages of the Office of Public Health Investigations and Epidemiology (OPHIE) content to the existing Office of State Epidemiology (OSE) website. OPHIE content will be integrated into existing OSE design components.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

KPS3 will integrate up to 20 pages of the Office of Public Health Investigations and Epidemiology (OPHIE) content to the existing Office of State Epidemiology (OSE) website. OPHIE content will be integrated into existing OSE design components.

Contractor: KPS3 Inc.

Statewide Contract #: MSA 99SWC-S2340

9. Were quotes or proposals solicited?

No No

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

c. Why was this contractor chosen in preference to other?

Contractor: KPS3 Inc.

Statewide Contract #: MSA 99SWC-S2340

d. Last bid date: 11/22/2023 Anticipated re-bid date: 11/22/2027

10. a. Does the contract contain any IT components?

No No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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
 01/08/2024 11:54:25 AM

 Division Approval
 ijanssen
 01/08/2024 11:54:30 AM

 Department Approval
 ijanssen
 01/08/2024 11:54:41 AM

 Contract Manager Approval
 ijanssen
 01/08/2024 11:54:47 AM

 Budget Analyst Approval
 cdavis
 02/02/2024 12:39:18 PM

For Board Use Only 02/12/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28551

Renown Medical School, Associates Legal Entity

Name: North, Inc.

**DHHS - PUBLIC AND BEHAVIORAL** Agency Name: **HEALTH** 

Contractor Name:

Renown Medical School, Associates

Date:

North, Inc.

Agency Code: 406 Address: Renown Medical School

1155 Mill Street, #N14

Appropriation Unit: 3219-14 Yes

Is budget authority

available?:

City/State/Zip

**RENO, NV 89502** 

If "No" please explain: Not Applicable Contact/Phone: Kim Pearson 772-982-6508

> Vendor No.: T80991321

**NV Business ID:** NV19971230247

2024-2026 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 % Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: C 18272

Contract start date:

X

a. Effective upon Board of No or b. other effective date 01/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Contractual negotiations to establish a new contract replacing previous contract C 17922 started 10/12/23. Vendor modifications of SOW were not returned for review until 10/31/23.

12/31/2025 3. Termination Date: Contract term: 2 years 4. Type of contract: Contract

Contract description: **Medical Consultation** 

5. Purpose of contract:

This is a new contract for to provide ongoing medical consultation on tuberculosis (TB) disease and infection to the Community Health Services, Nevada Health District, and Carson City Health and Human Services TB Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$14,784.00

Payment for services will be made at the rate of \$616.00 per month

#### II. JUSTIFICATION

7. What conditions require that this work be done?

CDC grant, public health measures regarding M.tuberculosis and Nevada Administrative Code 441A.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The medical consultation requires a licensed physician with a specialty in Infectious Diseases and subspecialty in Tuberculosis management.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This is the only vendor that provides the expertise in medical TB disease subspecialty diagnosis and treatment TB is a highly specialized and difficult subspecialty to provide. Vendor is the only recognized expert in this field within the geographic area.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

\$50,000?

No

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 DPBH contract #C25555 in good standing.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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 12/07/2023 16:15:20 PM **Budget Account Approval** ijanssen **Division Approval** 12/07/2023 16:15:22 PM ijanssen Department Approval 12/07/2023 16:15:25 PM ijanssen 02/01/2024 14:59:41 PM Contract Manager Approval ijanssen **Budget Analyst Approval** cdavis 02/12/2024 14:07:22 PM Joe Lombardo *Governor* 

Richard Whitley, MS *Director* 



# DEPARTMENT OF HEALTH AND HUMAN SERVICES





Cody Phinney, MPH *Administrator* 

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

### **MEMORANDUM**

DATE: November 27, 2023

TO: Kitty DeSocio, ASO IV

Division of Public and Behavioral Health (DPBH)

THROUGH: Kagan Griffin, Operations Manager

Office of State Epidemiology (OSE)

FROM: Susan McElhany, Tuberculosis Program Manager S W

DPBH OSE Tuberculosis Program

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL Renown Medical School Associates North, Inc. (RMSAN).

Contract Number C 18272; CETS Number 28551

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Contractor: Renown Medical School Associates North, Inc.
- Services to be provided: Tuberculosis disease and latent infection medical consultation for DPBH TB and local health authorities serving all counties in Nevada, excluding Clark and Washoe.
- Funding source and expenditure category: BA# 3219- CAT 14; Grant- Centers for Disease Control and Prevention Tuberculosis Elimination, Grant Number NU52PS910224.
- Requested start date of work: January 1, 2024
- Expected execution date of agreement: February 2024
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - Contractual negotiations to establish a new contract replacing previous contract C 17922 started 10/12/23.
    - RMSAN worked with the medical consultant provider to confirm scope of work and returned approval 10/31/23.
    - Review within OSE and then uploaded to DPBH Contract Unit 11/14.
  - O Describe the impact to the program/services if this work is not started prior to the execution of the agreement: Delaying the start of this contract for TB-related medical consultation creates delays in the diagnosis and treatment of TB disease and TB infection for the counties of Nevada, excluding Clark and Washoe Counties. TB disease requires rapid identification and treatment due to its contagious nature; delaying these services poses a potential public health concern.
  - Explain how the program/bureau will prevent future retroactive requests: The OSE TB Program understands the need to initiate the negotiation process as soon as reasonably possible and obtain the involved contractor's review of budget and scope of work promptly, as well as keeping mindfulness to the BOE due dates.

If you have any questions, please contact Susan McElhany, DPBH OSE TB at (775) 431-9045 or smcelhany@health.nv.gov.



# 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: January 29, 2024

TO: Crystal Novotny, Budget Officer Governor's Finance Office

FROM: Cody L. Phinney, Administrator

Division of Public and Behavioral Health

SUBJECT: Authorization for Using Agency to purchase pursuant NRS 333.390 Renown Medical School

Association North Inc. CETS #28551 Contract C#18272

The Division of Public and Behavioral Health's Office of State Epidemiology recently negotiated the contract CETS# 28551, Contract # C18272 with Renown Medical School Associates North, Inc (RMSAN Inc.) for the public health professional service of medical consultation for infectious tuberculosis (TB) disease and its related condition of latent TB infection. Every effort has been made to secure competitive bidding to the extent practicable.

The unique qualifications of the TB medical consultation service, however, make solicitation of competition impracticable. Expertise in medical TB disease diagnosis and treatment is a difficult subspecialty of infectious disease. The northern part of Nevada has very few medical specialists in infectious disease, and none recognized with a subspecialty in TB except for Dr. Krasner with RMSAN Inc. Throughout his career, Dr. Krasner historically served or partnered with public health programs to provide TB medical services. Dr. Krasner has provided TB medical consultation for northern Nevada via a contract with the Division of Public and Behavioral Health TB Program since 2018. Dr. Krasner understands the needs of public health programs, particularly in TB disease. Additionally, misrepresentation of availability to provide consultation and potential incompetent service delivery are risked through solicitation processes.

Cody L. Phinney,
DPBH Administrator

cc: Contract Unit

Division of Public and Behavioral Health

For Board Use Only 02/02/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28702

Legal Entity

Public Health Supportive Services

Date:

Name:

**DHHS - PUBLIC AND BEHAVIORAL** Agency Name:

Contractor Name: Public Health Supportive Services

Agency Code:

**HEALTH** 406

Address:

Appropriation Unit: 3234-10

Is budget authority

Yes

City/State/Zip

Reno, NV 89521

available?:

X

If "No" please explain: Not Applicable

Contact/Phone:

702-883-5782

Vendor No.:

**NV Business ID:** NV20212199459

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 Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: SA18320

Contract start date:

a. Effective upon Board of

No or b. other effective date 02/02/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

11/30/2024 3. Termination Date: Contract term: 302 days

4. Type of contract:

Contract

Contract description:

**Project Management** 

5. Purpose of contract:

This is a new service agreement under statewide contract 99SWC-NV23-17889 which provides consulting, marketing, and education services. This service agreement provides consulting services to support required activities under the Data Modernization Initiative project.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$50,450.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Under the �OE22-2203 Strengthening U.S. Public Health Infrastructure, Workforce, and Data Systems�, the intended outcomes for Component A, Strategy A3: Data Modernization include a more modern and efficient data environment, increased data interoperability, and increased availability of public health data. As such, the Division of Public and Behavioral Health (DPBH) has requested the assistance of Public Health Supportive Services LLC (PH-SS) in facilitating the development and oversight of the DMI Advisory Committee and key steps in DMI implementation in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources or expertise to perform this work

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation Waiver: Professional Service (As defined in NAC 333.150)
- c. Why was this contractor chosen in preference to other?

Pursuant to RFP #99SWC-S2340, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

No

d. Last bid date: 04/17/2023 Anticipated re-bid date: 04/01/2027

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

User Signature Date Approval Level **Budget Account Approval** 01/17/2024 07:13:18 AM dcastro **Division Approval** dcastro 01/17/2024 07:13:20 AM Department Approval dcastro 01/17/2024 07:13:24 AM 01/17/2024 07:13:27 AM Contract Manager Approval dcastro **Budget Analyst Approval** cdavis 02/02/2024 07:55:09 AM

For Board Use Only 01/18/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28686

Legal Entity

DP VIDEO PRODUCTIONS, LLC

Date:

Name:

**DHHS - WELFARE AND** Agency Name: SUPPORTIVE SERVICES

Contractor Name: DP VIDEO PRODUCTIONS, LLC

Agency Code:

Address:

6984 SMILING CLOUD AVE

Appropriation Unit: 3228-42

Is budget authority

Yes

City/State/Zip

**HENDERSON, NV 89011-5013** 

available?:

If "No" please explain: Not Applicable

Contact/Phone:

EMIRE STITT 702/468-9901

Vendor No.:

T29019963A

**NV Business ID:** 

NV20041136819

To what State Fiscal Year(s) will the contract be charged?

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 Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 407

Contract start date:

X

a. Effective upon Board of

No

or b. other effective date

02/2024

01/01/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

If "Yes", please explain

The State Purchasing Division issued All State Agency Memo on November 28, 2023, Agencies currently engaged in services under contracts from previous solicitation 40DHHS-S30 (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. The division currently has a work order with NPHF and due to the timing of the released memo (November 28, 2023) our agency missed the deadline as specified in the memo.

3. Termination Date: 12/31/2024

Contract term: 1 year

Other (include description): Service Agreement Via Statewide Contract #99SWC-NV23-4. Type of contract:

17906

**SNAP Ed Website** Contract description:

5. Purpose of contract:

This is a new service agreement under statewide contract ##99SWC-NV23-17906, which provides maintenance to websites. This service agreement provides ongoing maintenance of the existing Supplemental Nutrition Assistance Program Education website which reaches targeted demographics and promote healthy eating at the individual, organizational, and community level.

#### 6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$46,500.00 Other basis for payment: As invoiced by the Contractor and approved by the State.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The Department of Health and Human Services, Division of Welfare and Supportive Services receives Federal funding from the USDA Food and Nutrition Services to implement educational programming for the Supplemental Nutrition Assistance Program (SNAP-Ed) in accordance with federal and state regulations and guidance. Ongoing maintenance of the existing SNAP-Ed website to reach targeted demographics in urban, rural and frontier Nevada about the availability of SNAP-Ed Programs is a requirement of this program.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the resources or expertise to provide this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Social Entrepreneurs, Inc.

Nevada Public Health Foundation Public health Support Services

b. Soliciation 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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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:

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:

Tonya Stevens, Chief, Eligibility & Payments Unit Ph: 775-684-0553

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

Budget Account Approval cbuscay 12/27/2023 13:43:38 PM
Division Approval cbuscay 12/27/2023 13:43:40 PM
Department Approval rthomps1 12/28/2023 10:53:47 AM

Contract #: 28686 Page 2 of 3 **52** 

Contract Manager Approval Budget Analyst Approval mpomerle afrantz 12/28/2023 15:46:36 PM 01/18/2024 11:38:44 AM

For Board Use Only 01/18/2024

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: 28684

Legal Entity NEVADA PUBLIC HEALTH

Name: FOUNDATION, INC.

**DHHS - WELFARE AND** Contractor Name: **NEVADA PUBLIC HEALTH** Agency Name: SUPPORTIVE SERVICES

FOUNDATION, INC.

**FOUNDATION INC/STE 10** Agency Code: Address:

3476 EXECUTIVE POINTE WAY Appropriation Unit: 3230-49

Is budget authority Yes City/State/Zip **CARSON CITY, NV 89706-7955** 

available?:

If "No" please explain: Not Applicable Contact/Phone: NATALIE GAUTEREAUX 775-884-0392

> Vendor No.: T81018059

NV Business ID: NV19961104052

2024 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 0.00 % Fees Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 407

Contract start date:

X

 Effective upon Board of No or b. other effective date 01/01/2024

Examiner's approval?

Anticipated BOE meeting date 01/2024

Retroactive?

If "Yes", please explain

The Purchasing issued All State Agency Memo on November 28, 2023, Agencies currently engaged in services under contracts from previous solicitation 40DHHS-S30 (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. The division currently has a work order with NPHF and due to the timing of the released memo (November 28, 2023) our agency missed the deadline as specified in the memo.

3. Termination Date: 06/30/2024 Contract term: 180 days

Other (include description): Service Agreement via Statewide Contract 99SWC-NV23-17896 4. Type of contract:

Contract description: **STARS** 

5. Purpose of contract:

This is a new service agreement under statewide contract ##99SWC-NV23-17896, which provides technical education and assistance to professionals. This service agreement provides education and assistance to police, prosecutors, judges, and service providers to increase awareness of statutory rape to better assist victims.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$98,950.00 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?

Ongoing need for public awareness and community building regarding the Supporting Teens Achieving Real-Life Success (STARS) program development and administration of training on sexual assault, sexual harassment, domestic violence, and stalking for case workers, TANF personnel, and other agency personnel, with the intended outcome of prevention as well as the notification of assistance made available by the State to survivors of sexual assault, sexual harassment, domestic violence, and stalking to increase engagement with resources.

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?

Was the solicitation (RFP) done by the Purchasing

Yes Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Comagien Health

Social Entrepreneurs, Inc. Public Health Support Services

b. Soliciation 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.

04/17/2023 d. Last bid date: 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

No

Yes

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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)?

18. 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** 12/28/2023 14:29:13 PM cbuscay **Division Approval** 12/28/2023 14:29:16 PM cbuscay Department Approval rthomps1 12/29/2023 10:38:17 AM Contract Manager Approval mpomerle 12/29/2023 11:10:25 AM **Budget Analyst Approval** afrantz 01/18/2024 14:11:13 PM

For Board Use Only Date: 02/09/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 23176 4 Amendment

Number:

Legal Entity Board of Regents, UNR School of Social

Name: Work

**DHHS - DIVISION OF CHILD AND** Agency Name: Contractor Name: Board of Regents, UNR School of **FAMILY SERVICES** 

Social Work

Agency Code: 409 Address: Mail Stop 090

Appropriation Unit: 3145-10

Is budget authority No City/State/Zip Reno, NV 89557-0242

available?:

If "No" please explain: Approval of this contract Contact/Phone: Robin Wiseman 775-682-7412

amendment is contingent upon approval of SFY24 work program #C66311 & SFY25 work program #C66312.

> Vendor No.: D35000816

**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.

Fees 0.00 % X General Funds 45.00 % X 55.00 % 0.00 % Federal Funds Bonds Highway Funds 0.00 % Other funding 0.00 %

2. Contract start date:

a. Effective upon Board of No or b. other effective date 01/01/2021

Examiner's approval?

Anticipated BOE meeting date 02/2024

06/30/2026

Retroactive? Yes

If "Yes", please explain

This retroactive adjustment accounts for the impact of university employee COLA adjustments.

3. Previously Approved Termination Date:

Contract term: 5 years and 180 days

4. Type of contract: **Interlocal Agreement Training Services** Contract description:

5. Purpose of contract:

This is the fourth 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 \$5,080,987 to \$5,095,008 and adjusts the deliverables budget to remove unused prior year contract authority, fund university staff cost of living adjustments, and add Families First Act transition and prevention curriculum and funding. This contract is contingent upon IFC approval of work program C66311 for fiscal year 2024 and work program C66312 for fiscal year 2025.

#### 6. CONTRACT AMENDMENT

amount:

		rans \$	Into Accum \$	Action Accum \$ Agenda
1.	The max amount of the original contract:	\$2,162,700.00	\$2,162,700.00	\$2,162,700.00 Yes - Action
	a. Amendment 1:	\$130,069.00	\$130,069.00	\$130,069.00 Yes - Action
	b. Amendment 2:	\$0.00	\$0.00	\$0.00 No
	c. Amendment 3:	\$2,788,218.00	\$2,788,218.00	\$2,788,218.00 Yes - Action
2.	Amount of current amendment (#4):	\$14,021.00	\$14,021.00	\$14,021.00 Yes - Info
3.	New maximum contract	\$5,095,008.00		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Federal and State requirements for training of child welfare staff who serve children that have been abused neglected or abandoned.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have an in-house training program or the capacity to conduct training to child welfare staff that would meet the federal/state requirements of initial and ongoing training.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over No

\$50,000?

#### 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

UNR's Indirect Rate for this NPT Contract is 26% Federal & 8% General Fund

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

University of Nevada, Reno.

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The contractor has been under contract with the Division and other agencies. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date

 Budget Account Approval
 rmayhall
 11/28/2023 17:27:47 PM

 Division Approval
 hbugg
 12/12/2023 11:57:02 AM

 Department Approval
 mwillia9
 12/28/2023 16:37:29 PM

Contract #: 23176 Page 2 of 3 **54** 

Contract Manager Approval Budget Analyst Approval sknigge pokeefe 12/28/2023 16:43:59 PM 02/09/2024 07:48:28 AM



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Marla McDade Williams, MPA **Administrator** 

**DIVISION OF CHILD AND FAMILY SERVICES** Helping people. It's who we are and what we do.

#### **MEMORANDUM**

TO: Philene O'Keefe, Executive Branch Budget Officer 1, Governor's Finance Office

THROUGH:

Heather Bugg, ASO IV Heather Bugg
Maria Janos, Social Services Chief 3 Maria Janos FROM:

DATE: November 28, 2023

Retroactive Contract Request, CETS #23176 - University of Nevada, Reno (UNR) Partnership for SUBJECT:

Training Amendment #4

A retroactive contract amendment is being requested between the Division of Child and Family Services (DCFS) and UNR 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.

For Board Use Only 01/29/2024

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: 27886 Amendment 1

Number:

Legal Entity Nevada P.E.P., Inc.

Name:

Agency Name: DHHS - DIVISION OF CHILD AND Contractor Name: Nevada P.E.P., Inc.

FAMILY SERVICES

Agency Code: 409 Address: 7211 W. Charleston Blvd.

Appropriation Unit: 3145-14

Is budget authority Yes City/State/Zip Las Vegas, NV 89117

available?:

If "No" please explain: Not Applicable Contact/Phone: Karen Taycher 702-388-8899

Vendor No.: T80975409

NV Business ID: NV19931063169

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 %

Contract start date:

a. Effective upon Board of No or b. other effective date 08/21/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

#### **Not Applicable**

3. Previously Approved 06/30/2025

Termination Date:

Contract term: 1 year and 314 days

4. Type of contract: Contract

Contract description: Consortia Support

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing support services for the Washoe County Children's Mental Health Consortium. This amendment increases the contract maximum from \$6,588 to \$10,480 and changes the scope of work to add the Rural Children's Mental Health Consortium.

#### 6. CONTRACT AMENDMENT

		rans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$6,588.00	\$6,588.00	\$6,588.00	No
2.	Amount of current amendment (#1):	\$3,892.00	\$10,480.00	\$10,480.00	Yes - Info
3.	New maximum contract	\$10,480.00			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The work to be contracted by the Washoe County Children's Mental Health Consortium is in NRS 433b.333. The Consortium needs professional support in countywide data collection, data analysis, and report/document writing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is a shortage of hours and positions to accomplish this work in order to directly support the chair of the Consortium. The Consortium is required to meet legislative mandates each year and this contract will help support their efforts.

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):

Marathon Staffing NV PEP Inc., Manpower

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

The selected vendor was the lowest cost to provide the services.

d. Last bid date: 05/10/2023 Anticipated re-bid date: 04/21/2025

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

8%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has provided services to the Division under contract and grants since 1999. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date
Budget Account Approval bkizer 01/22/2024 11:31:23 AM
Division Approval dfrohlic 01/25/2024 11:24:15 AM
Department Approval mwillia9 01/25/2024 12:49:20 PM

Contract Manager Approval sknigge 01/25/2024 12:55:40 PM Budget Analyst Approval pokeefe 01/29/2024 13:11:44 PM

For Board Use Only 01/29/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28289

Legal Entity

Eide Bailly LLP

Name:

Agency Name:

**DHHS - DIVISION OF CHILD AND** 

Contractor Name: Eide Bailly LLP

Agency Code:

**FAMILY SERVICES** 409

Address:

5441 Kietzke Lane, Ste. 150

Appropriation Unit: 3146-13

Is budget authority

Yes

City/State/Zip

Reno, NV 89511

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Kurt Schlicker 775-689-9234

Vendor No.: NV Business ID: T29026023B

2024

NV20201801760

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 % Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Contract start date:

X

a. Effective upon Board of

No or b. other effective date 01/29/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

#### Not Applicable

3. Termination Date: 06/30/2024 Contract term: 152 days 4. Type of contract: Contract

Contract description:

**Grants Mgmt Training** 

5. Purpose of contract:

This is a new contract to provide Technical Assistance consulting and Subrecipient Monitoring Training for Grants Management staff to ensure compliance with federal requirements.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$15,100.00

Other basis for payment: Per Attachment AA - Contractor's Quote

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Grant compliance training is required to ensure DCFS staff are adhering to the Uniform Guidance which states the purpose of subrecipient monitoring is to ensure that subrecipients: (1) use grant funds for authorized purposes; (2) comply with the federal program and grant requirements, laws and regulations; and (3) achieve subaward performance goals.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

DCFS employees do not have the resources to research Uniform Guidance and ensure current practice aligns with federal requirements. In addition, expert subrecipient monitoring training is needed to develop new staff. State employees in other agencies lack the required level of specialized knowledge and expertise of complex, DCFS-specific grants.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Nο

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation Waiver: Professional Service (As defined in NAC 333.150)
- c. Why was this contractor chosen in preference to other?

Eide Bailly is independent of the State of Nevada as defined in the American Institute of Certified Public Accountants (AICPA) Professional standards and the Government Accountability Office�s Government Auditing Standards. Providing these training services will not impair that independence. Eide Bailly is contracted to perform the annual single audits for the State of Nevada and has in depth knowledge about federal requirements.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Nο

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 been under contract with the Controller's Office for several years and services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLP

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kelsey McCann Navarro, Social Services Chief III Ph: (775) 684-4431

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	11/27/2023 14:50:46 PM
Division Approval	dfrohlic	01/17/2024 10:45:20 AM
Department Approval	mwillia9	01/23/2024 16:21:38 PM
Contract Manager Approval	sknigge	01/24/2024 12:20:27 PM
Budget Analyst Approval	pokeefe	01/29/2024 11:55:21 AM
	•	

For Board Use Only
Date: 02/06/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 27773 Amendment 1

Number:

Legal Entity UNIVERSITY OF CONNECTICUT

Name:

Agency Name: DHHS - DIVISION OF CHILD AND Contractor Name: UNIVERSITY OF CONNECTICUT

FAMILY SERVICES

Agency Code: 409 Address: OFFICE OF THE BURSAR

Appropriation Unit: 3146-65 438 Whitney Road Ext, Uit 1133

Is budget authority Yes City/State/Zip STORRS, CT 06269-1133

available?:

If "No" please explain: Not Applicable Contact/Phone: Tony F. Bonadio 860-486-3622

Vendor No.: T32015334

NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? 2024-2025

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

 General Funds
 0.00 %
 Fees
 0.00 %

 Federal Funds
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Contract start date:

a. Effective upon Board of No or b. other effective date 07/01/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

#### **Not Applicable**

3. Previously Approved 06/30/2024

Termination Date:

Contract term: 1 year and 91 days

4. Type of contract: Interlocal Agreement
Contract description: FFPSA Assistance

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing consultation, planning, and implementation of the Family First Prevention Services Act. This amendment extends the termination date from June 30, 2024 to September 29, 2024, increases the maximum amount from \$112,798 to \$191,298, and updates the scope of work due to an ongoing need for these services.

#### 6. CONTRACT AMENDMENT

		Trans \$	Into Accum \$	Action Accum \$ Agenda
1.	The max amount of the original contract:	\$112,798.00	\$112,798.00	\$112,798.00 Yes - Action
2.	Amount of current amendment (#1):	\$78,500.00	\$78,500.00	\$78,500.00 Yes - Info
3.	New maximum contract amount:	\$191,298.00		
	and/or the termination date of the original contract has changed to:	09/29/2024		

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The provisions of the Family First Prevention Services Act (FFPSA) require significant changes to the current status of the Nevada child welfare system. The use of professional contractors for the continued implementation of FFPSA is common practice nationwide, and the proposed contractors work closely with the federal government and multiple other states on the particular initiative, and are therefore well equipped to assist 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 knowledge base and experience in this type of large scale implementation.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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. Services are satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

- 16. Not Applicable
- Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 rmille8
 01/26/2024 07:26:50 AM

 Division Approval
 dfrohlic
 01/31/2024 09:14:08 AM

 Department Approval
 mwillia9
 02/05/2024 15:27:58 PM

 Contract Manager Approval
 sknigge
 02/05/2024 15:37:56 PM

Contract #: 27773 Page 2 of 3 **57** 

For Board Use Only 01/23/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28694

Legal Entity

ADT Commercial, LLC

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name:

Contractor Name: ADT Commercial, LLC

Agency Code:

**FAMILY SERVICES** 

Address:

2441 Western Ave

Appropriation Unit: 3148-95

Is budget authority

Yes

City/State/Zip

LAS VEGAS, NV 89102

available?:

If "No" please explain: Not Applicable

409

Contact/Phone:

Scott Wulforst 775-287-2110

Vendor No.:

T29047302

**NV Business ID:** 

NV20111234098

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 Federal Funds

100.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/23/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

06/30/2025

Contract term:

1 year and 158 days

4. Type of contract:

Other (include description): Service Agreement

Contract description:

**Fire Panel Replace** 

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-16866 which provides security and fire protection services. This service agreement will replace a fire panel at the Summit View Youth Center.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$98,000.00

Payment for services will be made at the rate of \$98,000.00 per flat fee upon project completion

### II. JUSTIFICATION

7. What conditions require that this work be done?

To maintain state owned facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the skills or certification required to facilitate the replacement of a fire panel.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Convergint Technologies, LLC Summit Fire Security, LLC

Intraworks, Inc.

ADT Commercial, LLC

58 Contract #: 28694 Page 1 of 2

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

The selected vendor is contracted through a statewide MSA Contract.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

INO

b. Is the contract part of an IT investment project over

\$50,000?

No

# III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This contractor is contracted through the NASPO Valuepoint contract and has been on a statewide MSA contract through State Purchasing Division for many years.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Corrina Church, ASO I Ph: 702-

20. Contract Status:

Contract Approvals:

User Signature Date Approval Level **Budget Account Approval** 01/09/2024 13:04:14 PM cchurc2 **Division Approval** dfrohlic 01/16/2024 14:43:18 PM Department Approval mwillia9 01/16/2024 19:37:12 PM 01/17/2024 08:22:37 AM Contract Manager Approval sknigge **Budget Analyst Approval** pokeefe 01/23/2024 09:28:39 AM

For Board Use Only 01/24/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28599

Legal Entity

Nevada Mobile Imaging, Inc.

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name:

Contractor Name:

Nevada Mobile Imaging, Inc.

Agency Code: 409

**FAMILY SERVICES** 

Address: 2490 Professional Court

Ste. 110

Appropriation Unit: 3148-27 Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89128

available?:

If "No" please explain: Not Applicable

Roger Faselt 866-508-4780

Contact/Phone:

T29048176

**NV Business ID:** 

NV20101618203

To what State Fiscal Year(s) will the contract be charged?

2024-2028

Vendor No.:

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

Federal Funds

100.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

General Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 02/01/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date: Contract term:

01/31/2028 4 years

4. Type of contract: Contract description: Contract **Medical Imaging** 

5. Purpose of contract:

This is a new contract to provide ongoing x-ray, EKG, and ultrasound services including interpretation as ordered by a consulting physician.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$24,383.03

Other basis for payment: Contract amount based on \$4,714.29 annual average. Amount includes 20% increase for YR 1 and 5% annually thereafter.

# II. JUSTIFICATION

7. What conditions require that this work be done?

Theses services are necessary to meet the community standard for medical diagnostic and imaging services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division does not have the equipment nor does it have staff positions budgeted with the qualifications necessary to perform these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Xray@profession-nursing.com Direct Mobile Imaging Quality Medical Imaging

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

The selected vendor was selected due to their competitive pricing and services offered.

d. Last bid date: 10/17/2023 Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

10/18/2027

No

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has been under contract with the Division since 2016. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Adrian Ocan, Director of Nursing Services Ph: 702-668-4789 Corrina Church, Admin Services Officer II Ph: 702-668-4757

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 12/07/2023 08:39:59 AM **Budget Account Approval** dander16 **Division Approval** dfrohlic 01/16/2024 09:00:13 AM Department Approval mwillia9 01/22/2024 11:53:27 AM Contract Manager Approval 01/22/2024 11:59:13 AM sknigge 01/24/2024 07:34:32 AM **Budget Analyst Approval** pokeefe

For Board Use Only 02/12/2024

Date:

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28818

Legal Entity

**DBA Blais Psycholical Care** 

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name: **FAMILY SERVICES** 

Contractor Name: Paulette Blais, MA

Agency Code: 409

Address:

235 Gompers Ave.

Appropriation Unit: 3229-13

Is budget authority

Yes

City/State/Zip

Indiana, PA 15701

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Paulette Blais 724-349-9277

Vendor No.:

T29048133

**NV Business ID:** 

Not Applicable

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 79.00 % X Federal Funds

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

21.00 % 0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 02/12/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

### Not Applicable

3. Termination Date: 01/31/2026

Contract term: 1 year and 354 days

4. Type of contract: Contract

**Out Of State Visits** Contract description:

5. Purpose of contract:

This is a new contract is to provide federally mandated monthly visits for children that are placed out of the State of Nevada in a residential facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$12,500.00

Payment for services will be made at the rate of \$500.00 per Month

Other basis for payment: \$500 allowance for reimbursement of mileage over 60 miles at GSA rates.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

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's state 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.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state would pay more in costs to have a caseworker miss two or more days of work with no one to cover their caseload, pay per diem, hotel, rental car and plane flight to visit children placed in Pennsylvania for an hour or two of visitation.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This was the only vendor to respond regarding providing in person visitation to a youth in Residential Treatment Facility in Pennsylvania

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

# III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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?

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?

b. If "No", please explain:

### Ms. Blais is an individual Psychiatrist doing business as Blais Psychological Care.

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?

If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

The contractor will be providing services solely out of state.

18. Not Applicable

19. Agency Field Contract Monitor:

Maria Hickey, SSPS3 Ph: (775) 684-1975

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date 01/29/2024 12:26:42 PM **Budget Account Approval** krober10

**Division Approval** dfrohlic 02/07/2024 08:54:47 AM Department Approval mwillia9 02/07/2024 10:08:48 AM Contract Manager Approval sknigge 02/07/2024 10:29:19 AM **Budget Analyst Approval** 02/12/2024 12:10:15 PM pokeefe

For Board Use Only 01/19/2024

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: 28465

Legal Entity

KD ELECTRIC

Name:

Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES

Contractor Name:

**KD ELECTRIC** 

Agency Code: 409

00

Address:

681 Watson Way

Appropriation Unit: 3281-95

Is budget authority

Yes

City/State/Zip

Sparks, NV 89431

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Greg Howard 775-762-5925

Vendor No.:

T32008709

NV Business ID:

2024

NV20151318054

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

 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

**No** or b. other effective date

03/2024

01/19/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 06/30/2024

Contract term: 162 days

4. Type of contract: Contract

Contract description: Light Replacement

5. Purpose of contract:

This is a new contract to provide for the replacement of exterior building, sidewalk and parking lot lighting.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$53.632.00

Payment for services will be made at the rate of \$18,000.00 per Upfront for Materials

Other basis for payment: \$35,362 upon completion of work; Due net 30 with 3% discount if paid within 15 days.

# II. JUSTIFICATION

7. What conditions require that this work be done?

This is a deferred maintenance project to ensure the safety of staff and clientele.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the experience needed to perform these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

**KD Electric** 

Solarmax LED Inc.

Pemica Inc.

**Brilled Lighting** 

Contract #: 28465 Page 1 of 2 **61** 

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #40DHHS-S2420, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

No

No

d. Last bid date: 07/10/2023 Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 been under contract with Public Works in 2020. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

res

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Imran Hyman, Admin Services Officer 2 Ph: 775-688-1636

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** ihyman 11/21/2023 11:49:30 AM **Division Approval** dfrohlic 01/08/2024 08:44:03 AM Department Approval mwillia9 01/08/2024 10:07:20 AM 01/08/2024 10:10:28 AM Contract Manager Approval sknigge **Budget Analyst Approval** pokeefe 01/19/2024 08:03:59 AM

For Board Use Only 01/18/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28615

Legal Entity

Sierra Nevada Construction, Inc.

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name: **FAMILY SERVICES** 

Contractor Name: Sierra Nevada Construction, Inc.

Date:

Agency Code: 409

Address:

2024

2055 E. Greg Street

Appropriation Unit: 3281-95

Is budget authority

Yes

City/State/Zip

**Sparks, NV 89431** 

available?:

Contact/Phone:

Alex Faust 775-355-0420

If "No" please explain: Not Applicable

Vendor No.:

PUR0003792

**NV Business ID:** 

NV19881009372

To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds Federal Funds

100.00 % 0.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/18/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2024

3. Termination Date: Contract term:

163 days

4. Type of contract:

**Contract** 

Contract description:

Parking Resurfacing

5. Purpose of contract:

This is a new contract to provide services to repair/reseal and slurry seal three parking lots.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$69.770.00 Payment for services will be made at the rate of \$69,770.00 per Entire Project

### II. JUSTIFICATION

7. What conditions require that this work be done?

The parking lots need to be repaired, resealed and restriped for the safety of clients and staff.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Division does not have employees with the expertise or equipment to complete this project.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Eagle One Construction** Cate Equipment Company Sierra Nevada Construction Inc.

A Affordable Striping b. Soliciation Waiver: Not Applicable

Contract #: 28615 Page 1 of 2 c. Why was this contractor chosen in preference to other?

Pursuant to RFP #40DHHS-S2524, 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:

10/03/2023

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

No

\$50,000?

## III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has been under contract with NDOT since 2006. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Imran Hyman, Admin Services Officer II Ph: 775-688-1636

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ihyman	12/06/2023 08:07:03 AM
Division Approval	dfrohlic	01/08/2024 10:12:42 AM
Department Approval	mwillia9	01/09/2024 12:47:36 PM
Contract Manager Approval	sknigge	01/09/2024 14:54:53 PM
Budget Analyst Approval	pokeefe	01/18/2024 14:30:05 PM

For Board Use Only Date: 02/01/2024

### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### I. DESCRIPTION OF CONTRACT

1 1. Contract Number: 25780 Amendment

Number:

Legal Entity GEN TECH OF NEVADA, INC.

Name:

**DHHS - DIVISION OF CHILD AND** Agency Name: Contractor Name: GEN TECH OF NEVADA, INC.

**FAMILY SERVICES** 

Agency Code: 409 Address: 4785 COPPER SAGE ST

Appropriation Unit: 3646-07

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89115-1896

available?:

If "No" please explain: Not Applicable Contact/Phone: Marissa Dowd 702/633-6400

> Vendor No.: PUR0003001A NV20001341759 **NV Business ID:**

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 55.00 % 0.00 % Federal Funds 45.00 % Bonds 0.00 % 0.00 % Highway Funds 0.00 % Other funding

Contract start date:

or b. other effective date 09/27/2022 a. Effective upon Board of No

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

# **Not Applicable**

3. Previously Approved 08/31/2026

Termination Date:

Contract term: 3 years and 339 days

4. Type of contract: Contract

Contract description: **Generator Services** 

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing maintenance services and emergency repairs on the generator. This amendment increases the contract maximum from \$12,572 to \$24,572 to include costs for emergency repairs.

# 6. CONTRACT AMENDMENT

		Trans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$12,572.00	\$12,572.00	\$12,572.00	Yes - Info
2.	Amount of current amendment (#1):	\$12,000.00	\$12,000.00	\$24,572.00	Yes - Info
3.	New maximum contract amount:	\$24,572.00			

### II. JUSTIFICATION

7. What conditions require that this work be done?

Desert Willow Treatment Center is a Joint Commission accredited hospital. As part of a Joint Commission standard, the facility is required to run annual generator tests to ensure the hospital has back-up resources in the event of a power failure. Additionally, these tests will help ensure that state equipment is running properly.

Explain why State employees in your agency or other State agencies are not able to do this work:

The Division does not have any staff 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):

Loftin Equipment Co.

Gen-Tech

W. W. Williams

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This vendor also services the adult generator and are familiar with the area and how important the generator is when it's needed.

d. Last bid date: 02/11/2022 Anticipated re-bid date: 12/17/2025

10. a. Does the contract contain any IT components? No No

b. Is the contract part of an IT investment project over

\$50,000?

# III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has been under contract with the Division since 2014. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date **Budget Account Approval** 01/18/2024 14:02:00 PM prassie1 **Division Approval** dfrohlic 01/23/2024 15:03:29 PM Department Approval mwillia9 01/29/2024 09:41:13 AM Contract Manager Approval 01/29/2024 11:24:41 AM sknigge **Budget Analyst Approval** pokeefe 02/01/2024 13:25:05 PM

For Board Use Only 02/08/2024

64

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28758

Legal Entity

THOMSON, JAMES F JR DBA

Date:

Name:

**ADJUTANT GENERAL & NATIONAL** Agency Name:

Contractor Name: THOMSON, JAMES F JR DBA

**GUARD** Agency Code:

431

AMERICAN SOUTHWEST ELECTRIC Address:

4485 RIVIERA RIDGE AVE

Appropriation Unit: 3650-24

Is budget authority

City/State/Zip

LAS VEGAS, NV 89115-1877

available?:

If "No" please explain: Not Applicable

Contact/Phone:

GABRIEL@ASELV.COM 702-643-2900

Vendor No.:

T29035625

**NV Business ID:** 

NV20101199025

2024-2027 To what State Fiscal Year(s) will the contract be charged?

0.00 %

Yes

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

Federal Funds 100.00 % Highway Funds 0.00 % Fees 0.00 % **Bonds** 0.00 %

Other funding 0.00 %

Agency Reference #: 431

General Funds

Contract start date:

X

a. Effective upon Board of

No or b. other effective date 02/08/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

Not Applicable

09/30/2026

3. Termination Date: Contract term:

2 years and 234 days

4. Type of contract:

Contract

Contract description:

**Henderson Armory** 

5. Purpose of contract:

This is a new contract to provide remodeling and renovation to the Henderson Armory for the Starbase Program for expansion of student classrooms.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$95.869.29

### II. JUSTIFICATION

7. What conditions require that this work be done?

The Starbase Program is expanding and the Henderson Armory is in need of renovation and remodeling to accommodate the increase student classes.

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

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

American Southwest Electric

- b. Soliciation Waiver: Not Applicable
- c. Why was this contractor chosen in preference to other?

Contract #: 28758 Page 1 of 2 American Southwest Electric was the only vendor to submit a bid and the cost fits the need what is desired of the project. 43ADG-S2657 was placed in NevadEPro and Quote ID 43ADG-VQ14774 was submitted.

d. Last bid date:

01/12/2024

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

# **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Office of the Military had two contracts that ended and one existing contract with this vendor. The one existing contract is 24491. They have provided good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

**Contract Approvals:** 

User Signature Date Approval Level **Budget Account Approval** csnido1 01/15/2024 11:44:06 AM **Division Approval** csnido1 01/15/2024 11:44:09 AM Department Approval ctyle1 02/01/2024 14:36:11 PM Contract Manager Approval csnido1 02/02/2024 08:26:13 AM **Budget Analyst Approval** twollan1 02/08/2024 12:16:22 PM

For Board Use Only 02/13/2024

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: 28710

Legal Entity

D & D Plumbing, INC.

Name:

Agency Name: **DEPARTMENT OF CORRECTIONS** 

Contractor Name:

D & D Plumbing, INC.

Address:

1655 Greg Court

Appropriation Unit: 3759-09

Is budget authority

Yes

City/State/Zip

**Sparks, NV 89431** 

available?:

Agency Code:

If "No" please explain: Not Applicable

440

Contact/Phone:

Waylon Lowery 775-358-2378

Vendor No.:

NV Business ID: NV19801005060

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 100.00 %

Federal Funds 0.00 %

Highway Funds 0.00 %

Bonds

0.00 % 0.00 %

0.00 %

2. Contract start date:

a. Effective upon Board of

No or b. other effective date

Other funding

07/01/2023

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

Yes

If "Yes", please explain

Work was already completed; this was deemed an emergency.

3. Termination Date: 06/30/2024
Contract term: 1 year
4. Type of contract: Contract

Contract description: LCC Retro D&D

5. Purpose of contract:

This is a new retroactive contract for work performed to repair boilers at LCC that was deemed an emergency.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$38,335.60

#### II. JUSTIFICATION

7. What conditions require that this work be done?

This was an emergency repair on the boilers at LCC.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are not any qualified staff to work on the boilers at LCC.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This was the only vendor willing and able to perform necessary repairs in short notice.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?b. Is the contract part of an IT investment project over \$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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** mschobe2 02/06/2024 07:47:20 AM **Division Approval** mmarkovi 02/06/2024 15:33:24 PM Department Approval mmarkovi 02/06/2024 16:03:29 PM Contract Manager Approval 02/06/2024 16:03:38 PM mmarkovi **Budget Analyst Approval** 02/13/2024 15:49:34 PM vyoungb

Joe Lombardo Governor

James E. Dzurenda Director

Nethanjah Breitenbach Warden



Lovelock Correctional Center 1200 Prison Road Lovelock, NV 89419

(775)977-5350

# **MEMORANDUM**

Date:

December 19, 2023

To:

Kristina Shea, Deputy Director Dr. Jacob Council, Administrator

Subject

After the fact payment to D & D Plumbing – Gas Leak

In July 2023, there were several events that lead to this repair and subsequent billing. There was an underground gas leak that was repaired by Savage and Son. After this leak was repaired, the boilers would not relight. D & D Plumbing was called out, with the on-call technician determining that the gas regulators on the boilers had been blown. Additional technicians were dispatched to LCC on Sunday, July 2, 2023, where they were able to get one of the boilers running by installing a regulator and moving gas valves from another boiler and replacing the gas pressure switches. Based on the D & D staff evaluation, there was a pressure spike in the natural gas line that blew the gas regulators, the gas valves on the boilers, and the gas pressure switches. D & D was unable to determine whether the spike was what also caused the leak.

D & D also suggested that Southwest Gas should be contacted regarding the spike in pressure. Southwest Gas was contacted and there was discussion regarding Southwest Gas paying for the replacement and repair of the boiler parts, to no avail.

Ultimately, D & D Plumbing completed the repair and are due payment. This repair could not have been avoided. There are not sufficient funds available within the Lovelock Correctional Center budget to facilitate this repair. We respectfully request this repair be paid for with Extraordinary Maintenance Funds.

Just Cornerie 12/29/22

Nethanjah Breitenbach, Warden Nevada Department of Corrections Lovelock Correctional Center

Attachment: D & D Plumbing Invoice

For Board Use Only 02/13/2024

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: 26560 Amendment Number: 2

Legal Entity

TERRITORY6

Name:

Agency Name: COMMISSION ON MINERAL Contractor Name: TERRITORY6

RESOURCE

Agency Code: 500 Address: 138 N. BRAND BLVD.

Appropriation Unit: 4219-39 SUITE 200, UNIT 145

Is budget authority Yes City/State/Zip GLENDALE, CA 91203

available?:

If "No" please explain: Not Applicable Contact/Phone: CHRIS LECLERC 920-912-8301

Vendor No.: T32012915 NV Business ID: NV20222532182

To what State Fiscal Year(s) will the contract be charged? 2023-2026

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % X Fees 100.00 % mining claim fees

Federal Funds 0.00 % Bonds 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 50COMR-S1934-RV

2. Contract start date:

a. Effective upon Board of No or b. other effective date 09/13/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved 03/31/2024

Termination Date:

Contract term: 3 years and 200 days

4. Type of contract: **Contract** 

Contract description: SOSA Campaign

5. Purpose of contract:

This is the second amendment to the original contract which provides digital marketing campaign services for the Abandoned Mine Land (AML) program. The purpose of this amendment is to extend the termination date from March 31, 2024 to March 31, 2026 and increase the maximum amount from \$125,490 to \$215,490 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:	\$120,000.00	\$120,000.00	\$120,000.00 Yes - Action
	a. Amendment 1:	\$5,490.00	\$5,490.00	\$5,490.00 No
2.	Amount of current amendment (#2):	\$90,000.00	\$95,490.00	\$95,490.00 Yes - Info
3.	New maximum contract amount:	\$215,490.00		
	and/or the termination date of the original contract has changed to:	03/31/2026		

### II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Division of Minerals is responsible for creating public awareness of the physical safety dangers of abandoned mines within Nevada. The division requires the services and expertise of a digital media and marketing firm to produce content for the Stay Out Stay Alive public safety campaign.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agency does not have the expertise or resources to perform this work.

9. Were quotes or proposals solicited?

Yes Yes

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Why was this vendor chosen in preference to others? Pursuant to RFP 50COMR-S1934 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:

03/18/2022

Anticipated re-bid date:

04/01/2024

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

Contract #: 26560 Page 2 of 3 **66** 

Budget Account Approval	vkneefel	01/17/2024 15:07:30 PM
Division Approval	ssands	01/23/2024 15:56:03 PM
Department Approval	ssands	01/23/2024 15:56:16 PM
Contract Manager Approval	ssands	02/13/2024 11:15:58 AM
Budget Analyst Approval	vyoungb	02/13/2024 15:55:40 PM

For Board Use Only 01/23/2024

**CONTRACT SUMMARY** 

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28760

Legal Entity BOARD OF REGENTS, NEVADA Name: SYSTEM OF HIGHER EDUCATION

SYSTEM OF HIGHER EDUCATION (NSHE) ON BEHALF OF THE

UNIVERSITY OF NEVADA, LAS VEGAS

Date:

Agency Name: DPS-HIGHWAY PATROL Contractor Name: BOARD OF REGENTS, NEVADA

SYSTEM OF HIGHER EDUCATION (NSHE) ON BEHALF OF THE UNIVERSITY OF NEVADA, LAS

**VEGAS** 

Agency Code: 651 Address: 4505 S. MARYLAND PKWY

Appropriation Unit: 4713-16

Is budget authority Yes City/State/Zip LAS VEGAS, NV 89154

available?:

If "No" please explain: Not Applicable Contact/Phone: Derek Lee 702-895-0247

Vendor No.: D35000813

NV Business ID: NV20161295653

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
 100.00 %
 Other funding
 0.00 %

2. Contract start date:

Χ

a. Effective upon Board of **No** or b. other effective date **01/23/2024** 

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: 12/31/2024 Contract term: 343 days

4. Type of contract: Interlocal Agreement
Contract description: UNLV Staffing Study

5. Purpose of contract:

This is a new interlocal agreement between the Nevada Highway Patrol and the University of Nevada Las Vegas to conduct a comprehensive staffing and resource allocation study.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$74,889.00

### II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Highway Patrol seeks to enhance its efficiency and effectiveness in traffic safety for the citizens and visitors of Nevada with this staffing study.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no State employees who can provide this service.

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Contract #: 28760 Page 1 of 2

Not Applicable

b. Soliciation 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?

b. Is the contract part of an IT investment project over

\$50,000?

No No

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain No

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "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?

If "Yes", please provide details of the litigation and facts supporting approval of the contract: No

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:

Zarazua, Rocio, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

**Budget Account Approval** iramo3 01/16/2024 13:22:22 PM thick2 01/17/2024 14:45:31 PM **Division Approval** Department Approval mcosenti 01/19/2024 09:16:36 AM Contract Manager Approval mcosenti 01/19/2024 09:16:42 AM **Budget Analyst Approval** khawkin1 01/23/2024 10:33:18 AM

For Board Use Only 02/02/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28826

Legal Entity

CARAHSOFT TECHNOLOGY, CORP

Date:

Name:

**DPS-TRAFFIC SAFETY** Agency Name: 658

Contractor Name:

CARAHSOFT TECHNOLOGY, CORP

Address:

11493 SUNSET HILLS RD

Appropriation Unit: 4687-41

Is budget authority

Yes

City/State/Zip

**RESTON, VA 20190-5230** 

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

**CAITLIN READER 571-662-3357** 

Vendor No.: PUR0004357 **NV Business ID:** NV20151127305

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 50.00 % MOTORCYCLE FEE REVENUE

Federal Funds 0.00 % **Bonds** 0.00 %

Highway Funds 0.00 % Other funding 50.00 % INTERLOCAL TRANSFER IN

Agency Reference #: AR2472

2. Contract start date:

Effective upon Board of

or b. other effective date No

02/02/2024

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

If "Yes", please explain

**Not Applicable** 

09/15/2026

No

3. Termination Date: Contract term:

2 years and 225 days

4. Type of contract:

Other (include description): SERVICE AGREEMENT

CARAHSOFT/QUALTRICS Contract description:

5. Purpose of contract:

This is a new service agreement under master service agreement 99SWC-NV21-7083 to provide access to a webbased survey creation platform for the purposes of data collection and analysis of the effectiveness of instructional programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$13.263.15 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?

Data collection and analysis is needed for instructional programs to ensure the effectiveness of the curriculum.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Services are contracted under a master statewide contract through State Purchasing.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: Not Applicable

68 Contract #: 28826 Page 1 of 2

c. Why was this contractor chosen in preference to other?

99SWC-NV21-7083, Solicitation # CH16012

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

# III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes agency has been verified as satisfactory:

Master Service Agreement with State Purchasing

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation 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)?

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Nick Nordyke, null Ph: null Justin McDonald, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** bhernan2 01/30/2024 11:33:39 AM **Division Approval** thick2 01/31/2024 10:02:26 AM **Department Approval** kdefe1 01/31/2024 15:07:53 PM Contract Manager Approval 01/31/2024 17:24:50 PM mcosenti **Budget Analyst Approval** khawkin1 02/02/2024 11:09:16 AM

68

For Board Use Only 01/30/2024

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: 24837 Amendment 1

Number:

Legal Entity SPEEDGOAT WILDLIFE SOLUTIONS,

Name: L

Agency Name: DEPARTMENT OF WILDLIFE Contractor Name: SPEEDGOAT WILDLIFE SOLUTIONS,

LLC

Agency Code: 702 Address: 2740 DUNCAN

Appropriation Unit: 4457 - All Categories

Is budget authority Yes City/State/Zip MISSOULA, MT 59802-3128

available?:

If "No" please explain: Not Applicable Contact/Phone: Josh Nowak 406/214-7666

Vendor No.: T29041467 NV Business ID: NV20181802207

Info Accum ¢

Action Accum ¢

A aondo

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
 100.00 %
 Bonds
 0.00 %

 Highway Funds
 0.00 %
 Other funding
 0.00 %

Agency Reference #: 22-01

2. Contract start date:

a. Effective upon Board of No or b. other effective date 12/01/2021

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

Previously Approved

06/30/2024

Termination Date:

Contract term: 3 years and 211 days

4. Type of contract: **Contract** 

Contract description: Population Model

5. Purpose of contract:

This is the first amendment to the original contract which provides an integrated population model for large ungulates including pronghorn antelope and mule deer. This amendment extends the termination date from June 30, 2024 to June 30, 2025 and increases the maximum amount from \$37,500 to \$57,500 due to the continued need for these services.

Trans ¢

# 6. CONTRACT AMENDMENT

		παπο φ	iiiio Accuiii ş	ACTION ACCUM \$	Agenua
1.	The max amount of the original contract:	\$37,500.00	\$37,500.00	\$37,500.00	Yes - Info
2.	Amount of current amendment (#1):	\$20,000.00	\$20,000.00	\$57,500.00	Yes - Info
3.	New maximum contract amount:	\$57,500.00			
	and/or the termination date of the original contract has changed to:	06/30/2025			

# II. JUSTIFICATION

7. What conditions require that this work be done?

We have an urgent need to update our existing spreadsheet population models with updated information using advanced statistical models.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDOW does not have the expertise to develop this type of statistical model.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

SpeedGoat was the only vendor who supplied a quote, both others refused.

d. Last bid date: 07/20/2021 Anticipated re-bid date: 07/20/2022

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, NDOW during FY21, work was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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
 jwilkin3
 12/22/2023 08:33:24 AM

 Division Approval
 cbalcon
 12/27/2023 10:20:36 AM

 Department Approval
 jneubau2
 01/17/2024 10:48:38 AM

Contract Manager Approval Budget Analyst Approval amedin4 dspeed1

01/17/2024 10:59:10 AM 01/30/2024 17:59:50 PM

For Board Use Only 01/31/2024

Date:

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28532

Legal Entity PURCELL ELECTRICAL

PROFESSIONAL CORPORATION DBA Name:

PK ELECTRICAL, INC.

**DEPARTMENT OF WILDLIFE Contractor Name: PURCELL ELECTRICAL** Agency Name:

PROFESSIONAL CORPORATION DBA

PK ELECTRICAL, INC.

681 SIERRA ROSE DR STE B 702 Agency Code: Address:

Appropriation Unit: 4460-07

Is budget authority Yes City/State/Zip RENO, NV 89511-2060

available?:

Contact/Phone: If "No" please explain: Not Applicable Joey Ganser 775/826-9010

> Vendor No.: T81016802

**NV Business ID:** NV19961128650

2024-2028 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % X Fees 50.00 % Sportsmen Revenue General Funds

X Federal Funds **Bonds** 0.00 % 50.00 % 0.00 % 0.00 % Highway Funds Other funding

Agency Reference #: 24-38

2. Contract start date:

a. Effective upon Board of No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive? No

If "Yes", please explain

Not Applicable

3. Termination Date: 11/30/2027

Contract term: 3 years and 304 days

4. Type of contract: Contract

Contract description: **Electrical Services** 

5. Purpose of contract:

This is a new contract to provide electrical engineering design and consulting services on as as needed basis at the department's facilities.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$40,000.00

# II. JUSTIFICATION

7. What conditions require that this work be done?

Problems with existing facilities, addition of components to existing facilities, remodeling of existing facilities, and construction of new facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Electrical design work shall be performed by a licensed engineer.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

c. Why was this contractor chosen in preference to other?

Professional services providers, including engineers are selected based on qualifications per statutes, NAC 333.150.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

No

\$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, NDOW, 2015 - 2019, work was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

If "Yes", please provide details of the litigation 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 P. E. Ph: (775) 684-1586

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date **Budget Account Approval** jwilkin3 12/20/2023 13:35:02 PM **Division Approval** 12/20/2023 13:35:24 PM cbalcon **Department Approval** ineubau2 12/20/2023 13:37:25 PM **Contract Manager Approval** 01/31/2024 10:09:46 AM abarredo **Budget Analyst Approval** dspeed1 01/31/2024 16:50:03 PM

For Board Use Only 02/06/2024

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28530

Legal Entity

U.S. Department of Agriculture Forest

Date:

Name:

Address:

Service

**DEPARTMENT OF WILDLIFE** Agency Name:

Contractor Name:

**U.S. Department of Agriculture Forest** 

Service

702 Agency Code:

Appropriation Unit: 4463-00

324 25th Street

Is budget authority available?:

Yes

City/State/Zip

Ogden , UT 84401

If "No" please explain: Not Applicable

Contact/Phone:

Tamia Robertson 469/965-9272

Vendor No.:

**NV Business ID:** Government 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 % Other funding 100.00 %

Agency Reference #: 24R-04

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/01/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

The department is requesting this revenue contract to be retroactive because we received the contract back from U.S. Department of Agriculture Forest Service on January 25, 2024, after the agency deadline for the December BOE meeting. The contract start date was anticipated to make the December 2023 BOE meeting. It is imperative that USDA Forest Service obtain these services from the department to continue protecting persons and property on the public lands, waters, roads, and trails.

3. Termination Date: 12/21/2026

Contract term: 2 years and 355 days 4. Type of contract: **Interlocal Agreement** Contract description: **Dispatch Services** 

5. Purpose of contract:

This is a interlocal agreement with the Department of Agriculture, USDA Forest Service, to provide ongoing dispatch services for up to 5 of their law enforcement officers in Nevada.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$48,150.00

# II. JUSTIFICATION

7. What conditions require that this work be done?

USFS uses NDOW Dispatch services for law enforcement activities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is revenue generating. State employees are conducting the work.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Exempt (Per statute)

c. Why was this contractor chosen in preference to other?

NRS 277.180 authorized one or more public agencies to contract with another public agency to perform governmental functions.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

\$50,000?

No

# **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

- 16. Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:

Brady Phillips, Game Warden Captain Ph: (775) 688-1544

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 jwilkin3
 11/20/2023 10:12:51 AM

 Division Approval
 cbalcon
 12/05/2023 09:42:08 AM

 Department Approval
 jneubau2
 01/25/2024 09:25:10 AM

 Contract Manager Approval
 abarredo
 01/25/2024 11:59:17 AM

 Budget Analyst Approval
 dspeed1
 02/06/2024 15:49:38 PM



#### STATE OF NEVADA

# DEPARTMENT OF WILDLIFE

6980 Sierra Center Parkway, Suite 120 Reno, Nevada 89511

Phone (775) 688-1500 • Fax (775) 688-1595

ALAN JENNE

JORDAN GOSHERT

Deputy Director

CALEB MCADOO

Deputy Director

MIKE SCOTT
Deputy Director

# **MEMORANDUM**

Date:

January 25, 2024

To:

Amy Stephenson, Director and Clerk of the Board of Examiners, Governor's Finance

Office

From:

Alan Jenne, Director, Nevada Department of Wildlife

Subject:

Request for Retroactive Revenue Contract with USDA Forest/Service

The Department is seeking approval of the retroactive start date of January 1, 2024, for the U.S. Department of Agriculture (USDA) Forest Service revenue contract to provide radio dispatch services to law enforcement officers and special agents.

The Department is requesting this revenue contract to be retroactive because we received the contract back from U.S. Department of Agriculture Forest Service on January 25, 2024, after the agency deadline for the December Board of Examiners meeting. The contract start date was anticipated to make the December 2023 Board of Examiners meeting which would have been needed for work starting in January. It is imperative that USDA Forest Service obtain these services from the Nevada Department of Wildlife to continue protecting persons and property on the public lands, waters, roads and trails administered by the Forest Service within the confines of Nevada.

For Board Use Only 02/01/2024

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28725

Legal Entity

OREGON STATE UNIVERSITY

Date:

Name:

**DEPARTMENT OF WILDLIFE** Agency Name:

702

Contractor Name:

**OREGON STATE UNIVERSITY** 

Address:

134 MAGRUDER HALL

Appropriation Unit: 4464-13

Is budget authority

Yes

City/State/Zip

CORVALLIS, OR 97331

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Kurt Williams 541/737-3261

Vendor No.: T27021334

**NV Business ID:** Government Entity

To what State Fiscal Year(s) will the contract be charged?

2025-2028

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 0.00 % Fees X Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 24-49

2. Contract start date:

Effective upon Board of

or b. other effective date No

03/2024

07/01/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

If "Yes", please explain

**Not Applicable** 3. Termination Date:

06/30/2028

No

Contract term:

4 years

4. Type of contract:

**Interlocal Agreement** 

Contract description:

**Disease Surveillance** 

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing diagnostic and disease surveillance services for wildlife health.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,092.00

### JUSTIFICATION

7. What conditions require that this work be done?

These services are necessary for the state wildlife veterinarian to determine the health of wildlife in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This work requires specialized laboratory equipment and services that state employees and the state veterinary diagnostic lab are unable to provide.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation 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

No

\$50,000?

### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, NDOW, since 2019. 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** iwilkin3 01/04/2024 09:06:54 AM **Division Approval** 01/05/2024 09:05:21 AM cbalcon Department Approval 01/25/2024 08:29:10 AM ineubau2 Contract Manager Approval amedin4 01/25/2024 09:02:43 AM **Budget Analyst Approval** dspeed1 02/01/2024 17:40:44 PM

For Board Use Only 02/09/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28836

Legal Entity

ARTISTIC FENCE COMPANY, INC.

Date:

Name:

**DCNR - FORESTRY DIVISION** Agency Name:

706

Contractor Name: ARTISTIC FENCE COMPANY, INC.

Address:

**480 MORRILL AVE** 

Agency Code: Appropriation Unit: 4195-95

Is budget authority

Yes

City/State/Zip

Reno, NV 89512

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Joanne 775/882-4665

Vendor No.: PUR0000883 **NV Business ID:** NV19711002179

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 Federal Funds

100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

0.00 % 0.00 %

Other funding

0.00 %

Agency Reference #: NDF24-005

2. Contract start date:

Effective upon Board of

No

or b. other effective date

02/12/2024

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2028

3. Termination Date: Contract term:

4 years and 139 days

4. Type of contract:

Contract

Contract description:

**Fencing Services** 

5. Purpose of contract:

This is a new contract to provide fencing services to the agency's facilities in the western region.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$80,000.00

Payment for services will be made at the rate of \$20,000.00 per Year

# **JUSTIFICATION**

7. What conditions require that this work be done?

SAM 1908 Remodeling, Repairs, and Maintenance Work: Remodeling, repairs and maintenance work of a non-structural nature financed with agency operating funds and estimated to cost less than \$100,000 do not need the project management services of the Public Works Division and may be made by the agency controlling the building.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the skills or tools to perform these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

**73** Contract #: 28836 Page 1 of 2

c. Why was this contractor chosen in preference to other?

The vendor was selected by an evaluation committee in accordance with NRS and NAC 333.

d. Last bid date: 01/16/2024 Anticipated re-bid date: 05/15/2028

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Too many State Agencies to list - 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** hedmonds 02/06/2024 13:42:11 PM hedmonds 02/06/2024 13:42:15 PM **Division Approval** Department Approval hedmonds 02/06/2024 13:42:20 PM Contract Manager Approval 02/07/2024 08:15:37 AM rmorse **Budget Analyst Approval** rjacob3 02/09/2024 13:13:25 PM

For Board Use Only 02/09/2024

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28633

Legal Entity

Jessica Cheri LeMay DBA JESSI LEMAY

Date:

Name: PHOTOGRAPHY

**DCNR - FORESTRY DIVISION** Agency Name:

Jessica Cheri LeMay DBA JESSI

Contractor Name:

LEMAY PHOTOGRAPHY

706

Address: 2198 ARCANE AVE

Appropriation Unit: 4195-24

Is budget authority

Agency Code:

Yes

City/State/Zip

RENO, NV 89503-1407

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Jessi LeMay 775/830-0752

Vendor No.:

T27043687

**NV Business ID:** 

NV20201824880

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.

Federal Funds

0.00 % 100.00 %

Fees **Bonds**  0.00 % 0.00 %

Highway Funds

General Funds

0.00 %

Other funding

0.00 %

Agency Reference #: NDF24-002

Contract start date:

X

a. Effective upon Board of

No

12/2023

or b. other effective date

02/09/2024

Examiner's approval?

Anticipated BOE meeting date

If "Yes", please explain

Not Applicable

Retroactive?

12/31/2027

3. Termination Date: Contract term:

3 years and 326 days

4. Type of contract:

Contract

Contract description:

Forest Legacy

5. Purpose of contract:

This is a new contract to provide photos and videos of select project areas to promote landowner interest and education in the Forest Legacy program.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$20,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Forest Legacy is a federal program administered by the USFS. NDF has been awarded funding specifically for Forest Legacy project photography and videos. USFS Regional leaders expressed an interest in photos generated in Nevada to add to their federal Forest Legacy imagery database. Collaboration with the USFS and requirements as laid out in the Forest Legacy Grant Narratives.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This work requires professional photographic and videographer skills. The project is very specific and requires a large time commitment that NDF is not equipped to fulfill.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Full Circle Productions Jessi LeMany Photography Active Alliance Creative

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This vendor was chosen by a selection committee in accordance with NRS 333 based on an agency informal solicitation.

No

d. Last bid date: 11/13/2023 Anticipated re-bid date: 10/11/2027

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 performed services for the Nevada Arts Council 04/2015 - satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Michelle Roberts, CSS II Ph: 775-309-7958

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date

 Budget Account Approval
 swesto3
 12/18/2023 08:41:34 AM

 Division Approval
 hedmonds
 02/07/2024 12:01:06 PM

 Department Approval
 hedmonds
 02/07/2024 12:01:09 PM

 Contract Manager Approval
 rmorse
 02/07/2024 12:37:15 PM

 Budget Analyst Approval
 rjacob3
 02/09/2024 13:23:07 PM

For Board Use Only Date: 02/09/2024

#### **CONTRACT SUMMARY**

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 26197 3 Amendment

Number: Legal Entity

RHP Mechanical Systems

Name:

Agency Name: **DCNR - FORESTRY DIVISION** Contractor Name: **RHP Mechanical Systems** 

Agency Code: 706 Address: 1008 East Fourth Street

Appropriation Unit: 4195-07

Is budget authority Yes City/State/Zip Reno, NV 89505

available?:

If "No" please explain: Not Applicable Contact/Phone: JoLynn Bass 775-322-9434

> PUR0002724A Vendor No.: **NV Business ID:** NV20041446186

Action Accuse C

2022-2026 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

87.00 % 0.00 % General Funds Fees Federal Funds 0.00 % **Bonds** 0.00 %

Highway Funds 0.00 % X Other funding 13.00 % Nursery Funds

Agency Reference #: NDF22-008

Contract start date:

a. Effective upon Board of No or b. other effective date 05/16/2022

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

If "Yes", please explain

#### Not Applicable

3. Previously Approved 06/30/2026

Termination Date:

Contract term: 4 years and 46 days

4. Type of contract: Contract

**HVAC/PLUMBING** Contract description:

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing heating, ventilation, air conditioning and plumbing services for facilities in the western region of the state. This amendment increases the maximum amount from \$200,000.00 to \$290,000.00 due to delays in the RFP process.

T..... A

#### CONTRACT AMENDMENT

amount:

		i rans \$	Into Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$99,999.96	\$99,999.96	\$99,999.96	Yes - Info
	a. Amendment 1:	\$0.00	\$0.00	\$99,999.96	No
	b. Amendment 2:	\$100,000.04	\$100,000.04	\$200,000.00	Yes - Action
2.	Amount of current amendment (#3):	\$90,000.00	\$90,000.00	\$90,000.00	Yes - Info
3.	New maximum contract	\$290,000.00			

#### JUSTIFICATION

7. What conditions require that this work be done?

The division's facilities have complex heating and cooling systems which are required to be operational 24 hours/day, 7 days per week. Regular maintenance and/or repair of the systems is necessary to ensure optimal function of the systems and facilities. Additionally, the plumbing systems at the facilities require periodic services and/or repairs to maintain the efficiency and ensure the safety of the staff and the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the knowledge or expertise to perform these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

The vendor was selected by an evaluation committee in accordance with NRS and NAC 333.

d. Last bid date: 04/04/2022 Anticipated re-bid date: 04/02/2026

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Nο

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contract has performed services for NDF since 2008 - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

**Nevada Corporation** 

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

Budget Account Approval hedmonds 01/24/2024 17:29:34 PM
Division Approval hedmonds 01/24/2024 17:29:38 PM

Contract #: 26197 Page 2 of 3 **75** 

Department Approval Contract Manager Approval Budget Analyst Approval hedmonds rmorse rjacob3 01/24/2024 17:29:40 PM 02/07/2024 07:38:51 AM 02/09/2024 10:55:38 AM

For Board Use Only
Date: 02/08/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28772

Legal Entity

Mt. Charleston Fire Protection District

Name:

Agency Name: **DCNR - FORESTRY DIVISION** 

706

Contractor Name: Mt. Charleston Fire Protection District

Address: 500 S. Grand Central Pky,

Appropriation Unit: 4196-00

Box 551217

Is budget authority

Yes City/State/Zip

Las Vegas, NV 89155-1217

available?:

Agency Code:

If "No" please explain: Not Applicable

Contact/Phone:

Gemma Coronado 702-455-2897

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 % Highway Funds 0.00 %

Bonds
X Other funding

0.00 % 100.00 % WFPP Revenue

2. Contract start date:

a. Effective upon Board of

No or b. other effective date

12/01/2023

Examiner's approval?

Anticipated BOE meeting date

02/2024

Retroactive?

If "Yes", please explain

The contract effective date is 12/01/2023.

3. Termination Date:

06/30/2025

Yes

Contract term:

1 year and 211 days

4. Type of contract:

Revenue Contract

Contract description:

Mt. Charleston WFPP

5. Purpose of contract:

This is a new revenue interlocal agreement to provide wildland fire services under the Wildland Fire Protection Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$28.560.19

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Forestry and Mt. Charleston Fire Protection District will work closely together to maintain effective wildfire management to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which MCFPD will make payments to the Division.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation Waiver: Exempt (Per statute)
- c. Why was this contractor chosen in preference to other?

Contract #: 28772 Page 1 of 2 **76** 



STATE OF NEVADA
Department of Conservation & Natural Resources

Joe Lombardo, Governor James A. Settelmeyer, Director Kacey KC, State Forester/Firewarden

DATE: 2/26/2024

## **MEMORANDUM**

TO:

Richard Jacobs Budget Officer

Governor's Finance Office

FROM:

Kacey KC

State Forester / Fire Marshall Nevada Division of Forestry

SUBJECT:

REQUEST FOR RETROACTIVE START DATE OF CONTRACT - Mt. Charleston WFPP Interlocal

(CETS #28772)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: Nevada Division of Forestry
- Services to be provided: This is a new interlocal agreement to provide services under the Wildland Fire Protection Program for Mt. Charleston Fire Protection District.
- Funding source and expenditure category: BA 4196 CAT 00; Revenue.
- Requested start date of work: 12/1/2023
- Expected execution date of agreement (IFC approvals): February 2024.
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - This contract was delayed due to vacancies within NDF and the processing time of county administrations and their board of county commissioners.
  - O Describe the impact to the program/services if this work is not started prior to the execution of the agreement: These contracts are renewed on an annual basis. If the work is not able to proceed on time, lack of environmental containment could aggravate the risk of wildland fires in the region.
  - Explain how the program/bureau will prevent future retroactive requests: **NDF will continue to train its new contract** manager and strive to process these contracts earlier in the future.

If you have any questions, please contact Rick Morse at (775) 684-2513 or rmorse@forestry.nv.gov.

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

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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** swesto3 01/19/2024 13:59:16 PM **Division Approval** hedmonds 01/19/2024 15:00:11 PM Department Approval hedmonds 01/19/2024 15:04:08 PM Contract Manager Approval 02/08/2024 09:47:55 AM rmorse **Budget Analyst Approval** riacob3 02/08/2024 10:05:08 AM

For Board Use Only
Date: 02/09/2024

#### **CONTRACT SUMMARY**

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 28797

Legal Entity SIMPLE POWER, INC. DBA Simple

Name: Power Solar

Agency Name: DCNR - FORESTRY DIVISION Contractor Name: SIMPLE POWER, INC. DBA Simple

Power Solar

Agency Code: 706 Address: 790 LOUISE ST

Appropriation Unit: 4235-10

Is budget authority Yes City/State/Zip Reno, NV 89502

available?:

If "No" please explain: Not Applicable Contact/Phone: Krystal Gilman 775/786-4006

Vendor No.: T29048230

NV Business ID: NV20161136753

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 % Nursery Sales

Agency Reference #: NDF24-004

2. Contract start date:

a. Effective upon Board of No or b. other effective date 02/09/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2027** 

Contract term: 3 years and 141 days

4. Type of contract: Contract

Contract description: Solar Panels

5. Purpose of contract:

This is a new contract to provide services for the maintenance and repair of the solar panels at the Eastlake Nursery.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$80,000.00

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Budget account 4235 is an Enterprise budget that relies on green energy wherever possible to help with high utility costs. The system was installed in 2012 and is currently inoperative. Finding a vendor to provide maintenance and service has been difficult.

Yes

No

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the knowledge, skills or specialized equipment to provide these services.

9. Were quotes or proposals solicited?

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

AO Energy Freedom Forever Simple Power Solar Western Pacific Electric

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This vendor was chosen by a selection committee in accordance with NRS 333 based on an agency informal solicitation.

No

d. Last bid date: 01/02/2024 Anticipated re-bid date: 01/05/2027

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

**Budget Analyst Approval** 

Cory King, Nursery Specialist 3 Ph: 775-687-0687

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

Budget Account Approval hedmonds 01/24/2024 17:24:17 PM

Division Approval hedmonds 01/24/2024 17:24:20 PM

Department Approval hedmonds 01/24/2024 17:24:24 PM

Contract Manager Approval rmorse 02/07/2024 11:07:20 AM

rjacob3

02/09/2024 13:15:23 PM

For Board Use Only 01/26/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28518

Legal Entity ADVANTAGE APPRAISAL SERVICES

Name:

**B&I - REAL ESTATE DIVISION** Contractor Name: **ADVANTAGE APPRAISAL SERVICES** Agency Name:

8550 W DESERT INN RD Agency Code: 748 Address:

STE 102-496 Appropriation Unit: 3823-16

LAS VEGAS, NV 89117-4406 Is budget authority Yes City/State/Zip

available?:

If "No" please explain: Not Applicable Contact/Phone: Grace Lonardo 702/339-2303

> Vendor No.: T27042958 **NV Business ID:** NV20091190731

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.

59.30 % General Funds X Fees 40.70 % Licensing and Administrative

Federal Funds 0.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 74BAI-S2438

Contract start date:

a. Effective upon Board of No or b. other effective date 01/26/2024

Examiner's approval?

Anticipated BOE meeting date 02/2024

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2025 3. Termination Date:

Contract term: 1 year and 155 days

4. Type of contract: Contract

Contract description: Standard 3 Reviews

5. Purpose of contract:

This is a new contract to provide ongoing residential appraisal reviews.

NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$15,800.00

Other basis for payment: \$600.00 per residential review, \$100.00 per hour for expert testimony or \$300.00 daily rate: if present at the Commission, but not called upon to testify, lesser of the two rates when calculating reimbursement, \$100.00 per hour for pre-hearing preparation.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Title XI (The Financial Institutions Recovery Reform and Enforcement Act of 1989) requires state appraiser regulatory agencies to process complaints against an appraiser for misconduct or wrongdoing within a twelve month period.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

In order to prepare an appraisal review in compliance with the Uniform Standards of Professional Appraisal Practice, Standards Rule 3 (adopted pursuant to NAC 645C.400) a certified appraiser is required. Employees of the Real Estate Division may not hold an active license by the Real Estate Division as it would be a conflict of interest.

9. Were quotes or proposals solicited?

Yes No

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Libra Appraisals, LLC Value Able LLC Mathews Appraisal

Dennis Badger & Associates, Inc.

Cornerstone Appraisal Service

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Previously worked with this vendor and very satisfied with the quality of work preformed.

d. Last bid date: 08/14/2023 Anticipated re-bid date: 01/01/2025

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

10.04.19 through 12.31.23. Nevada Real Estate Division. Services provided have been satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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:

Grace Hilgar-Devito, ASOI Ph: 702-486-5134

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date
Budget Account Approval ghilgar 12/22/2023 10:18:05 AM
Division Approval ghilgar 12/22/2023 10:23:28 AM
Department Approval ecerv1 01/25/2024 17:17:01 PM

Contract Manager Approval ecerv1 01/25/2024 17:17:04 PM Budget Analyst Approval jhelto1 01/26/2024 16:04:56 PM

For Board Use Only 01/26/2024

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: 28520

Legal Entity DENNIS BADGER & ASSOCIATES,

Name: INC

Agency Name: B&I - REAL ESTATE DIVISION Contractor Name: DENNIS BADGER & ASSOCIATES,

INC.

Agency Code: 748 Address: 824 GAGEL AVENUE

Appropriation Unit: 3823-16

Is budget authority Yes City/State/Zip LOUISVILLE, KY 40216

available?:

If "No" please explain: Not Applicable Contact/Phone: Dennis Badger 859-252-3445

Vendor No.: T29008453 NV Business ID: NV20232905867

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 59.30 % X Fees 40.70 % Licensing and Administrative

Federal Funds 0.00 % Bonds 0.00 % Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 74BAI-S2438

2. Contract start date:

a. Effective upon Board of No or b. other effective date 01/26/2024

Examiner's approval?

Anticipated BOE meeting date 01/2024

Retroactive?

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2025** 

Contract term: 1 year and 155 days

4. Type of contract: Contract

Contract description: Standard 3 Reviews

5. Purpose of contract:

This is a new contract to provide ongoing residential and commercial appraisal reviews.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$20,700.00

Other basis for payment: \$600 per residential review, \$700 per commercial review, \$100.00 per hour for expert testimony or \$300.00 daily rate: if present at the Commission, but not called upon to testify, lesser of the two rates when calculating reimbursement, \$100.00 per hour for pre-hearing preparation.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Title XI (The Financial Institutions Recovery Reform and Enforcement Act of 1989) requires state appraiser regulatory agencies to process complaints against an appraiser for misconduct or wrongdoing within a twelve month period.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

In order to prepare an appraisal review in compliance with the Uniform Standards of Professional Appraisal Practice, Standards Rule 3 (adopted pursuant to NAC 645C.400) a certified appraiser is required. Employees of the Real Estate Division may not hold an active license by the Real Estate Division as it would be a conflict of interest.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

Contract #: 28520 Page 1 of 3

a. List the names of vendors that were solicited to submit proposals (include at least three):

Mathews Appraisal Value Able LLC

Advantage Appraisal Services, LLC

Cornerstone Appraisal Service

Dennis Badger & Associates, Inc.

Libra Appraisals, LLC

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

This vendor was chosen because he was previously on the Board of Directors for the Appraisal Standards Board. He was one of the individuals responsible for writing, amending and interpreting the Uniform Standards of Professional Appraisal Practice (USPAP). Most qualified.

No

d. Last bid date: 08/14/2023 Anticipated re-bid date: 01/01/2025

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50.000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Grace Hilgar-DeVito, ASO1 Ph: 702-486-5134

20. Contract Status:

**Contract Approvals:** 

Approval Level User Signature Date

 Budget Account Approval
 ghilgar
 12/22/2023 09:01:21 AM

 Division Approval
 ghilgar
 12/22/2023 09:01:36 AM

 Department Approval
 ecerv1
 01/25/2024 17:17:19 PM

 Contract Manager Approval
 ecerv1
 01/25/2024 17:17:21 PM

For Board Use Only 02/13/2024

Date:

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28835

Legal Entity

ADT Commercial, LLC

Name:

**DEPARTMENT OF MOTOR** Agency Name:

Contractor Name: ADT Commercial, LLC

**VEHICLES** Agency Code: 810

Address:

1501 Yamato Rd.

Appropriation Unit: 4735-04

Is budget authority

Yes

City/State/Zip

Boca Raton, FL 33431

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Vendor No.:

775-443-7668 T29047302

**NV Business ID:** 

NV20111234098

To what State Fiscal Year(s) will the contract be charged?

0.00 %

2024-2029

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

Federal Funds 0.00 % Fees 0.00 % **Bonds** 

0.00 %

Highway Funds 100.00 % Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 02/13/2024

Examiner's approval?

General Funds

Anticipated BOE meeting date 02/2024

Retroactive?

No

If "Yes", please explain

#### Not Applicable

3. Termination Date: 07/31/2028

Contract term: 4 years and 169 days

4. Type of contract: Contract

Contract description: Security and Monitor

5. Purpose of contract:

This is a new contract to provide security solutions and professional installation and monitoring. This contract will provide 26 alarm monitoring systems.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$45,148.48

#### II. JUSTIFICATION

7. What conditions require that this work be done?

DMV is needing alarm monitoring for 26 different points at all DMV locations.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no State employees available to perform this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

Yes

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

The State of Nevada has a Good of the State contract with which allows agencies to utilize the services under contract number 99SWC-NV23-16866.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

#### **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

Nο

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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** 02/01/2024 15:45:10 PM pgra1 **Division Approval** asmit3 02/02/2024 10:02:08 AM Department Approval asmit3 02/02/2024 10:02:13 AM 02/02/2024 11:11:59 AM Contract Manager Approval asampso2 **Budget Analyst Approval** vyoungb 02/13/2024 08:51:21 AM

For Board Use Only 02/12/2024

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 1. Contract Number: 27148 Amendment

Number:

Legal Entity Odyssey Charter School of Nevada

Name:

Agency Name: **DETR - REHABILITATION DIVISION** Contractor Name: **Odyssey Charter School of Nevada** 

Agency Code: 901 Address: 2251 S. Jones Blvd

Suite 100A

Appropriation Unit: 3265-09

Is budget authority Yes City/State/Zip Las Vegas, NV 89146-3145

available?:

If "No" please explain: Not Applicable Contact/Phone: Devon Dolliger 702-501-2160

> Vendor No.: T81102486

> > Info Accum \$

Action Accum \$

Agenda

**NV Business ID:** Governmental Entity

2023-2024 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

0.00 % General Funds 0.00 % Fees Federal Funds 100.00 % **Bonds** 0.00 % Highway Funds 0.00 % Other funding 0.00 %

3702-24-REHAB Agency Reference #:

Contract start date:

X

a. Effective upon Board of No or b. other effective date 01/18/2023

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

#### Not Applicable

3. Previously Approved 06/30/2024

Termination Date:

Contract term: 1 year and 163 days **Interlocal Agreement** 4. Type of contract: Contract description: 2023 Odyssey Pre-ETS

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides ongoing Pre-Employment Transition Services. This amendment increases the maximum amount of the contract from \$43,200.00 to \$78,000.00 due to the increase in students.

Trans \$

#### 6. CONTRACT AMENDMENT

		παποφ	ππο ποσαπτ φ	/ ισιιστι / ισσαιτι φ	, igoniaa
1.	The max amount of the original contract:	\$43,200.00	\$43,200.00	\$43,200.00	Yes - Info
2.	Amount of current amendment (#1):	\$34,800.00	\$34,800.00	\$78,000.00	Yes - Info
3.	New maximum contract amount:	\$78,000.00			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

Section 110(d)(1) of the Rehabilitation Act as amended by the Workforce Innovation and Opportunity Act, Public Law 113-128 (29 USC 3101) (2014) requires that 15% of all grant funding be spent on Pre-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained or have the skills to undertake the Pre-ETS training.

9. Were quotes or proposals solicited?

No No

Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation 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

No

\$50,000?

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has provided satisfactory services to Vocational Rehabilitation since July 2017.

14. Is the contractor currently involved in litigation with the State of Nevada?

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** clarki1

01/23/2024 15:50:22 PM **Division Approval** cedlefse 01/30/2024 09:20:58 AM Department Approval cedlefse 01/30/2024 09:21:04 AM Contract Manager Approval 01/30/2024 16:07:42 PM wcune1 **Budget Analyst Approval** twollan1 02/12/2024 12:57:49 PM

For Board Use Only 02/12/2024

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: 28757

Legal Entity

Greenscapes of Nevada LLC

Name:

Agency Name: **DETR - EMPLOYMENT SECURITY** 

Contractor Name:

**Greenscapes of Nevada LLC** 

Address:

2221 Loose Rd

Appropriation Unit: 4771-11

Is budget authority

Yes

City/State/Zip

N. Las Vegas, NV 89030

available?:

X

Agency Code:

If "No" please explain: Not Applicable

902

Contact/Phone:

Garrett Petersen 435-579-5742

Vendor No.: NV Business ID: T27033446 NV20131448439

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 Federal Funds 0.00 %

Fees

0.00 %

Highway Funds

**100.00 %** 0.00 %

Bonds
Other funding

0.00 % 0.00 %

Agency Reference #:

3814-25-OM

2. Contract start date:

a. Effective upon Board of

No

or b. other effective date

02/12/2024

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

06/30/2025

Termination Date: Contract term:

1 year and 138 days

4. Type of contract:

Contract

Contract description:

Landscaping Services

5. Purpose of contract:

This is a new contract to provide repair services to the landscape at the St. Louis building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$30,017.50

Other basis for payment: \$24,014/project proposal, \$6,003.50/contingency. Invoices payable as submitted and approved by State personnel. Contract not to exceed: \$30,017.50.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

The landscape around the St. Louis Building hasn't been repaired/updated since the building was built in 2008. The landscape has been damaged by floods over the years and lack of preventative maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees don't have the tools, training or time to undertake the work.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Greenscapes Select Landscape

Del Sol

Contract #: 28757 Page 1 of 2

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Lowest cost

d. Last bid date: 11/01/2023 Anticipated re-bid date: 04/30/2025

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 DHHS and DETR since October 2013.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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 rhernan3 01/17/2024 13:16:23 PM **Budget Account Approval Division Approval** sterr2 01/18/2024 07:58:14 AM Department Approval sterr2 01/18/2024 07:58:16 AM Contract Manager Approval wcune1 01/23/2024 12:13:18 PM **Budget Analyst Approval** twollan1 02/12/2024 13:44:51 PM

For Board Use Only 02/12/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28773

Legal Entity

Timberidge Plumbing and Heating, Inc.

Date:

Name:

**DETR - EMPLOYMENT SECURITY** Agency Name:

Contractor Name:

**Timberidge Plumbing and Heating,** 

Agency Code: 902 Address:

39 E Freeport Blvd

Appropriation Unit: 4771-11

Is budget authority

Yes

City/State/Zip

**Sparks, NV 89431** 

available?:

X

If "No" please explain: Not Applicable

Contact/Phone:

Brian Merryman 775-359-9445

Vendor No.:

T29048204

**NV Business ID:** 

NV19981261029

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.

Federal Funds

0.00 % 100.00 % Fees **Bonds**  0.00 % 0.00 %

Highway Funds

General Funds

0.00 %

Other funding

0.00 %

Agency Reference #: 3811-25-OM

Contract start date:

a. Effective upon Board of

No or b. other effective date

03/2024

02/12/2024

Examiner's approval?

Anticipated BOE meeting date

Retroactive?

If "Yes", please explain

Not Applicable

06/30/2025

3. Termination Date: Contract term:

1 year and 138 days

4. Type of contract:

Contract

Contract description:

**Timberidge** 

5. Purpose of contract:

This is a new contract to provide replacement services of the sewage ejection system located at 500 E. 3rd Street, Carson City.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$27.500.00

Other basis for payment: \$24,150.00/Quoted Project; \$3,350.00 (Contingency)/Invoice(s). Contract payable as invoiced by contractor and approved for payment by the State. Contract not to exceed: 27,500.00.

#### II. JUSTIFICATION

7. What conditions require that this work be done?

DETR has a need for plumbing service to replace the basement sewage ejection system at the DETR State Administrative Office. This service is essential to the health and safety of staff and the public and is mandated by the health codes and regulations of Carson City and the state.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained on the existing system.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

NDI

Timberidge

Peak Brothers RHP Mechanical

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Only vendor to submit proposal

d. Last bid date: 11/03/2023 Anticipated re-bid date: 03/03/2025

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Miles Bruinekool, OM Supervisor Ph: 775-684-6854

20. Contract Status:

Contract Approvals:

Approval Level User Signature Date

 Budget Account Approval
 rhernan3
 01/29/2024 15:04:16 PM

 Division Approval
 sterr2
 01/30/2024 12:29:10 PM

 Department Approval
 sterr2
 01/30/2024 12:29:12 PM

 Contract Manager Approval
 wcune1
 01/31/2024 08:42:47 AM

 Budget Analyst Approval
 twollan1
 02/12/2024 15:31:04 PM

For Board Use Only 02/12/2024

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: 26026 1 Amendment

Number: Legal Entity

OTIS ELEVATOR COMPANY

Name:

Agency Name: **DETR - EMPLOYMENT SECURITY** Contractor Name: **OTIS ELEVATOR COMPANY** 

Agency Code: 902 Address: 725 TRADEMARK DR

Appropriation Unit: All Budget Accounts - Category 04 Suite 102

Is budget authority Yes City/State/Zip **RENO, NV 89521-6007** 

available?:

If "No" please explain: Not Applicable Contact/Phone: Kim Hooper 775-850-5091

> Vendor No.: PUR0005666 NV19441000038 **NV Business ID:**

2022-2026 To what State Fiscal Year(s) will the contract be charged?

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 % Federal Funds 0.00 % **Bonds** 0.00 %

Highway Funds 0.00 % Other funding 100.00 % Cost Allocated

Agency Reference #: 3640-26-DETR

2. Contract start date:

a. Effective upon Board of No or b. other effective date 06/20/2022

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

If "Yes", please explain

Not Applicable

05/13/2026 3. Previously Approved

Termination Date:

Contract term: 3 years and 328 days

4. Type of contract: Contract

Contract description: **Elevator Maintenance** 

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing maintenance, monitoring, and repair services. This amendment increases the maximum amount from \$10,500 to \$30,000 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:	\$10,500.00	\$10,500.00	\$10,500.00	Yes - Info
2.	Amount of current amendment (#1):	\$19,500.00	\$19,500.00	\$30,000.00	Yes - Info
3.	New maximum contract amount:	\$30,000.00			

#### II. JUSTIFICATION

7. What conditions require that this work be done?

OSHA regulation, safety and staff use of elevator.

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 license to do this type of work.

Were quotes or proposals solicited?Was the solicitation (RFP) done by the Purchasing

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Koch Otis Kone

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Lowest cost vendor

d. Last bid date: 05/01/2023 Anticipated re-bid date: 01/02/2026

10. a. Does the contract contain any IT components?Nob. Is the contract part of an IT investment project overNo

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to DETR since September 2017 and other state agencies since April 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 rhernan3 01/09/2024 10:11:37 AM

 Division Approval
 sterr2
 01/26/2024 12:18:58 PM

 Department Approval
 sterr2
 01/26/2024 12:19:01 PM

 Contract Manager Approval
 wcune1
 01/31/2024 08:39:50 AM

 Budget Analyst Approval
 twollan1
 02/12/2024 16:24:10 PM

For Board Use Only 02/08/2024

85

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28285

Legal Entity

Coulson & Associates

Name:

**BDC LICENSING BOARDS &** Agency Name:

Contractor Name:

**Coulson & Associates** 

Agency Code:

**COMMISSIONS** 

Address:

6170 Ridgeview Court

Appropriation Unit: B003 - All Categories

**BDC** 

Suite D

Is budget authority

Yes

City/State/Zip

Reno, NV 89519

available?:

Contact/Phone:

Michael Coulson 7758254444

If "No" please explain: Not Applicable

Vendor No.:

**NV Business ID:** 

To what State Fiscal Year(s) will the contract be charged?

2024

NV20001490534

What is the source of funds that will be used to 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 **Bonds** 0.00 %

Federal Funds Highway Funds 0.00 % 0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 09/01/2023

Examiner's approval?

Anticipated BOE meeting date

03/2024

Retroactive?

If "Yes", please explain

This Board's revenue has not previously exceeded the audit threshold of \$200,000 & we have historically submitted a balance sheet in lieu of audit. It was anticipated that revenue would slightly exceed \$200,000 but final FY23 financial summary was not available until July 2023, in which revenue totaled \$204,655.94.

3. Termination Date:

06/30/2024

Contract term:

303 days

4. Type of contract:

Contract

Contract description:

**Financial Audit** 

5. Purpose of contract:

This is a new contract to provide financial audit services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$10,000.00

Payment for services will be made at the rate of \$10,000.00 per Audit

#### II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 218G.400 requires a formal financial audit of this Board for FY23 revenue in excess of \$200,000.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Requires a Certified Public Accounting firm.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Soliciation Waiver: Professional Service (As defined in NAC 333.150)
- c. Why was this contractor chosen in preference to other?

Contract #: 28285 Page 1 of 2 Vendor was the most qualified to provide service and was recommended by another Board they performed the same services for. Professional services of an accountant to support this work are not adapted to competitive solicitation as per NAC 333.150(2,b,6).

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No No

b. Is the contract part of an IT investment project over

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Massage Therapy Board

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Jennifer Pierce, Executive Director Ph: (775) 787-3421

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	piercej2	12/05/2023 12:11:05 PM
Division Approval	piercej2	12/05/2023 12:11:08 PM
Department Approval	piercej2	12/05/2023 12:11:10 PM
Contract Manager Approval	piercej2	12/05/2023 12:11:13 PM
Budget Analyst Approval	stilley	02/08/2024 16:24:31 PM



# State of Nevada Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

6170 Mae Anne Avenue, Suite, Reno, NV 89523 (775) 787-3421 / Fax (775) 746-4105 www.nvspeechhearing.org Email board@nvspeechhearing.org

#### **MEMO**

Date: September 28, 2023

To: Board of Examiners

From: Jennifer R. Pierce, Executive Director

Speech-Language Pathology, Audiology & Hearing Aid Dispensing Board

RE: Request for Retroactive Contract Approval

Audit Services – Coulson & Associates

The attached contract is requested for retroactive approval to support our Board in remaining in compliance with NRS 218G.400.

This Board's revenue has not previously exceeded \$200,000, allowing submission of a balance sheet in lieu of audit. It was anticipated that revenue could barely exceed \$200,000 but final FY23 financial summary was not available and reviewed by the Board until late July 2023. Final FY23 revenue totaled approximately \$204,655.94.

Thank you in advance for your consideration.

For Board Use Only 01/31/2024

Date:

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28505

Legal Entity

Strategies 360, Inc.

Name:

**BDC LICENSING BOARDS &** Agency Name:

Contractor Name:

Strategies 360, Inc.

**BDC** Agency Code:

**COMMISSIONS** 

Address:

10801 W Charleston Blvd

Appropriation Unit: B005 - All Categories

Suite 420

Is budget authority

Yes

City/State/Zip

Las Vegas, NV 89135

available?:

Contact/Phone:

Dan Musgrove 702-860-9900

If "No" please explain: Not Applicable

Vendor No.:

To what State Fiscal Year(s) will the contract be charged?

2024-2025

**NV Business ID:** NV20131418348

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds

0.00 % 0.00 % X Fees **Bonds**  100.00 % Licensure 0.00 %

Federal Funds Highway Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 01/31/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

3. Termination Date:

06/30/2025

Contract term:

1 year and 150 days

4. Type of contract:

**Contract** 

Contract description:

Lobbyist

5. Purpose of contract:

This is a new contract to provide ongoing government affairs and lobbyist services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$72.000.00

Payment for services will be made at the rate of \$4,000.00 per Month

## II. JUSTIFICATION

7. What conditions require that this work be done?

The Board requires expertise, advice and services regarding representation before and dealing with individual legislators, legislative committees and other legislative related matters.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board consists of two employees, and neither of the employees have the expertise, knowledge or skills to perform this function.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing

No

Division?

a. List the names of vendors that were solicited to submit proposals (include at least three):

Carrara Nevada **David Goldwater** Michael Hillerby

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

Many years of experience handling this Boards needs.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

Nο

b. Is the contract part of an IT investment project over

No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

**No** If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 11/13/2023 13:04:08 PM **Budget Account Approval** jstrand1 **Division Approval** jstrand1 11/13/2023 13:18:50 PM Department Approval istrand1 11/13/2023 13:18:52 PM Contract Manager Approval jstrand1 11/13/2023 13:18:54 PM **Budget Analyst Approval** stilley 01/31/2024 16:02:11 PM

For Board Use Only Date: 02/08/2024

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### **DESCRIPTION OF CONTRACT**

1. Contract Number: 28528

Legal Entity

Lipparelli Legal Services Prof LLC

Name:

**BDC LICENSING BOARDS &** Agency Name:

Contractor Name: Lipparelli Legal Services Prof LLC

**BDC** Agency Code:

**COMMISSIONS** 

Address:

2633 Spearpoint Drive

Appropriation Unit: B015 - All Categories

Is budget authority

Yes

City/State/Zip

Reno, NV 89509

available?:

If "No" please explain: Not Applicable

Contact/Phone:

Paul Lipparelli 775-771-6927

Vendor No.:

**NV Business ID:** NV20222616654

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 % 0.00 % X Fees **Bonds**  100.00 % Licensure 0.00 %

Federal Funds Highway Funds

0.00 %

Other funding

0.00 %

Contract start date:

a. Effective upon Board of

No or b. other effective date 02/08/2024

Examiner's approval?

Anticipated BOE meeting date 03/2024

Retroactive?

No

If "Yes", please explain

Not Applicable

11/30/2025

3. Termination Date: Contract term:

1 year and 296 days

4. Type of contract:

Contract

Contract description:

Paul Lipparelli

5. Purpose of contract:

This is a new contract to provide ongoing hearing officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$40.000.00

Payment for services will be made at the rate of \$200.00 per hour

Other basis for payment: billed monthly

#### II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 630.106 and 630.470 authorize the Board to hire and utilize hearing officers to hold hearings regarding complaints filed pursuant to NRS 630.311. The purpose of this contract is to add a hearing officer to the Boards list of available officers

Contractor is responsible for assigned disciplinary matters, ensuring that the hearing procedures contained in NRS and NAC Chapter 630 are followed, as well as those contained in the Administrative Procedure Act and NRS Chapters 622 and 622A. Issue scheduling orders, decide pending motions and draft orders regarding the same, preside over administrative hearings,

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Hearing officers need to be independent from the Board staff in order to ensure due process for the respondents in the hearing.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

d. Last bid date: 11/09/2023 Anticipated re-bid date: 12/31/2025

10. a. Does the contract contain any IT components?

b. Is the contract part of an IT investment project over No

\$50,000?

#### III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

**No** If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

**Contract Approvals:** 

Approval Level	User	Signature Date
Budget Account Approval	5522	11/21/2023 09:32:16 AM
Division Approval	5522	11/21/2023 09:32:19 AM
Department Approval	5522	11/21/2023 09:32:22 AM
Contract Manager Approval	5522	11/21/2023 09:32:24 AM
Budget Analyst Approval	stilley	02/08/2024 16:11:40 PM



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson Deputy Director

Curtis Palmer Administrator

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 10, 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 **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners' meeting.

# DEPARTMENT OF CONSERVATION & NATURAL RESOURCES – DIVISION OF STATE LANDS

# Agenda Item Write-up:

Pursuant to NRS 321.5954, subsection 4, the State Land Registrar is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. This report covers the period of October 1, 2023 through December 31, 2023.

### Additional Information:

There were no acquisitions of land under the Nevada Land Bank Program during this quarter. There was no transfer of interest in real property that occurred during this quarter. The Tahoe Mitigation budget account had \$4,373,997.53 available in realized funding as of January 2, 2024.

Statutory Authority:

NRS 321.5954

REVIEWED: _	W
INFO ITEM: _	





Joe Lombardo, *Governor*James A. Settelmeyer, *Director*Charles Donohue, *Administrator* 

#### **MEMORANDUM**

DATE:

January 25, 2024

TO:

Amy Stephenson, Director, Governor's Finance Office

FROM:

Charles Donohue, Administrator and State Land Registrar, Nevada Division of State Lands

RE:

BOARD OF EXAMINERS 2nd QUARTER FY 2024 REPORT FOR THE NEVADA

LAND BANK PROGRAM - MEETING DATE OF March 12, 2024

Pursuant to NRS 321.5954, a quarterly report regarding the real property or interests in real property transferred by the Nevada Land Bank Program shall be reported quarterly to the State Board of Examiners.

#### Nevada Land Bank Program:

The Nevada Land Bank is a program housed in the Nevada Division of State Lands (NDSL) and operated by the Nevada Tahoe Resource Team (NTRT) on behalf of the Tahoe Regional Planning Agency (TRPA) through a Memorandum of Understanding and under the authority of Chapter 355, Statutes of Nevada 1993. The Nevada Land Bank acquires sensitive parcels, facilitates land coverage transactions, and mitigates the environmentally detrimental effects of land coverage in the Lake Tahoe Basin by permanently retiring land coverage or by transferring more environmentally sensitive land coverage to less sensitive land types. Land coverage, such as impervious surfaces like parking lots, roads and roofs, is one element of the bundle of development rights required in the Lake Tahoe Basin to move forward with development or redevelopment projects. Allowable coverage on a given parcel is determined by the sensitivity of a parcel's land class: Classes 1 through 3 are more environmentally sensitive lands; Classes 4 through 7 are less sensitive lands. These activities contribute to the protection of the environment at Lake Tahoe. The Nevada Land Bank activities are funded through program revenue and land coverage mitigation fees collected by TRPA that are transferred to NDSL to carry out the program.

This memorandum is to report real property or interests in real property transferred under this program for the quarter ending December 31, 2023 (October 1, 2023 – December 31, 2023).

There were no acquisitions of land during the 2nd quarter.

Zero (0) transfers of an interest in real property occurred during the 2nd quarter.

Any revenue generated from the Nevada Land Bank program is deposited in the Tahoe Mitigation Land Bank budget account (BA 4200). The realized funding available in BA 4200 was \$4,373,997.53, as of January 2, 2024. The Nevada Land Bank utilizes revenue received by land coverage transactions to conduct such activities as acquiring sensitive parcels, permanently retiring land coverage, and transferring more environmentally sensitive land coverage to less sensitive land types, in support of TRPA environmental threshold standards and the Regional Plan.

In the event you have any questions or would like additional information, please contact Kevin Fromherz, Tahoe Program Manager at <a href="https://kevin.gov.nc/kevin.gov">KFromherz@lands.nv.gov</a> or (775) 684-2736.

CD/knf

CC: Chad Stephens, Deputy Director



# STATE OF NEVADA GOVERNOR'S FINANCE OFFICE Budget Division

Amy Stephenson Director

David Johnson Deputy Director

> Curtis Palmer Administrator

209 E. Musser Street, Suite 200 | Carson City, NV 89701- 4298 Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date:

March 12, 2024

To:

Amy Stephenson, Clerk of the Board

Governor's Finance Office

From:

Shayne Powell, Budget Division

Governor's Finance Office

Subject:

BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

#### FISCAL YEAR 2024 – 2<sup>nd</sup> QUARTER OVERTIME REPORT

# Agenda Item Write-up:

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. The Budget Division submits the 2<sup>nd</sup> Quarter Overtime Report and analysis for fiscal year 2024.

#### Additional Information:

As of the 2<sup>nd</sup> quarter of fiscal year 2024, year to date overtime pay and accrued compensatory leave accounted for a total of approximately \$53 million, or 9.4% of total pay, a 2.0% increase from fiscal year 2023.

The 5 agencies with the highest dollar amount of overtime and accrued comp time for the quarter accounted for 65.5% of the total:

- 1. Corrections \$14.3 million
- 2. Health and Human Services \$7.4 million
- 3. Public Safety \$3.5 million
- 4. Transportation \$1.6 million
- 5. Veterans Services \$546 thousand

The 5 agencies with the highest percentage of overtime and accrued comp time as a share of total pay for the 2<sup>nd</sup> quarter of FY24 were:

- 1. Corrections 26.3%
- 2. Veterans Services 13.7%
- 3. Public Safety 12.6%
- 4. Health and Human Services 7.2%
- 5. Transportation 5.7%

The Department of Corrections overtime and comp time increased by \$790 thousand or 5.8% from the prior quarter and continued to be driven by correctional centers and medical personnel. Overtime and comp time for the 2<sup>nd</sup> quarter of FY24 were highest at these 6 locations in addition to medical care expenses, which accounted for 91.9% of the total overtime for the department:

- 1. High Desert State Prison \$4.6 million
- 2. Southern Desert Correctional Center \$2.2 million
- 3. Lovelock Correctional Center \$1.6 million
- 4. Ely State Prison \$1.6 million
- 5. Northern Nevada Correctional Center \$1.5 million
- 6. McClure Women's Correctional Center \$1.4 million
- 7. Prison Medical Care \$290 thousand

By event code, the highest four causes accounted for 88.5% of the overtime:

- 1. Annual and Military Leave Coverage \$7.8 million
- 2. Muster Pay \$2.7 million
- 3. Holiday & Weekend Coverage \$1.2 million
- 4. Agency Defined OT Code \$947 thousand

The Department of Health and Human Services' total overtime of \$7.4 million for the 2<sup>nd</sup> quarter of FY24 is a composite of its six divisions:

- 1. Welfare and Supportive Services \$3.0 million
- 2. Public and Behavioral Health \$2.2 million
- 3. Child and Family Services \$1.4 million
- 4. Aging and Disability Services \$719 thousand
- 5. Health Care Financing & Policy \$29 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 \$2.8 million
- 2. Vacancy Coverage \$1.5 million
- 3. 24-Hour Coverage \$847 thousand
- 4. Holiday & Weekend Coverage \$675 thousand

REVIEWED:	_
INFO ITEM:	

## 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
370	06 HR-PRISON MEDICAL CARE	\$5,083,323.83	510:10:00	\$22,790.11		\$268,233.95		\$291,024.06		\$322,735.06	_	(31,711.00)
370	08 HR-OFFENDERS' STORE FUND	\$706,537.97	1:30	\$74.24	18:00	\$1,117.70	19:30	\$1,191.94		\$2,546.58		(1,354.64)
37:	10 HR-DIRECTOR'S OFFICE	\$3,105,011.81	595:18:00	\$23,143.69	3149:54:00	\$205,189.80	3745:12:00	\$228,333.49	4781:18:00	\$303,467.66	\$	(75,134.17)
37:	11 HR-CORRECTIONAL PROGRAMS	\$1,606,922.93	43:15:00	\$1,260.07	627:20:00	\$34,981.13	670:35:00	\$36,241.20	446:48:00	\$22,697.84	\$	13,543.36
37:	15 HR-SO NEVADA CORRECTIONAL CTR	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	\$	
372	16 HR-WARM SPRINGS CORRECTNL CTR	\$223,726.48	195:21:00	\$8,065.85	847:10:00	\$58,315.01	1042:31:00	\$66,380.86	1234:03:00	\$79,094.76	\$	(12,713.90)
373	17 HR-NO NEVADA CORRECTNL CENTER	\$4,356,325.97	2239:28:00	\$77,532.91	28406:09	\$1,467,073.69	30645:37	\$1,544,606.60	32095:01	\$1,696,176.06	\$	(151,569.46)
371	18 HR-NEVADA STATE PRISON	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00		\$0.00
371	19 HR-PRISON INDUSTRY	\$265,890.24	0:00	\$0.00	1320:30:00	\$83,310.95	1320:30:00	\$83,310.95	986:55:00	\$62,291.41	\$	21,019.54
372	22 HR-STEWART CONSERVATION CAMP	\$206,103.60	137:48:00	\$5,201.89	725:45:00	\$39,814.39	863:33:00	\$45,016.28	909:27:00	\$53,504.49	\$	(8,488.21)
372	23 HR-PIOCHE CONSERVATION CAMP	\$267,414.80	99:00:00	\$3,722.82	836:30:00	\$44,731.03	935:30:00	\$48,453.85	1041:50:00	\$58,541.29	\$	(10,087.44)
372	24 HR-NO NV TRANSITIONAL HOUSING	\$221,975.04	12:57	\$702.67	588:35:00	\$35,762.54	601:32:00	\$36,465.21	583:00:00	\$38,471.31	\$	(2,006.10)
372	25 HR-THREE LAKES VLY CNSRVTN CMP	\$382,339.29	589:40:00	\$23,735.32	2509:32:00	\$145,598.23	3099:12:00	\$169,333.55	2298:35:00	\$125,389.95	\$	43,943.60
372	27 HR-PRISON RANCH	\$69,854.70	0:00	\$0.00	69:00:00	\$2,670.76	69:00:00	\$2,670.76	189:50:00	\$8,085.19	\$	(5,414.43)
373	38 HR-SO DESERT CORRECTIONAL CTR	\$3,757,234.55	4448:20:00	\$160,880.89	37239:50	\$2,041,798.92	41688:10	\$2,202,679.81	36854:48	\$1,971,705.19	\$	230,974.62
373	39 HR-WELLS CONSERVATION CAMP	\$207,621.68	138:14:00	\$4,987.15	910:50:00	\$45,858.85	1049:04:00	\$50,846.00	988:48:00	\$49,021.30	\$	1,824.70
374	11 HR-HUMBOLDT CONSERVATION CAMP	\$115,708.80	314:34:00	\$11,256.15	1029:45:00	\$63,442.54	1344:19:00	\$74,698.69	1153:16:00	\$69,856.30	\$	4,842.39
374	17 HR-ELY CONSERVATION CAMP	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	\$	-
374	18 HR-JEAN CONSERVATION CAMP	\$176,364.64	140:02:00	\$5,079.72	1109:44:00	\$58,253.98	1249:46:00	\$63,333.70	1070:13:00	\$56,744.18	\$	6,589.52
374	9 HR-SILVER SPRNGS CONSERVATION	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00	0:00	\$0.00		\$0.00
375	51 HR-ELY STATE PRISON	\$2,871,861.45	2651:16:00	\$95,836.10	23799:28	\$1,462,286.65	26450:44	\$1,558,122.75	25198:05	\$1,507,282.39	\$	50,840.36
375	2 HR-CARLIN CONSERVATION CAMP	\$165,410.88	9:00	\$260.40	1954:30:00	\$118,194.11	1963:30:00	\$118,454.51	1726:55:00	\$108,277.34	\$	10,177.17
375	4 HR-TONOPAH CONSERVATION CAMP	\$104,271.84	0:00	\$0.00	332:35:00	\$16,999.74	332:35:00	\$16,999.74	184:53:00	\$10,003.29	\$	6,996.45
375	9 HR-LOVELOCK CORRECTIONAL CTR	\$3,021,020.87	1600:15:00	\$57,487.21	26702:56	\$1,539,975.10	28303:11	\$1,597,462.31	24815:02	\$1,464,741.92	\$	132,720.39
376	0 HR-CASA GRANDE TRANS HOUSING	\$568,436.72	404:45:00	\$14,691.96	1819:20:00	\$102,394.54	2224:05:00	\$117,086.50	1906:00:00	\$105,662.67	\$	11,423.83
376	1 HR-F MCCLURE WOMENS COR CTR	\$3,096,711.09	3020:53:00	\$112,615.29	22697:40	\$1,250,334.49	25718:33	\$1,362,949.78	24223:05	\$1,307,800.60	\$	55,149.18
376	2 HR-HIGH DESERT STATE PRISON	\$9,192,203.94	9549:08:00	\$348,162.27	78336:17	\$4,258,320.30	87885:25	\$4,606,482.57	76309:44	\$4,104,109.59	\$	502,372.98
376	3 HR-INMATE WELFARE ACCOUNT	\$346,348.45	6:45	\$172.60	179:45:00	\$6,902.27	186:30:00	\$7,074.87	260:40:00	\$11,086.57	\$	(4,011.70)
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3762 3738	HR-HIGH DESERT STATE PRISON HR-SO DESERT CORRECTIONAL CTR	\$ 9,192,203.94 \$ 3,757,234.55	9549:08:00 \$ 4448:20:00 \$	348,162.27 160,880.89	78336:17 3	· · · · · ·	87885:25 \$	4,606,482.57		ain english for memo		
3759	HR-LOVELOCK CORRECTIONAL CTR	\$ 3,021,020.87	1600:15:00 \$	57,487.21	37239:50 3 26702:56 3		41688:10 <b>\$</b> 28303:11 <b>\$</b>	2,202,679.81 1,597,462.31	\$2.20 Million \$1.60 Million			
3751	HR-ELY STATE PRISON	\$ 2,871,861.45	2651:16:00 \$	95,836.10	23799:28		26450:44 \$	1,558,122.75	\$1.56 Million			
3717	HR-NO NEVADA CORRECTNL CENTER	\$ 4,356,325.97	2239:28:00 \$	77,532.91	28406:09		30645:37 \$	1,544,606.60	\$1.54 Million			
3761	HR-F MCCLURE WOMENS COR CTR	\$ 3,096,711.09	3020:53:00 \$	112,615.29	22697:40	1,250,334.49	25718:33 \$	1,362,949.78	\$1.36 Million			
3706	HR-PRISON MEDICAL CARE	\$ 5,083,323.83	510:10:00 \$	22,790.11	4728:00:00	268,233.95	5238:10:00 \$	291,024.06	\$0.29 Million			
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63 AGNCY DEFINE	776:15:00 \$	26,757.63	16049:01 \$	920,138.09	16825:16 \$	946,895.72
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	\$105,520 \$1,050,40 \$2,887,406.01 636 \$0,00 \$11,011.19 11 \$24,808.61 41	\$14750.21 \$18.266 \$21,000.87 4* \$13,100.87 5* \$0.00 \$15,000.87 5* \$0.00 \$12,000.87 5* \$0.00 \$234,777.26 5* \$0.00 \$24,777.77 \$0.00
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	\$226,509,83 \$4,404,327.18 \$23,942,519,94 \$1,485,694,46 \$206,424.06	\$276.567.88 \$478.06.43 \$1,068.971.53 \$5,066.13 \$0.00 \$371,169.45 \$2,00.80.31 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$0.00 \$7.51,148.7 \$7.50 \$
	9 HR-CHILD CARE SERVICES 89 HR-WELFARE ADMINISTRATION 81 HR-WELFARE FIELD SERVICES 80 HR-CHILD CARE ASSIST & DEVEL 52 HR-ENERGY ASSISTANCE - WELFARE 52 HR-ENERGY ASSISTANCE - WELFARE	1333 HR. COMMUNITY JUV JUSTICE PRG 3143 HR.
406 -PUBLIC AND BEHAVIOPAL HEALTH	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	409 - CHILD AND FAMILY DIVISION 409 - CHILD AND FAMILY DIVISIO

Row Labels	Sum	Sum of Dollars12	Row Labels	S.	Sum of Dollares
BACKLOG REDU	€9	2,776,218,72	407 - DIV OF WEI FARERSHIPPORTIVE SVCS	9	3 008 747 7E
COVER-VACANT	· <del>69</del>	1,469,018.39	HR-WFI FARE FIELD SERVICES	÷ ⊌	2,000,141.13
COVER-24 HR	↔	847,117.92	HR-WELFARE ADMINISTRATION	÷ +9	105.521.94
COVER-HOL/WK	↔	675,135.80	HR-ENERGY ASSISTANCE - WELFARE	₩	24.808.61
AGNCY DEFINE	↔	589,708.75	HR-CHILD CARE ASSIST & DEVEL	€9	11.011.19
WORKLOAD	↔	300,418.22	HR-CHILD SPPRT ENFORCEMENT PRG	₩.	
CLIENT SVCS	↔	123,749.23	HR-CHILD CARE SERVICES	€9	1
COVER-SICK	↔	116,269.40	(blank)	-	
TRAINING	↔	114,522.35	406 - PUBLIC AND BEHAVIORAL HEALTH	49	2,180,142.82
COVER-AL/MIL	↔	69,074.02	HR-SO NEV ADULT MENTAL HEALTH	€9	1,499,064.62
PROGRAM DEAD	↔	49,552.19	HR-FAC FOR MENTAL OFFENDER	↔	524,260.98
OFFICE SPPRT	↔	48,241.82	HR-NNV ADULT MENTAL HEALTH SVC	€9	64,949.96
TRAVEL	↔	38,622.57	HR-OFF OF STATE HEALTH ADMIN	69	25,316,70
INVESTIGATE	↔	31,028.01	HR-HEALTH CARE FACILITY REG	€9	22,911.19
EMERGENCIES	↔	29,378.22	HR-BEHAVIORAL HEALTH PREV & TR	↔	12,298.43
SPECIAL EVNT	↔	18,373.48	HR-CANCER CONTROL REGISTRY	↔	8,286.97
CLIENT MEET	↔	16,862.64	HR-RADIATION CONTROL PROGRAM	69	5,291.10
MEETINGS	s	8,271.18	HR-BEHAVIORIAL HEALTH ADMINSTR	€	4,661.10
COVER-INJURY	↔	6,958.60	HR-COMMUNICABLE DISEASES	69	4,519.10
COURT	s S	6,849.42	HR-COMMUNITY HEALTH SERVICES	69	3,125.28
TRAIN-PERSON	€9 -	6,741.02	HR-MATERNAL CHILD HEALTH SRVC	↔	2,475.57
ACCT/FISCAL	↔	6,727.44	HR-HEALTH ALERT NETWORK	↔	2,190.16
COVER-TRAIN	<b>69</b> (	6,284.00	HR-HHS DPBH RURAL CLINICS	↔	358.78
STAFF MEET	<b>↔</b> (	5,899.59	HR-EMERGENCY MEDICAL SERVICES	↔	310.86
ADMIN SUPPRT	↔ (	5,347.11	HR-HHS HD BIOSTATS & EPIDMLG	↔	122.02
CONFERENCES	<b>69</b> (	4,751.50	(blank)	↔	,
SITE REPAIR	↔	4,586.02	HR-BEHAVIORIAL HLTH INFO SYSTM	↔	•
BUDGET PREP	↔	4,153.52	HR-OFFICE OF MINORITY HEALTH	မှာ	ı
PERSONNEL	↔	3,877.44	HR-WIC FOOD SUPPLEMENT	↔	•
ACCIDENTS	↔	2,829.59	HR- MED MARIJUANA ESTABLISHMEN	↔	•
WORKSHOPS	S	1,039.88	HR- MARIJUANA HEALTH REGISTRY	မ	,
ADMIN	↔	920.98	HR-ENVIRONMENTAL HEALTH SRVCS	မ	,
COVID-19	s	122.02	HR-PREVTREAT OF PROBLEM GAMBL	မ	1
SHIFT TRADE	<del>()</del>	•	HR-CHILD CARE SERVICES	s	٠
(blank)			HR-HEALTH STATISTICS&PLANNING	s	ı
Grand Total	€>	7,388,651.04	HR-IMMUNIZATION PROGRAM	↔	•
			HR-EARLY INTERVENTION SVCS	G	1
			HR-CHRONIC DISEASE	↔	,

HK-HEALTH STATISTICS&PLANNING	NING	•
HR-IMMUNIZATION PROGRAM	₩	,
HR-EARLY INTERVENTION SVCS	SS	ı
HR-CHRONIC DISEASE	€	
409 - CHILD AND FAMILY DIVISION	es Z	1,427,168.70
HR-NEVADA YOUTH TRAINING CTR	CTR	350,709.68
HR-SO NEV CHILD & ADLSCNT SVCS	SVCS \$	327,956.04
HR-SUMMIT VIEW YOUTH CENTER	TER \$	275,195.59
HR-CALIENTE YOUTH CENTER	€9	173,688.16
HR-RURAL CHILD WELFARE	₩	163,965.35
HR-NO NEV CHILD & ADLSCNT SVCS	SVCS \$	59,391.35
HR-CHILDREN/YOUTH/FAMILY ADMIN	ADMIN \$	23,212.85
HR-COMMUNITY JUV JUSTICE PRG	PRG \$	20,357.21
HR-YOUTH PAROLE SERVICES	↔	17,654.71
(blank)	\$	14,855.10
HR-INFORMATION SERVICES	↔	182.66
HR-VICTIMS OF CRIME	<b>⇔</b>	•
HR-CHILD CARE SERVICES 402 - AGING AND DISABILITY SEDVICES	⊕ <del>€</del>	0000
TO DESCRIPT DESCRIPTION OF THE PROPERTY OF THE		718,677.86
AN-DEGENT REGIONAL CENTER CONTRACTOR INTO TAXABLE CONTRACTOR IN TA	۶۶ ( ۲	557,001.30
HPAGING EEDEDAL DDOG & ADMIN	S&LC SWIN	93,413.96
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HINTER AND ADVOCACT AND SOLVE AND SO	COIMIN	7,048.66
HIN-EARLT INTERVENTION SYCS	ν <del>ς</del>	1,313.38
SOLICE TRUE TENDERS TO SOLICE TO SOL		1,293.72
HR-COMMONILY BASED SERVICES	CES \$	1,074.28
HK-AUTISM IREATMENT PROGRAM	SRAM \$	814.69
HK-SIEKKA KEGIONAL CENTER	<u>د</u>	254.70
HR-HHS DO CONSUMER HEALTH ASSI	rh Assi \$	238.55
HR-SENIOR RX AND DISABILITY RX	/ RX	
HR-KUKAL REGIONAL CENTER	↔	ı
HK-HK HOMEMAKEK	4	•
HR-FOCIS AND MFP	€	•
HR-SR CITIZEN PROP TAX ASSIST	IST \$	•
HR-COMMUNICATION ACCESS SRVCS	SRVCS \$	
HR-TOBACCO SETTLEMENT PROGRAM	ROGRAM \$	1
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BASED FROM FROM FROM FROM FROM FROM FROM FROM	J PRUG	
403 - HEALTH CARE FINANCING & POLICY	, POLICY \$	28,981.28
HR-HEALTH CARE FIN & POLICY	<b>⇔</b> ≻	28,981.28
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400 - DEPLOF HEALIH AND HUMAN SERV		24,932.63
HR-IDEA PART C COMPLIANCE	€	11,678.91
HR-GRANTS MANAGEMENT UNIT		5,603.69
HR-ADMINISTRATION	<b>\$</b>	3,754.84
HK-DEVELOPMEN AL DISABILITIES		3,610.30
HR-DALA ANALY LICS HR-DISABILITY SEDVICES	<del>69</del> 6	284.89
TR-UISABILIII SERVICES	Ð	

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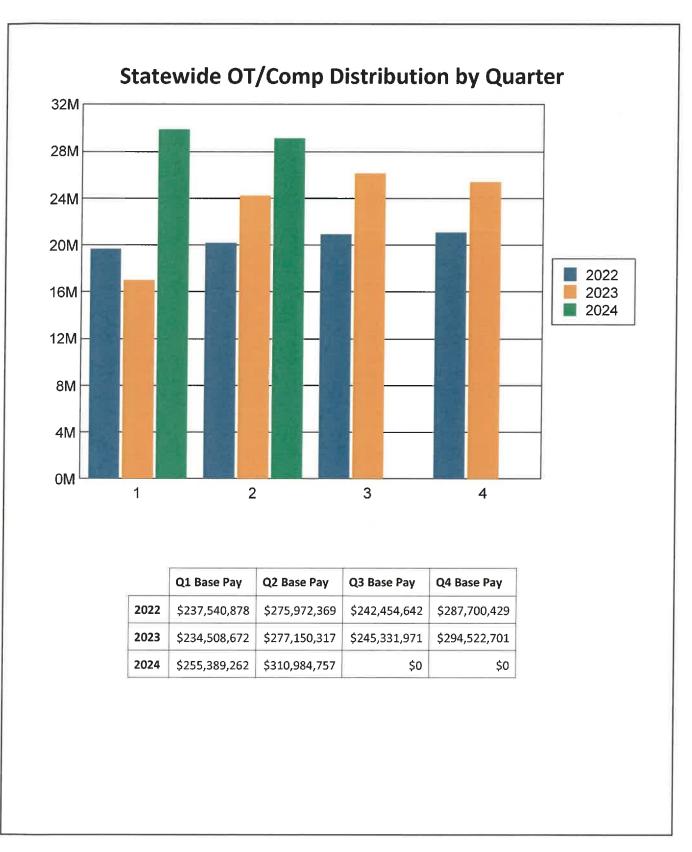
# FISCAL YEAR 2024 SUMMARY (QTR 2) NEVADA DEPARTMENT OF ADMINISTRATION

	2022	2023 2024	
BASE PAY	\$513,513,246	\$511,658,988	\$566,374,019
OVERTIME PAY + ACCRUED COMP	\$39,792,042	\$41,287,307	\$59,003,371
TOTAL PAY	\$553,305,288	\$552,946,295	\$625,377,390
OT/COMP AS A SHARE OF TOTAL PAY	7.19%	7.47%	9.43%

44 DEPARTMENT OF CORRECTIONS \$14,329,220 26.32%
40 DEDARTMENT OF HEALTH AND \$7,000 FOA \$7,000
40 DEPARTMENT OF HEALTH AND \$7,388,584 7.18% HUMAN SERVICES
65 DEPARTMENT OF PUBLIC SAFETY \$3,459,684 12.63%
80 DEPARTMENT OF TRANSPORTATION \$1,636,355 5.68%
24 DEPARTMENT OF VETERANS SERVICE \$545,562 13.69%

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay	
44	DEPARTMENT OF CORRECTIONS	\$14,329,220	26.32%	
24	DEPARTMENT OF VETERANS SERVICE	\$545,562	13.69%	
65	DEPARTMENT OF PUBLIC SAFETY	\$3,459,684	12.63%	
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$7,388,584	7.18%	
80	DEPARTMENT OF TRANSPORTATION	\$1,636,355	5.68%	

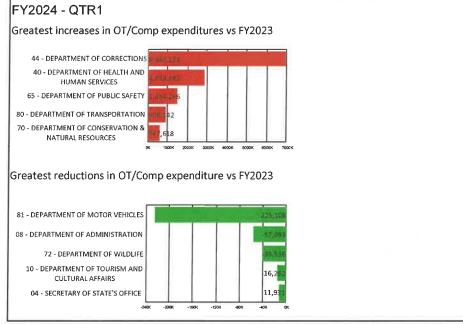


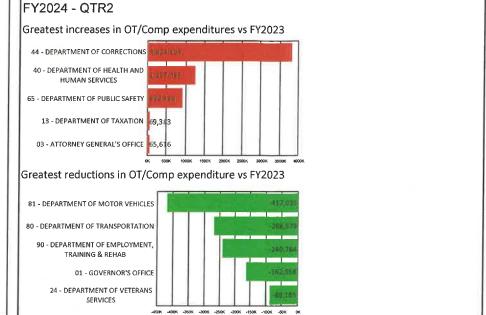


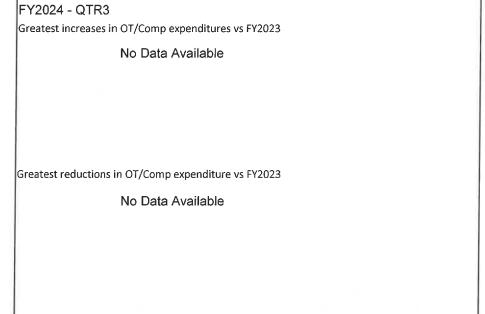
#### FISCAL YEAR 2024 QUARTERLY ANALYSIS vs FY2023

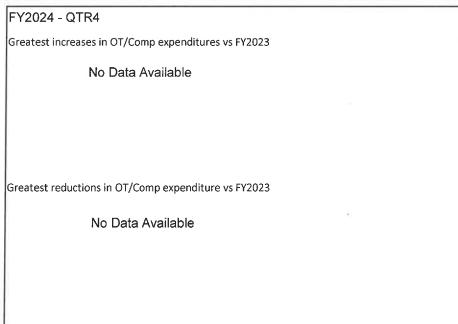
**NEVADA DEPARTMENT OF ADMINISTRATION** 

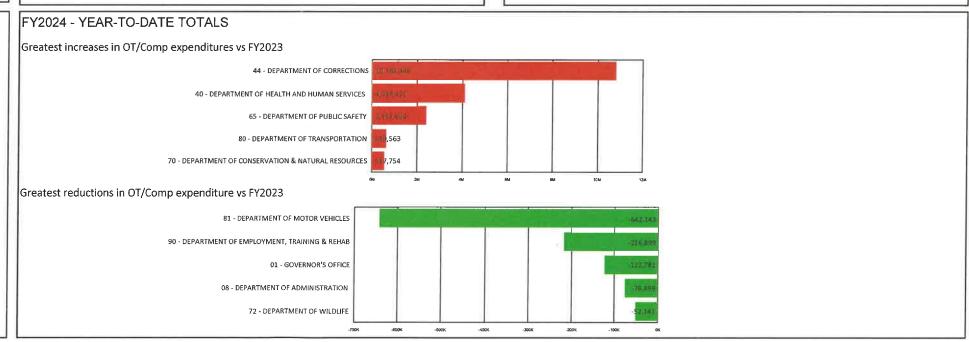












# FISCAL YEAR 2024 QUARTERLY DETAILED ANALYSIS NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, March 12, 2024	FY2024QTR1 FY2024QTR2									FY2024 QTR1-QTR2				
	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	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2023	Overtime Pay and	·	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	\$90,843	\$7,183,664	1.26%	\$-162,958	\$206,826.48	12,642,814.27	1.64%	\$-122,781		
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$136,272	0.00%	\$0	\$0	\$179,315	0.00%	\$0	\$0.00	\$315,586.89	0.00%	\$0		
03 - ATTORNEY GENERAL'S OFFICE	\$101,533	\$6,921,337	1.47%	\$76,200	\$105,714	\$8,787,042	1.20%	\$65,616	\$207,246.69	15,708,378.83	1.32%	\$141,816		
04 - SECRETARY OF STATE'S OFFICE	\$29,909	\$1,748,920	1.71%	\$-11,931	\$17,045	\$2,234,136	0.76%	\$-34,217	\$46,953.73	\$3,983,055.63	1.18%	\$-46,149		
05 - TREASURER'S OFFICE	\$20,568	\$742,125	2.77%	\$16,902	\$26,488	\$947,776	2.79%	\$20,035	\$47,055.27	\$1,689,900.24	2.78%	\$36,937		
06 - CONTROLLER'S OFFICE	\$31,594	\$733,682	4.31%	\$-1,685	\$24,102	\$889,607	2.71%	\$-28,463	\$55,695.08	\$1,623,289.20	3.43%	\$-30,149		
08 - DEPARTMENT OF ADMINISTRATION	\$80,672	\$5,261,193	1.53%	\$-57,093	\$88,219	\$6,822,323	1.29%	\$-19,406	\$168,891.28	12,083,516.01	1.40%	\$-76,499		
09 - JUDICIAL BRANCH	\$0	\$0		\$-11,692	\$0	\$0	0.00%	\$0	\$0.00	\$0.00		\$-11,692		
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$9,022	\$1,548,928	0.58%	\$-16,262	\$17,421	\$2,011,722	0.87%	\$6,992	\$26,442.62	\$3,560,649.46	0.74%	\$-9,270		
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$236,564	0.00%	\$0	\$1,303	\$391,945	0.33%	\$1,303	\$1,303.49	\$628,509.57	0.21%	\$1,303		
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$672,878	0.00%	\$-100	\$0	\$921,627	0.00%	\$-471	\$0.00	\$1,594,505.04	0.00%	\$-570		
13 - DEPARTMENT OF TAXATION	\$54,387	\$4,571,357	1.19%	\$17,037	\$104,013	\$5,871,468	1.77%	\$69,383	\$158,399.93	10,442,824.35	1.52%	\$86,420		
15 - COMMISSION ON ETHICS	\$0	\$107,588	0.00%	\$0	\$0	\$156,705	0.00%	\$0	\$0.00	\$264,293.20	0.00%	\$0		
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$81,229	0.00%	\$0	\$0	\$103,326	0.00%	\$0	\$0.00	\$184,554.80	0.00%	\$0		
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$135,947	0.00%	\$0	\$0	\$172,346	0.00%	\$0	\$0.00	\$308,292.80	0.00%	\$0		
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$123	\$241,145	0.05%	\$-555	\$2,332	\$291,094	0.80%	\$-13	\$2,454.32	\$532,239.04	0.46%	\$-568		
24 - DEPARTMENT OF VETERANS SERVICES	\$516,514	\$3,197,105	16.16%	\$89,057	\$545,562	\$3,986,223	13.69%	\$-88,185	\$1,062,076.01	\$7,183,328.03	14.79%	\$872		
27 - CANNABIS COMPLIANCE BOARD	\$34,380	\$1,228,738	2.80%	\$-5,323	\$33,825	\$1,534,785	2.20%	\$8,542	\$68,204.37	\$2,763,522.20	2.47%	\$3,220		
30 - DEPARTMENT OF EDUCATION	\$42,580	\$2,941,565	1.45%	\$-4,681	\$41,207	\$3,790,069	1.09%	\$8,689	\$83,787.02	\$6,731,634.18	1.24%	\$4,007		
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$5,455	\$470,584	1.16%	\$-5,958	\$16,742	\$598,375	2.80%	\$9,918	\$22,197.20	\$1,068,959.23	2.08%	\$3,960		
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$6,467,523	\$84,695,357	7.64%	\$2,839,387	\$7,388,584	\$102,926,021	7.18%	\$1,257,035	13,856,106.64	87,621,378.24	7.39%	\$4,096,421		
43 - ADJUTANT GENERAL	\$212,174	\$2,329,454	9.11%	\$98,642	\$154,760	\$2,903,569	5.33%	\$41,512	\$366,934.93	\$5,233,022.44	7.01%	\$140,153		
44 - DEPARTMENT OF CORRECTIONS	\$13,539,643	\$44,196,353	30.64%	\$6,940,251	\$14,329,220	\$54,447,842	26.32%	\$3,824,195	27,868,863.35	98,644,194.39	28.25%	\$10,764,446		
50 - COMMISSION ON MINERAL RESOURCES	\$7,749	\$216,111	3.59%	\$4,211	\$0	\$216,787	0.00%	\$0	\$7,748.80	\$432,898.51	1.79%	\$4,211		
55 - DEPARTMENT OF AGRICULTURE	\$39,669	\$2,158,337	1.84%	\$21,617	\$18,491	\$2,783,120	0.66%	\$-5,958	\$58,160.19	\$4,941,456.66	1.18%	\$15,659		
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,898,846	0.00%	\$0	\$0	\$2,447,273	0.00%	\$0	\$0.00	\$4,346,119.08	0.00%	\$0		
61 - GAMING CONTROL BOARD	\$161,741	\$6,256,990	2.58%	\$31,714	\$194,106	\$7,979,259	2.43%	\$28,491	\$355,846.84	14,236,248.80	2.50%	\$60,205		
65 - DEPARTMENT OF PUBLIC SAFETY	\$3,733,547	\$22,409,406	16.66%	\$1,494,266	\$3,459,684	\$27,386,988	12.63%	\$899,338	\$7,193,231.24	49,796,394.12	14.45%	\$2,393,604		
69 - COLORADO RIVER COMMISSION	\$5,505	\$704,594	0.78%	\$1,472	\$1,828	\$863,441	0.21%	\$-765	\$7,332.73	\$1,568,035.53	0.47%	\$707		
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,430,163	\$12,854,509	11.13%	\$587,618	\$168,128	\$13,102,016	1.28%	\$-39,864	\$1,598,290.87	25,956,525.36	6.16%	\$547,754		
72 - DEPARTMENT OF WILDLIFE	\$66,775	\$3,783,769	1.76%	\$-39,536	\$51,438	\$4,609,730	1.12%	\$-12,605	\$118,213.43	\$8,393,498.69	1.41%	\$-52,141		
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$113,434	\$9,017,224	1.26%	\$15,055	\$73,228	\$11,537,429	0.63%	\$-23,628	\$186,661.55	20,554,652.94	0.91%	\$-8,573		
80 - DEPARTMENT OF TRANSPORTATION	\$2,135,376	\$29,254,486	7.30%	\$908,142	\$1,636,355	\$28,786,310	5.68%	\$-268,579	\$3,771,730.50	58,040,795.58	6.50%	\$639,563		
31 - DEPARTMENT OF MOTOR VEHICLES	\$228,113	\$13,589,385	1.68%	\$-225,108	\$193,747	\$17,923,256	1.08%	\$-417,035	\$421,859.71	31,512,641.10	1.34%	\$-642,143		
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$665,199	\$14,783,220	4.50%	\$23,865	\$354,090	\$14,321,595	2.47%	\$-240,764	\$1,019,289.73	29,104,815.41	3.50%	\$-216,899		
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$5,550	\$321,465	1.73%	\$3,104	\$8,040	\$510,145	1.58%	\$8,040	\$13,590.15	\$831,610.19	1.63%	\$11,145		
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$843	\$339,175	0.25%	\$-618	\$1,133	\$514,075	0.22%	\$1,133	\$1,976.80	\$853,250.01	0.23%	\$515		
Total	\$29,855,726	\$285,244,988	10.47%	\$12,828,175	\$29,147,645	\$340,132,402	8.57%	\$4,907,311	\$59,003,371	\$625,377,390	9.43%	\$17,735,486		



FISCAL YEAR 2024 COMPARATIVE YEAR-TO\_DATE ANALYSIS (QTR1-QTR2) VS FY2022-FY2023 NEVADA DEPARTMENT OF ADMINISTRATION



	FY 2022 QTR1-QTR2		FY 2023 QTR1-QTR2						FY 2024 QTR1-QTR2			
	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		Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp vs Prior Fiscal Yea
01 - GOVERNOR'S OFFICE	\$60,728	\$4,774,264	1.27%	\$-346,243	\$329,607	\$5,405,909	6.10%	\$268,880	\$206,826	\$12,642,814	1.64%	\$-122,78
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$92,592	0.00%	\$0	\$0	\$247,676	0.00%	\$0	\$0	\$315,587	0.00%	\$
03 - ATTORNEY GENERAL'S OFFICE	\$76,269	\$13,926,296	0.55%	\$-41,529	\$65,430	\$13,770,988	0.48%	\$-10,839	\$207,247	\$15,708,379	1.32%	\$141,81
04 - SECRETARY OF STATE'S OFFICE	\$53,576	\$3,395,398	1.58%	\$45,017	\$93,102	\$3,444,442	2.70%	\$39,526	\$46,954	\$3,983,056	1.18%	\$-46,14
05 - TREASURER'S OFFICE	\$7,392	\$1,414,071	0.52%	\$3,338	\$10,118	\$1,380,685	0.73%	\$2,726	\$47,055	\$1,689,900	2.78%	\$36,93
06 - CONTROLLER'S OFFICE	\$101,119	\$1,429,583	7.07%	\$22,046	\$85,844	\$1,552,010	5.53%	\$-15,275	\$55,695	\$1,623,289	3.43%	\$-30,14
08 - DEPARTMENT OF ADMINISTRATION	\$200,096	\$15,814,965	1.27%	\$-8,457	\$245,390	\$16,126,917	1.52%	\$45,294	\$168,891	\$12,083,516	1.40%	\$-76,49
09 - JUDICIAL BRANCH	\$16,781	\$15,313,499	0.11%	\$15,740	\$31,114	\$15,318,624	0.20%	\$14,333	\$0	\$0		\$-11,69
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$23,155	\$2,666,147	0.87%	\$12,331	\$35,713	\$2,933,988	1.22%	\$12,557	\$26,443	\$3,560,649	0.74%	\$-9,27
11 - DEPARTMENT OF INDIGENT DEFENSE SERVICES	\$0	\$883,071	0.00%	\$0	\$0	\$834,720	0.00%	\$0	\$1,303	\$628,510	0.21%	\$1,30
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$1,452,146	0.00%	\$0	\$570	\$1,440,588	0.04%	\$570	\$0	\$1,594,505	0.00%	\$-570
13 - DEPARTMENT OF TAXATION	\$60,514	\$8,816,499	0.69%	\$12,529	\$71,979	\$9,160,356	0.79%	\$11,466	\$158,400	\$10,442,824	1.52%	\$86,420
15 - COMMISSION ON ETHICS	\$0	\$221,964	0.00%	\$0	\$0	\$245,782	0.00%	\$0	\$0	\$264,293	0.00%	\$0
16 - DEPARTMENT OF SENTENCING POLICY	\$0	\$123,573	0.00%	\$0	\$0	\$164,205	0.00%	\$0	\$0	\$184,555	0.00%	\$(
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$225,637	0.00%	\$0	\$0	\$273,110	0.00%	\$0	\$0	\$308,293	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$2,207	\$519,464	0.42%	\$1,374	\$3,022	\$474,545	0.64%	\$816	\$2,454	\$532,239	0.46%	\$-568
24 - DEPARTMENT OF VETERANS SERVICES	\$1,140,976	\$6,623,631	17.23%	\$16,426	\$1,061,204	\$6,395,507	16.59%	\$-79,772	\$1,062,076	\$7,183,328	14.79%	\$872
27 - CANNABIS COMPLIANCE BOARD	\$25,961	\$1,589,446	1.63%	\$-65,152	\$64,985	\$2,337,794	2.78%	\$39,024	\$68,204	\$2,763,522	2.47%	\$3,220
30 - DEPARTMENT OF EDUCATION	\$74,551	\$5,629,700	1.32%	\$-5,678	\$79,780	\$6,001,563	1.33%	\$5,228	\$83,787	\$6,731,634	1.24%	\$4,007
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$35,961	\$805,574	4.46%	\$15,906	\$18,237	\$952,078	- 1.92%	\$-17,724	\$22,197	\$1,068,959	2.08%	\$3,960
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$10,368,990	\$158,346,695	6.55%	\$109,208	\$9,759,685	\$162,345,370	6.01%	\$-609,305	\$13,856,107	\$187,621,378	7.39%	\$4,096,421
43 - ADJUTANT GENERAL	\$374,580	\$4,620,965	8.11%	\$210,794	\$226,782	\$4,513,691	5.02%	\$-147,798	\$366,935	\$5,233,022	7.01%	\$140,153
44 - DEPARTMENT OF CORRECTIONS	\$14,523,030	\$81,755,271	17.76%	\$2,979,273	\$17,104,418	\$77,753,209	22.00%	\$2,581,387	\$27,868,863	\$98,644,194	28.25%	\$10,764,446
50 - COMMISSION ON MINERAL RESOURCES	\$13,836	\$410,865	3.37%	\$9,336	\$3,538	\$371,488	0.95%	\$-10,298	\$7,749	\$432,899	1.79%	\$4,211
55 - DEPARTMENT OF AGRICULTURE	\$23,490	\$3,981,965	0.59%	\$-18,330	\$42,501	\$4,309,795	0.99%	\$19,011	\$58,160	\$4,941,457	1.18%	\$15,659
58 - PUBLIC UTILITIES COMMISSION	\$0	\$4,038,609	0.00%	\$0	\$0	\$3,937,380	0.00%	\$0	\$0	\$4,346,119	0.00%	\$0
61 - GAMING CONTROL BOARD	\$311,959	\$12,833,702	2.43%	\$147,689	\$295,642	\$12,904,861	2.29%	\$-16,317	\$355,847	\$14,236,249	2.50%	\$60,205
65 - DEPARTMENT OF PUBLIC SAFETY	\$4,566,507	\$43,127,192	10.59%	\$362,661	\$4,799,628	\$42,091,099	11.40%	\$233,121	\$7,193,231	\$49,796,394	14.45%	\$2,393,604
69 - COLORADO RIVER COMMISSION	\$3,210	\$1,384,447	0.23%	\$-634	\$6,626	\$1,499,543	0.44%	\$3,416	\$7,333	\$1,568,036	0.47%	\$707
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$1,591,863	\$23,016,189	6.92%	\$-124,645	\$1,050,537	\$22,903,638	4.59%	\$-541,326	\$1,598,291	\$25,956,525	6.16%	\$547,754
72 - DEPARTMENT OF WILDLIFE	\$154,325	\$7,630,534	2.02%	\$6,593	\$170,354	\$7,739,664	2.20%	\$16,029	\$118,213	\$8,393,499	1.41%	\$-52,141
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$81,072	\$17,933,823	0.45%	\$-151,267	\$195,234	\$18,002,051	1.08%	\$114,162	\$186,662	\$20,554,653	0.91%	\$-8,573
80 - DEPARTMENT OF TRANSPORTATION	\$3,049,863	\$53,013,415	5.75%	\$1,311,835	\$3,132,167	\$51,220,224	6.12%	\$82,305	\$3,771,731	\$58,040,796	6.50%	\$639,563
81 - DEPARTMENT OF MOTOR VEHICLES	\$1,148,095	\$27,875,888	4.12%	\$643,254	\$1,064,003	\$27,627,431	3.85%	\$-84,092	\$421,860	\$31,512,641	1.34%	\$-642,143
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$1,701,935	\$26,059,576	6.53%	\$-680,643	\$1,236,189	\$25,724,794	4.81%	\$-465,747	\$1,019,290	\$29,104,815	3.50%	\$-216,899
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$0	\$815,907	0.00%	\$0	\$2,446	\$757,194	0.32%	\$2,446	\$13,590	\$831,610	1.63%	\$11,145
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$742,725	0.00%	\$-6,631	\$1,462	\$783,378	0.19%	\$1,462	\$1,977	\$853,250	0.23%	\$515
Total Total	\$39,792,042	553,305,288.14	7.19%	\$4,476,139	\$41,287,307	552,946,295.40	7.47%	\$1,495,265	\$59,003,371	625,377,390.02	9.43%	\$17,735,486