

Governor Brian Sandoval
Chairman

James R. Wells, CPA
Clerk of the Board



Attorney General Adam Paul Laxalt
Member

Secretary of State Barbara K. Cegavske
Member

STATE OF NEVADA BOARD OF EXAMINERS

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

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: January 9, 2018, 10:00 AM

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

Video Conference Location: Grant Sawyer Building
555 E. Washington Avenue, Ste. 5100
Las Vegas, Nevada 89101

AGENDA

- 1. Call to Order / Roll Call**
- 2. Public Comment** (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)
- 3. Approval of the December 12, 2017 and December 18, 2017 Minutes**
(For possible action)

4. Request to Purchase State Vehicles (For possible action)

Pursuant to NRS 334.010, no automobile may be purchased by any department, office, bureau, officer or employee of the state without prior written consent of the State Board of Examiners.

| AGENCY NAME | # OF VEHICLES | NOT TO EXCEED: |
|--|----------------------|-----------------------|
| Department of Administration – Fleet Services Division | 1 | \$30,035 |
| Department of Agriculture – Plant Industry | 1 | \$26,879 |
| Department of Agriculture – Plant Industry | 1 | \$27,842 |
| | | |
| Total | 3 | \$84,756 |

5. Request to Pay a Cash Settlement (For possible action)

Pursuant to Article 5, Section 21 of the Nevada Constitution, the State Board of Examiners may approve, settle or deny any claim or action against the State, any of its agencies or any of its present or former officers, employees, immune contractors or State Legislators.

Department of Transportation (NDOT) – Administration - \$65,000

The Department requests settlement approval in the total amount of \$815,000 to fully resolve an eminent domain action to acquire 1.11 acres of land owned by I-15 & Cactus, LLC, for an interchange along I-15 at Cactus Avenue in Las Vegas. The roadway improvement is complete, and NDOT previously deposited \$750,000 with the Court. NDOT now requests an additional \$65,000 to resolve the action.

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

Department of Public Safety – Director’s Office

Pursuant NRS 286.523, the Director of the Department of Public Safety (DPS) requests that the Board of Examiners designate DPS Officer I and DPS Officer II position classifications as “critical labor shortages” and grant a Public Employees Retirement System exception. This will allow for the reemployment of qualifying retired employees to fill the DPS Officer I and DPS Officer II positions for which a critical labor shortage has been appropriately identified.

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

Department of Public Safety – Office of Traffic Safety

Pursuant to NRS 333.705, subsection 1, the Office of Traffic Safety requests authority to contract with Peter Mulvihill to assist the agency in drafting/updating agency regulations as required by statute. This will be a part-time contracted position working five to ten hours per week for a six month period.

8. Request for an Allocation from the Interim Finance Committee Contingency Account (For possible action)

Department of Corrections – Correctional Programs

Pursuant to NRS 353.268, the Department requests an allocation of \$130,305 in Fiscal Year 2018 from the Interim Finance Committee Contingency account to fund the addition of one Program Officer 2 position, four Program Officer 1 positions and other associated costs. The requested positions are needed to ensure compliance with Senate Bill 268 which was enacted during the 2017 Legislative Session to verify an offender's full legal name and date of birth before issuing a photo identification card. This action would result in an increase of the agencies authorized positions from 99 full time equivalents to 104 full time equivalents.

9. Approval of Proposed State Administrative Manual Changes (For possible action)

Additions, revision and deletions to the following chapters of the State Administrative Manual (SAM) are hereby submitted to the Board of Examiners for approval, pursuant to NRS 353.040:

- 2600 – Claims
- 2700 – State Accounting System
- 2800 – Chart of Accounts

10. Approval of Proposed Leases (For possible action)

11. Approval of Proposed Contracts (For possible action)

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

13. 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 \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from November 18, 2017 through December 18, 2017.

14. Information Item – Reports

Pursuant to NRS Chapter 353, the Governor’s Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of December 12, 2017.

| | |
|--|-----------------|
| TORT Claim Fund | \$ 6,533,960.71 |
| Statutory Contingency Account | \$ 870,835.05 |
| Stale Claims Account | \$ 1,283,599.26 |
| Emergency Account | \$ 279,841.00 |
| Disaster Relief Account | \$ 8,038,757.58 |
| IFC Unrestricted Contingency Fund General Fund | \$15,470,350.45 |
| IFC Unrestricted Contingency Highway Fund | \$ 1,676,832.35 |
| IFC Restricted Contingency Fund General Fund | \$12,979,390.00 |
| IFC Restricted Contingency Highway Fund | \$ 2,396,373.00 |

15. Public Comment (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)

16. 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 may place reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Dale Ann Luzzi at (775) 684-0223 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail her at daluzzi@finance.nv.gov. Supporting materials for this meeting are available at: 209 E. Musser Street, Suite 200, Carson City, NV 89701 or by contacting Dale Ann Luzzi at (775) 684-0223 or by email at daluzzi@finance.nv.gov

Agenda Posted at the Following Locations:

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

Notice of this meeting was posted on the Internet: <http://budget.nv.gov/Meetings/> and <https://notice.nv.gov>

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MINUTES

Date and Time: December 12, 2017, 10:00 AM

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

Video Conference Location: Grant Sawyer Building
555 E. Washington Avenue, Ste. 5100
Las Vegas, Nevada 89101

MEMBERS PRESENT:

Governor Brian Sandoval
Attorney General Adam Paul Laxalt
Secretary of State Barbara Cegavske – Present in Las Vegas
Paul Nicks, Clerk of the Board

OTHERS PRESENT:

KC Kasey, Administrator – Division of Forestry
Debra Crowley, Fiscal Administrator, Department of Agriculture
Steve Fisher, Administrator, Welfare and Supportive Services
Nova Murray, Deputy Administrator, Welfare and Supportive Services
Michelle Morgando, Administrator, Hearing and Appeals Division
Rebecca Salazar, Programs Officer 3, Victims of Crime Program
Cameron Vandenberg, Chief Deputy Attorney, Attorney General's Office
Christian Schonlau, Chief Financial Officer, Attorney General's Office
Nick Trutanich, Chief of Staff, Attorney General's Office
Chris Chimits, Deputy Administrator, State Public Works
Gus Nunez, Administrator, State Public Works
David Frommer, Executive Director of Planning and Construction, University of Nevada, Las Vegas
Diane Chase, Executive Vice president and Provost, University of Nevada, Las Vegas
John Borrowman, Deputy Director, Department of Corrections
Sheila Lambert, Management Analyst 4 Department of Corrections

1. Call to Order / Roll Call

Governor: Good morning everybody. I will call the Board of Examiners Meeting to order. Madam Secretary, can you hear us loud and clear in Las Vegas?

Secretary of State: Yes, I can Governor. Good morning.

2. Public Comment (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)

Governor: We will move to agenda item number 2, Public Comment. Is there any member of the public present in Carson City that would like to provide public comment to the Board? I hear and see none. Is there anyone present in Las Vegas that would like to provide public comment to the Board?

Secretary of State: No there is nobody here that wishes to make a public comment Governor, thank you.

Governor: Thank you Madam Secretary.

3. Approval of the November 14, 2017 Minutes (For possible action)

Governor: We will move to agenda item number 3, Approval of the November 14, 2017 minutes. Have the Members had an opportunity to review the minutes and are there any changes?

Attorney General: Move to approve.

Governor: The Attorney General has moved to approve the minutes of the November 14, 2017 meeting, is there a second?

Secretary of State: I second it Governor.

Governor: Seconded by the Secretary of State. Are there any questions or discussion on the motion? I hear and see none. That motion passes 3-0.

4. Request for an Allocation from the Reserve for Statutory Contingency Account (For possible action)

Department of Conservation and Natural Resources – Division of Forestry

Pursuant to NRS 353.264(2)(b)(1), the Division requests an allocation of \$1,950,000 from the Statutory Contingency Account to cover the cost of actual and projected emergency response expenses arising from operations directly involving the protection of life and property under NRS Chapter 472.

Governor: We will move on to agenda item number 4, Request for an Allocation from the Reserve for Statutory Contingency Account by the Department of Conservation and Natural Resources, Division of Forestry.

Clerk: Good morning Governor and Members of the Board. Item 4 is a Request for an allocation from the Reserve Statutory Contingency Account to the Forestry Division of the Department of Conservation and Natural Resources.

Pursuant to NRS 353.264(2)(b)(1), the Division is requesting to cover actual and projected costs of emergency responses to protect life and property under NRS Chapter 472 due to an unusually active fire season which currently ranks as the third most severe on state record.

The Interim Finance Committee approved work programs at the October IFC meeting using the Wild Fire Protection Program reserves to cover projected expenses through December. This request is intended to cover the currently projected expenditures through the end of the Fiscal Year. Should this amount be insufficient to cover firefighting costs incurred through June, the Division will look to a request of IFC Contingency funds for the balance.

The Reserve for Statutory Contingency currently has a balance of \$2.88 million for the balance of the 2018-2019 biennium.

Representatives from the Division are available to answer any questions the Board may have.

Governor: Thank you Mr. Nicks. Ms. KC, good morning. I am not sure what is going to be included in your presentation but I did want to read part of the memorandum that you authored to put things in perspective as to the need for this agenda item. I am going to be reading verbatim from this memorandum. It states:

To date, in 2017 there have been 753 fires across Nevada with a total area burned exceeding 1.2 million acres. Of these 753 fires, 152 originated on land within the Division's responsibility which is almost two times the five-year average. Of the 1.2 million acres burned, 331,392 were Nevada Division of Forestry's (NDF) responsibility, which is over 13 times the five-year average. Wildland fire costs and acreages currently are exceeding averages nationwide. The increase comes from increased fuel loads and a longer fire season. In the past, fire seasons average five months but are now average seven to nine months nationwide. The cost of fighting wildland fires is initially born by the jurisdictional agency at the point of origin. The agency then seeks reimbursement through cost share agreements with all other responsible jurisdictional agencies.

Ms. KC, I hope I did not steal your presentation but I just wanted to thank you and all the men and women associated with you at NDF because you really have been heroic during this fire season. I would ask that maybe you could give some perspective as to what is going on in California and the assistance we are providing there. Truly, it has been a really difficult year and you have answered the call at every moment so thank you for that.

Kacey KC: Thank you. Good morning Governor and Members of the Board, for the record Kacey KC. That was my speech, so thank you for that. Although the numbers have changed slightly, there are 760 fires to date in the state; we are still at a little over 1.2 million acres.

One of the things I would add is the California response. A lot of these projections that we did going forward did not predict some of the two fire sieges that had happened in California. The first one in October, we sent over about 150 employees. That was inmate crews and fulltime staff. Currently we have two type three engines at six conservation camps in California, primarily on the Thomas Fire, trying to battle those flames. That is about another 150 employees plus seven from Nevada Department of Corrections (NDOC).

We are just trying to help them as they have helped us many times in the past. It has been a hard year for us; as you had mention, the third highest on record from an acres perspective - probably the highest on record from a cost perspective. We were one of the first states out in the West that had a fire siege, so we had access to a lot more aircraft and support than we normally would have had, had the other states had a similar situation. We were lucky to keep it at 1.2 million acres with the fuel loads that we have and we will continue to see in the future fire season.

That is all I would add. I would like to thank the Governor's Finance Office and the Legislative Counsel Bureau's (LCB) staff for helping us with all the solutions we have had to come up with this year to get this right and keep responding to incidents that keep coming up.

Governor: Thank you Ms. KC. Just in terms of process, we have been the beneficiary of California sending crews, so at the end of the year, in terms of the fire season, is there a true up and if more resources are sent from one place to the other, will Nevada then have to pay California or will California help reimburse Nevada?

Kacey KC: Yeah, that is how it works throughout the fire season. So, we are currently in the process of adjudicating any bills that come and they are doing the same thing. We are processing bills and they are processing bills. That goes for the Forest Service, the Bureau of Land Management (BLM), Cal Fire and any State that we have helped respond to and then at the end of the year, we will bill and they will bill. Currently we are looking at what the difference would be and then we will move forward with payments.

We have not seen what we know is the bills that are our responsibility right out of the shoot, which is any fire that started on our jurisdiction. There are many others that we will have a cost share in. We have not seen the cost of those yet. Those will be coming in as the Federal government gets to their billing process.

Governor: Maybe it is too early to have an estimate; we just do not want to have a big surprise. Do you know kind of where it is in terms of what that reimbursement looks like?

Kacey KC: As far as receivables? Currently, we are at \$1.6 million in receivables out, that is what we have billed to go out and that number fluctuates daily as we are bringing money in. Year to date, we have brought in about \$400,000. Some things are dropping off, other things are adding on as we are getting more and more bills. That is currently what we have but then, you know, we just got a big bill from California again, about \$500,000 that was not factored into that. It is in the adjudication process. So, the numbers just kind of fluctuate. We attach those numbers, as current as they are, to all of these work programs.

Governor: All right, thank you. I do not want to jinx anything, but all calm in Nevada right now?

Kacey KC: Yes.

Governor: All right. Questions from other Board Members with regard to agenda item number 4?

Secretary of State: Governor, this is Barbara Cegavske, I would just like to echo your comments and thank the Forestry Division for all their hard work and everything they have done. I know it has not been easy and watching what we have gone through and then watching what California has gone through, we are really very lucky for the responders we have with the firefighters and the Division of Forestry. So, thank you so much.

Kacey KC: Thank you all and I will bring that back to the agency and tell them as well.

Governor: Our thoughts and prayers are with what is happening in California. Could you give kind of a sense of the magnitude of that fire that is happening right now?

Kacey KC: I did speak to Bob Roper, previous State Forester, his home was actually threatened and he was mandatory evacuated in one of the fires. From all accounts that we have heard over there, this is fire like they have never seen it. They have had Santa Ana winds in the past. They have never had fuel loads like this and fire moving quite at the pace that they have seen this fire moving in.

What you saw in October and the difference with the current one is the amount of structures. Usually it will stop at the brink of town but it did not stop at the brink of town. I think 5,700 was the structure total in the last siege. It is quite high. So it is very devastating for the State of California. A lot of their resources are tapped. So, it is really important and critical for us all to help them. They have got resources from Canada, New Zealand and from all over the world to help them fight fire and it is not something we have seen in the past. We noticed that also this year, in the State of Nevada, fire has moved faster than we have seen it.

Looking at historical firefighting tactics and techniques, we have had to change our way of fighting fire and I think that is something that we will see continue into the future.

Governor: I know we are going a little astray here but do you attribute that to the amount of fuel load, as a result of the wet winter that we had?

Kacey KC: Definitely, the amount of cheat grass that we have, the cut type of grasses that come with a wet winter and also the overstocking of our forests and the dead and decadent vegetation that has not been cleared in a lot of acreages. That is a part of it and part of it also being the warmer and dryer temperatures and winds coming. We always have winds but having a little bit stronger wind forces.

Governor: All right, thank you. Are there any other comments or questions? If there are none, the Chair will accept a motion to approve the request for an allocation from the Reserve for Statutory Contingency Account by the Department of Conservation and Natural Resources Division of Forestry in the sum of \$1,950,000.

Attorney General: Move to approve.

Governor: Attorney General has moved for approval, is there a second?

Secretary of State: I second it Governor.

Governor: Seconded by the Secretary of State. Are there any other questions or comments on the motion? I hear and see none. That motion passes 3-0. Thank you Ms. KC, good luck to you.

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

Department of Agriculture

Pursuant to NRS 333.705(1), the Department requests authority to contract with a former employee, Melanie Whitney, to provide technical assistance and training on federal grants managed by the department.

Governor: We will move to agenda item number 5, Authorization to Contract with a Current and/or Former State Employee.

Clerk: Item 5 is a Request to Contract with Current and/or Former Employee pursuant to NRS 333.705 subsection 1. Assembly Bill 466 from the 2017 Legislature revised the requirements for these requests to be approved by the Board of Examiners. As long as the former employee is not receiving retirement benefits from the Public Employees' Retirement System during the duration of the contract, a former employee may provide services to state agencies without approval of the Board.

This request is from the Department of Agriculture to contract with a former employee to provide technical assistance and training on federal grants managed by the Department. The former employee who retired in September 2017 would work between 10 and 20 hours per week through March 2nd and then less than eight hours per month through the remainder of the fiscal year at a rate of \$31.32 per hour.

Representatives from the department are available to answer any questions the Board may have.

Debra Crowley: Debra Crowley, Finance Administrator for the Department of Agriculture.

Governor: Ms. Crowley, I do not have any questions. The only comment that I would have is, typically somebody gets trained before the person leaves so they do not have to come back, is there a plan to get that done?

Debra Crowley: Actually at the time we requested the overlap, we were not aware that the person that was going to be hired was an internal person. So, we promoted from within, so there really was not much training that was able to occur. In addition to training, on a lot of the federal reporting requirements, there are other special projects that this individual would assist in, such as audits, federal audits and assisting with the new budgets beginning to help the incumbents understand some of the programs.

Governor: Thank you very much.

Debra Crowley: You are welcome.

Governor: Board Members, any other questions for Ms. Crowley? If there are no further questions, the Chair will accept a motion to authorize the contract with a current and/or former state employee as presented in agenda item number 5.

Attorney General: Move to approve.

Governor: Attorney General has moved for approval, is there a second?

Secretary of State: I second it Governor.

Governor: Seconded by the Secretary of State. Are there any questions or discussion on the motion? I hear and see none. That motion passes 3-0.

6. Request for Approval to Join or Use Other Governments' Contracts

(For possible action)

Department of Health and Human Services – Welfare and Supportive Services – Administration - \$1,100,000

Pursuant to NAC 333.175, the Division requests to utilize a Delaware Department of Health and Social Services, Division of Child Support Services cooperative contract to provide an electronic application to assist in the collections and disbursements of Child Support payments to the custodial parent and to interface with the legacy application for posting these transactions to both the custodial and non-custodial parent.

Governor: We will move to agenda item number 6, Request for Approval to Join or Use Other Governments' Contracts. This one is by the Department of Health and Human Services, Welfare and Support Services.

Clerk: Item 6 is a Request to Join or Use Other Governments' Contracts. Nevada Administrative Code (NAC) 333.175 allows the State to participate in the award of a contract on a multistate basis if the contract is awarded by competitive selection, properly advertised and in the best interest of the State as determined by the Administrator of State Purchasing. While these requests are similar to contracts, they use the terms and conditions negotiated by the contracting government with the vendor which may or may not be the same as the State's terms and conditions.

This request from the Department of Health and Human Services, Division of Welfare and Supportive Services seeks approval to join a State of Delaware, Department of Health and Social Services, Division of Child Support Services contract with Informatix, Inc. to provide an electronic application to assist in the collection and disbursement of child support payments to custodial parents. The work order for this contract is \$1,100,000 through March 31, 2020.

Governor: Thank you. Mr. Fisher, good morning.

Steve Fisher: Good morning Governor and Members of the Board, for the record Steve Fisher, Administrator for the Division of Welfare and Supportive Services. I have with me this morning, Nova Murray, Deputy Administrator for the Division. What I would like to do is turn it over to Nova to give you a brief explanation of the contract and a little background on the contract and then we are here to answer any questions you might have.

Governor: Thank you. Please proceed.

Nova Murray: Good morning Governor and Members of the Board, Nova Murray for the record. This contract provides replacement of the current electronic application that we use to disperse our child support payments. The contract also includes additional functionality enabling the state to process payments to custodial parents more timely and efficiently.

The agency chose to enter into a cooperative contracting opportunity. At our agency we call it a joinder, through the State of Delaware. The Delaware Request for Proposal (RFP) solution complies with NAC 333 and meets all the legal requirements for procurement in Nevada.

The joinder was an excellent solution for us because we had already submitted an RFP for this process; Informatix was the winner of that bid. We made it all the way to the Board of Examiners (BOE) and we submitted a proposal in the budget for the 2017 Legislative Session and it contradicted it. It would not have required a replacement of our system the way that that budget was submitted. During the Session, that budget proposal was eliminated, so we are back to going through this process to select a vendor. This is a good choice because Delaware already did the RFP process. Nevada already did the RFP

process and it just makes sense to go ahead and join on that and not go through the RFP again.

Governor: Okay, you nailed it. I have no questions. Well done.

Nova Murray: Thank you.

Governor: Board Members, any other questions?

Secretary of State: None Governor.

Governor: Thank you. If there are no questions, the Chair will accept a motion to approve the Request to Join or Use the Other Governments' Contracts by the Department of Health and Human Services, Welfare and Support Services Administration in the amount of \$1.1 million as presented in agenda item number 6.

Attorney General: Move to approve.

Governor: The Attorney General has moved for approval, is there a second?

Secretary of State: There is a second, Governor.

Governor: Seconded by the Secretary of State. Are there any questions or comments on the motion? I hear and see none. That motion passes 3-0. Thank you.

7. Request for Approval to Pay a Stale Claim From the Stale Claims Account (For possible action)

A. Department of Transportation

The Nevada Department requests approval to pay \$67,676 from the Highway Fund, Stale Claims Account, for two FY 2017 invoices from the CA Group, Inc. for consultant design services.

B. Department of Transportation

The Department requests approval to pay \$74,157.86 from the Highway Fund, Stale Claims Account, for a FY 2017 invoice from Desert Research Institute for continuous real time quality data system monitoring site management.

C. Department of Health and Human Services – Aging and Disability Services – Sierra Regional Center

The Division requests approval to pay \$71,386.02 from the General Fund, State Claims Account, for a FY 2017 Jobs & Day Training reimbursement to Trinity Services.

D. Public Employees Benefits Program

The Public Employees Benefits Program (PEBP) requests approval to pay \$176,469.34 from the PEBP operating budget for the increased per participant per month fees for FY 2017 for PEBP participants located out of state, or those accessing medical services out of state.

(This item relates to Contract #50 under Agenda Item 11.)

Governor: Agenda item number 7, Request for Approval to Pay a State Claim from the State Claims Account. We have four of those.

Clerk: Item 7 includes four requests to pay late invoices pursuant to NRS 353.097.

The first request is from the Department of Transportation to pay two invoices from the CA Group totaling \$67,676 for consultant design services for the signs and striping. The invoices were received by the Department prior to the cutoff for processing Fiscal Year 2017 transactions but were not processed timely. Funds in this program did not balance forward and the Department did revert sufficient funds to cover the cost of this claim. This claim will be paid from the Highway Fund State Claims Account.

The second request is also from the Department of Transportation to pay \$74,157.86 to the Desert Research Institute for continuous real-time quality data systems monitoring and public presentations. The invoice was received by the Department after the cutoff for processing Fiscal Year 2017 transactions. Funds in this program did not balance forward and the Department did revert sufficient funds to cover the cost of this claim. This claim will be paid from the Highway Fund State Claims Account.

The third request is from the Department of Health and Human Services, Division of Aging and Disability Services to pay \$71,386.02 to Trinity Services for the Jobs & Day Training Program. The invoice was received by the Division after the cutoff for processing Fiscal Year 2017 transactions. Funds in this program did not balance forward and the Department did revert sufficient funds to cover the costs of this claim. The claim will be paid from the State Claims Account.

The fourth request is from the Public Employees' Benefits Program to pay \$176,469.34 to HealthSCOPE Benefits for an increase to the per participant per month fees for PEBP participants located in or accessing medical services out of state. This request is the result of a retroactive contract amendment to increase the fees retroactive to July 1, 2016. The increase was agreed to between the parties prior to the effective date but was not properly revised in the original contract amendment. This item relates to contract number 50 under agenda item 11.

Representatives from the Departments are available to answer any questions the Board may have regarding the individual claims.

Governor: Thank you very much. I have no questions. Board Members any questions with regard to the Stale Claims presented in agenda item number 7?

Attorney General: No questions Governor.

Secretary of State: No questions Governor, thank you.

Governor: Given that there are no questions, the Chair will accept a motion to approve the Stale Claims from the Stale Claims Account as presented in agenda item 7A, B, C and D.

Attorney General: Move to approve.

Governor: The Attorney General has moved for approval. Is there a second?

Secretary of State: Second, Governor.

Governor: Seconded by the Secretary of State. Are there any questions or discussion on the motion? I hear and see none. That motion passes 3-0.

8. Department of Administration's Victim of Crime Fund Fiscal Year 2018 1st Quarter Revenue Report and Recommendations for Fiscal Year 2018 2nd Quarter Anticipated Expenses (For possible action)

Pursuant to NRS 217.260, the Board of Examiners estimates available revenue and anticipated claim costs each quarter. If revenues are insufficient to pay anticipated claims, the statute directs a proportional decrease in claim payments.

The 1st quarter Fiscal Year 2018 Victims of Crime Program report states all approved claims were resolved totaling \$2,968,983.86 with \$1,208,128.99 paid out of the Victims of Crime Program account and \$1,760,854.87 resolved through vendor fee adjustments and cost containment policies.

The program anticipates future reserves at \$4.3 million to help defray crime victims' medical costs.

Based on these projections, the Victims of Crime Program recommends paying Priority One, Two and Three claims at 100% of the approved amount for the 2nd quarter of fiscal year 2018.

Governor: We will move to agenda item number 8, Department of Administration's Victims of Crime Fund, Fiscal Year 2018, 1st Quarter Revenue Report and Recommendations for Fiscal Year 2018 Second Quarter, anticipated expenses.

Clerk: Pursuant to NRS 217.260, the Board of Examiners is required to estimate the available revenue and anticipated claims costs for the State Victims of Crime Program. This item includes a report on the claims paid in the 1st quarter of Fiscal Year 2018 and a recommendation to pay Priority 1, 2 and 3 claims at 100% for the 2nd quarter of Fiscal Year 2018.

The Program anticipates having a reserve at the end of the second quarter of Fiscal Year 18 of approximately \$7.8 million after covering all expenses and a 45-day operating reserve which is a decrease of approximately \$3.9 million from the projected reserve of \$11.7 million at the end of the first quarter. This decrease is due to the number of claims filed subsequent to the Route 91 Harvest Music Festival mass casualty event of October 1st.

The decrease to the reserve is a concern, but agency representatives expect to obtain additional federal funding to offset the expenses associated with the October 1 event. Given additional federal funding for the mass casualty event, the \$7.8 million should be a reasonable reserve for the program. However, if additional grant funding is not received, the Board may need to consider reducing the percentage of the approved amounts paid for claims in future quarters.

Representatives from the Victims of Crime Program are available to answer any questions the Board may have.

Governor: Thank you Mr. Nicks. Is there someone present from the Victims of Crime Program?

Michelle Morgando: Good morning Governor and Members of the Board, Michelle Morgando and with me Rebecca Salazar, Program Manager for Victims of Crime.

Governor: Thank you for being here. This is obviously a devastating situation associated with what happened at the Route 91 concert. There is no amount of money that could ever properly compensate the victims that were injured or killed as a result of that horrific massacre.

I would like a little bit more detail as to how you all are managing this fund and a little bit more with regard to the anticipated requests from the fund.

Michelle Morgando: The statistics that we provided have updated information regarding the number of claims that we currently have, subsequent to the report and the amounts paid. We have also addressed with the National Center of Victims of Crime Program and this is a follow-up to the Interim Finance Committee (IFC) meeting regarding how the National Compassion Fund and the Las Vegas Victims Fund is treated with respect to the payment of benefits in our program. We requested and received a letter from Jeffrey Dion who is the Deputy Executive Director for the National Center for Victims of Crime. I have a copy of that now if you would like me to summarize it and I would be happy to leave that with Madam Secretary.

Governor: Yes please.

Michelle Morgando: The letter is addressed to Ms. Salazar. It states:

This letter is to confirm that benefits paid from the National Compassion Fund/Las Vegas Victims Fund is not paid in compensation for any economic loss. Benefits from the Compassion Fund were designed to address an unmet need for recognition of a non-economic harm arising out of the Route 91 Harvest Festival shooting - such as pain and suffering or psychological trauma - which is not compensated by any other victims programs. It's signed by Jeffery R. Dion.

I hope this provides an explanation to your follow-up. We did have questions at IFC regarding this. There are certain categories of benefits that are not payable under our program, primarily being those to compensate non-economic harm. Ours is designed to pay medical bills, counseling, travel expenses, lost wages; things that are documentable. The way that the Compassion Fund is being treated, it has been non-documented expenses.

I hope that answers your question.

Governor: I think it does. Will you read that last sentence again?

Michelle Morgando: Of course. Benefits from the Compassion Fund were designed to address an unmet need for recognition of a non-economic harm arising out of the Route 91 Harvest Festival shooting - such as pain and suffering or psychological trauma - which is not compensated by any other victims programs.

Governor: Okay, thank you. The bottom line for me is, as I said, there is no amount of money that could ever properly compensate anybody that has gone through this. So, we have this fund and we have the GoFundMe, but my understanding is there cannot be any coordination between the two. So it may be that some victims may get more than others. Is that an accurate summation?

Rebecca Salazar: This is Rebecca Salazar. How these funds will be distributed has not been finalized yet, I think that will happen next week. My understanding of what they are planning on doing is, those funds will go to the families of the deceased or people who were injured and spent at least one night in the hospital.

So, everyone else that was present would be covered through our program for counseling. A minimal lost wage payment if they were not able to return to work. Any injuries that they sustained, that did not warrant a night in the hospital, those are things that we would cover.

We pay for funerals of the deceased and medical bills for the people who were injured.

Governor: I just want to make sure that those that are eligible to seek money from any fund are aware of what the process is so that they can take advantage of that so that there is not a disadvantage to those who may not be familiar with what that process is. So, is

there an educational effort being made to make people aware of what they are eligible for and how they obtain those funds?

Michelle Morgando: Governor, we are currently working closely with the Victims Resiliency Center which has provided outreach services. We also are going to be employing two additional individuals within our office, pursuant to a separate work program which will be reimbursed by grant money. One of those individuals is designated to do community outreach. I just had a service announcement done in conjunction with the Resiliency Center. That is to be broadcasted on I believe Clark County television. So our website has been completely redesigned for the Route 91 shooting. All of our forms and information are available in English and Spanish and provide information about how to contact our office as well as Victims in California, there is a separate link for them. We are providing as much as we can so that individuals know that within the one-year filing period that we have, that they can come to us in one of three ways to file a claim, whether it be online, at the Resiliency Center, or they can come to our office.

Governor: Thank you very much. Questions from other Board Members?

Attorney General: It says that there is projected \$14 million over the life of the claims and I guess we are doing about seven today. So, that is an additional seven? Am I understanding that correctly, or an additional 14?

Michelle Morgando: The projections referred to over the life of the applications that we may receive. So, in general, from other mass events, the compensation program has received 25% of the applications from the attendees of other events. If that is what we receive, that would be about 6,000 applications. These projections are just based on over the life of the claims, not necessarily over the next year. It could be over the next several years, what we expect to spend total is about \$14 million.

Attorney General: It says that you expect to get some reimbursement. Do you have any idea, are we talking 25%, 50%, just how much reimbursement do you think is available and expected?

Michelle Morgando: The hope is that we get full reimbursement. We are in the very early stages drafting our grant proposal. We are compiling all of our costs into that proposal. Hopefully they will be finalized within the next six months or so. At this point, we do not have any dollar figures available, we are just requesting a full reimbursement for everything spent on these claims.

Attorney General: Thank you.

Secretary of State: Governor?

Governor: Yes, Madam Secretary, please proceed.

Secretary of State: Thank you. I am questioning the funeral expenses. We had a business in Las Vegas that has said they paid for them. Clark County has indicated they

have. So I was just wondering, when the Governor said you cannot work together or you are not supposed to collaborate together, how are those being addressed? We need to make sure everybody's needs are met. So I was just curious if you know any results on the funeral expenses at all, how that's being handled.

Rebecca Salazar: I can speak to that. This is Rebecca Salazar. I have personally been coordinating those payments with that company and with the other agencies. It was just a matter of us paying our portion and delivering the balance due to the other agencies.

Secretary of State: So you are able to coordinate that somewhat?

Rebecca Salazar: We are.

Secretary of State: Okay, wonderful.

Governor: Thank you Madam Secretary. Are there any further questions or comments?

Attorney General: I just have one more question. It is actually a little tough to hear you guys out here; can you explain by way of example what the Las Vegas Victims Fund will be paying for?

Michelle Morgando: From what we understand and it is not finalized yet, if it has not closed, it is closing soon. They have had two public hearings regarding how the fund is to be structured and what the payment levels are.

From our understanding, this was patterned quite closely from the 9/11 Victims Fund and the Pulse Nightclub Shooting. In fact, I believe the gentlemen who coordinated both of those are assisting the 16-Member Commission here, who is in charge of administering the funds.

So far through the public comment period, it is a graduated tier of payments depending upon the level of trauma. So, the minimum qualification is you were hospitalized at least one night. That is a certain lump sum payment and then graduates up to those who were fatalities.

Other than that, they have not presented the final proposal yet. I hope that answers your question. Ms. Salazar.

Rebecca Salazar: The intention of those funds, as the letter that Ms. Morgando read is to provide more of a payment suffering type of payment. Not specific to the bills. The bills are what our agency would cover. So, that is the difference. It is the intention of those donated funds that are to provide more of a suffering payment rather than a payment for a specific expense.

Michelle Morgando: So, it is not calculated as like a personal injury award or settlement where the damages are usually three times the medical or whatever the formula is that is

set. The category depends more on the level of injury and not so much what was expended as a result of the injury.

Attorney General: Okay. That clarifies it a bit, thank you.

Governor: All right, anything else that you wish to present with regard to agenda item number 8?

Michelle Morgando: No sir, thank you very much.

Governor: If there are no further questions or comments, the Chair will accept a motion to approve the Department of Administration's Victim of Crime Fund Fiscal Year 2018 1st Quarter Revenue Report and Recommendations for Fiscal Year 2018 2nd Quarter anticipated expenses.

Attorney General: Move to approve.

Governor: The Attorney General has moved to approve, is there a second?

Secretary of State: Second.

Governor: The Secretary of State has seconded the motion. Are there any questions or discussion? I hear and see none. That motion passes 3-0, thank you for your hard work.

Michelle Morgando: Thank you Governor and Members of the Board.

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

(For possible action)

| | |
|--------------------|-------------------|
| Claimant: | Matt Moonin |
| Claim No.: | TC 18257 |
| Settlement Amount: | \$225,000 |
| Date of Loss: | February 24, 2011 |

Governor: We will move to agenda item number 9, Request for Approval to Pay a Tort Claim pursuant to NRS 41.036.

Clerk: This item is a claim for which the Office of the Attorney General recommends payment from the Tort Claims Fund. Representatives from the Office of the Attorney General are available to discuss the specifics of the claim and answer any questions the Board members may have.

Cameron Vandenberg: Good morning Governor Sandoval, General Laxalt and Secretary Cegavske. I am Cameron Vandenberg, Chief Deputy Attorney General. I am here to answer any questions you may have about the case.

Governor: Will you provide a brief record regarding the case and the recommended settlement please?

Cameron Vandenberg: Yes sir. This case was filed several years ago and it was originally a 100-page complaint with 13 causes of action against multiple defendants of the Department of Public Safety, Nevada Highway Patrol. Most of the claims were things like, RICO, defamation, Fourth Amendment violations. The ones that we dealt with towards the end were First Amendment Claims. Those were the employment claims that came to our Division, as well as the State Trespass Claim.

We were able, through motion practice, to eliminate all but two of those claims. There were three plaintiffs, one of whom passed away during the litigation. The two remaining claims pertain to a First Amendment violation and the State Trespass. Again, with another round of motion practice, we were able to obtain partial summary judgment on some other claims and the Court granted summary judgment in favor of the plaintiff on the First Amendment Claim. We stayed the Trespass Claim while we proceeded to the Ninth Circuit to Appeal that on the basis of qualified immunity and also the merits of the claim and did not prevail at the Ninth Circuit.

This case is a little different than the other cases we have had in the employment area where we actually have a judgment in favor of the plaintiff. So, what is left to go to trial are just damages. It is a little unique in the settlement aspect that we are not necessarily trying to predict what might happen with the jury in terms of liability. We are really just trying to predict what might happen in favor of damages.

We conducted some research in the case and found damage awards ranging from nominal to a million dollars in similar types of cases.

At this point, the attorney's fees are projected to be over \$100,000. Through several settlement negotiations, we were able to arrive at the settlement amount of \$225,000. \$75,000 of which is for attorney's fees and \$150,000 is to the plaintiff.

We also settled the State Trespass Claim that I referenced a moment ago for \$20,000, which is obviously not before you. We settled the entire case for about \$245,000.

Governor: I think it is important for the record, when you talk about nominal fees, if they would have recovered a dollar, they would be entitled to every penny of their attorney's fees.

Cameron Vandenberg: Exactly. By the end of trial, that would probably be twice what we have settled for, or more.

Governor: Having said all that, given the settlement and I think it is a good settlement, you do believe it is in the best interest of the State?

Cameron Vandenberg: I do.

Governor: Okay, thank you.

Cameron Vandenberg: Thank you.

Governor: Questions from any of the other Board Members on this matter?

Secretary of State: No Governor.

Governor: All right. If there are no further questions, the Chair will accept a motion to approve the Request to Pay a Tort Claim pursuant to NRS 41.036 in the sum of \$225,000.

Attorney General: Move to approve.

Governor: Attorney General has moved for approval. Is there a second?

Secretary of State: Second.

Governor: Seconded by the Secretary of State. Are there any questions or discussion? I hear and see none. The motion passes 3-0. Thank you.

10. [Approval of Proposed Leases](#) (For possible action)

Governor: Next agenda item is number 10, Approval of Proposed Leases. Mr. Nicks.

Clerk: There are five leases in agenda item 10 for approval by the Board this morning. No additional information has been requested by any of the members.

Governor: I have no questions. Board Members, are there any questions with regard to agenda item number 10?

Secretary of State: None.

Governor: Is there a motion?

Attorney General: Move to approve agenda item number 10, Approval of Proposed Leases.

Governor: Attorney General has moved to approve the proposed leases contained in agenda item number 10. Is there a second?

Secretary of State: I second that Governor.

Governor: Secretary of State has seconded the motion. Are there any questions or discussion? I hear and see none. The motion passes 3-0.

11. Approval of Proposed Contracts (For possible action)

Governor: We will move to agenda item number 11, Approval of Proposed Contracts.

Clerk: There are 51 contracts in agenda item 11 for approval by the Board this morning. Contract number 3 has been withdrawn and will be revised and brought back to a future meeting. Contract number 21 was contingent upon approval of a work program which was approved by IFC last week. Contract number 48 would normally have been signed by the Clerk, but is being brought to the Board for approval due questions regarding the scope of work of the contract. Contract #50 relates to the stale claim item D in agenda item 7.

Members have requested additional information on the following:

Contract #4 between the Office of the Attorney General and the Las Vegas Metropolitan Police Department

Contract #11 between the Department of Administration, State Public Works Division and the Whiting Turner Contracting Company.

Contract #14 between the Department of Administration, State Public Works Division and Q&D Construction, Inc.

Contract #36 between the Department of Corrections and the University of Nevada, Reno

Contract #37 between the Department of Corrections and Correctional Counseling, Inc.

Governor: Thank you. We will proceed with Contract number 4, the Attorney General's Office, Special Fund.

Nicholas Trutanich: Good morning Governor Sandoval, Attorney General Laxalt and Secretary of State Cegavske, Nicholas Trutanich on behalf of the Attorney General's Office, to my right is Christian Schonlau, our CFO. This is a contract that the Office is extremely proud of. It is a key piece of our statewide strategy to reduce the backlog of untested sexual assault kits in Nevada. The contract provides needed funding to Las Vegas Metropolitan Police Department for new forensic staff and outsourcing of sexual assault kits to help reduce the decade's long backlog of sexual assault kits in the State.

This contract is funded in part by favorable settlements reached by the Attorney General's Office to the tune of \$1.35 million and appropriation from AB 97. This contract is complimentary to a contract that this Board approved in October with Washoe County and furthers the efforts of the Attorney General's Office to find a statewide solution to the untested backlog in Nevada.

I am happy to take any questions.

Governor: Thank you Mr. Trutanich and congratulations. I think this is a wonderful contract. I congratulate the Attorney General for getting this done. Do you know where we are, given the prior contracts and with the assumed approval of this - how much more we have to do to get caught up?

Nicholas Trutanich: Sure. A key piece of this was AB 97 last Session and the mandatory testing that was pushed by Attorney General Laxalt. Over the course of the last three years, we have appropriated grant funding, \$1.7 million of settlement funding and then of course, the money appropriated in AB 97 and the additional \$1.35 million pursuant to this contract.

We are well on our way to a statewide solution. We are reducing the backlog, although the numbers that I have are only current from August 3rd of this year, we will be getting new numbers at this Thursday's Sexual Assault Kit Working Group, which is chaired by the Attorney General.

I can say that in the last two years, since testing began, we have done approximately 10 years' worth of testing in those two years. We are making good progress and we are well on our way to a solution.

Governor: Thank you. Not only have you made good progress but it has resulted in identifying individuals that otherwise may not have been found.

Nicholas Trutanich: That is right. With each kit being tested, if there are hits to what is called CODIS, they get uploaded to a national database. As of August this year, there have been 11 arrests inside the State based on the testing that is been done so far. Of course, law enforcement expects that more perpetrators of sexual assault are going to be brought to justice and more cases are going to be resolved for victims and survivors of sexual assault, because of this testing. We are proud of that.

Governor: You should be. Thank you.

Nicholas Trutanich: Thank you Governor.

Governor: Any other questions or comments from Board Members on Contract number 4? I hear and see none. Next is contract number 11. My understanding is that this is associated with the University of Nevada, Las Vegas (UNLV) Medical School. Please proceed.

Chris Chimits: Thank you. Good morning Governor and Members of the Board. My name is Chris Chimits, Deputy Administrator for the State Public Works Board. This contract is with Whiting Turning Construction Company for the pre-construction design assistance services for the Medical School at UNLV.

Our intention with this contract was to get it through the process, to get this contract approved so that when the funding that is required from UNLV is sent to the State and is

deposited in our account, then we would be able and in a position to start with the work. That's our intention here.

Governor: Let's just talk about it because this is what I want to hear from UNLV is, SB 553 was the bill that provided the \$25 million from the State to help fund the UNLV Medical School. There was a private gift of \$25 million as well. It is my understanding that there is, a disagreement with regard to which money comes first. Pursuant to the Bill, SB 553, that requires the private money or the money coming from UNLV to be spent first and not the State money. My understanding from UNLV is that there may be a disagreement there. It is the State money that would be spent first. I just want to get that resolved so that we can get moving with this medical school.

Chris Chimits: Chris Chimits for the record. You are correct Governor, the SB 553 does stipulate conditions, but it defers to NRS 341. NRS 341 is the bill that regulates that agency money or donor money spent ahead of State funding. So, our intention would not be to act on this or do any work that would incur expenses until the agency money comes and then we would spend that money first, in accordance with NRS 341.

Governor: So, pursuant to NRS 341, at least in this situation, the \$25 million of private money would have to be spent first, before a dollar of the State's \$25 million could be spent.

Chris Chimits: Yes sir.

Governor: Okay. We have some folks from UNLV that are here, if you would identify yourselves for the record, please?

David Frommer: Good morning Governor Sandoval and Members of the Board. My name is David Frommer, Executive Director of Planning and Construction at UNLV.

Diane Chase: Good morning, Diane Chase, I am the Executive Vice president and Provost at UNLV.

David Frommer: Members of the Board, if I could offer some information related to that question. UNLV agrees with the reading of SB 553 and base NRS 341 requirements that the agency money is spent first, so there is no dispute from our perspective there.

We did present to the IFC in October of 2017 with the State Public Works Division, related to the project, another requirement of SB 553. The project, at that meeting, is defined based on really the full build of this first phase of a medical school education building and supporting facilities was estimated at about \$230 million of base costs, with financing costs and other costs about \$250 million.

Part of the process that we are going through is we are very active in the fundraising component of this project. In addition to the \$25 million anonymous gift that came in during the session, another \$14 million gift has been secured in the last two weeks or so. Our President, our Provost, our Medical School and Development folks are working on

additional gifts. Part of our process is, with the project currently structured at a \$225 million contribution from donor funds and \$25 million from the state funds in SB 553, we're looking for a little bit more time for our donor agreements to form, so that we have better certainty of the project funding coming in. If it winds up coming a little less than that \$250 million or a little more, our interest is to hold off on proceeding on design on a project where the funding needs to be very closely aligned with what we proceed in design. We think it would be a very difficult use of donor funds to start design on a project where the funding winds up being more or less ultimately and we have to go back and redesign the project in some way and those donor funds have not been used to their fullest extent and capacity and benefit.

Those are some of the items that we have on the table related to the project in general.

Diane Chase: I would add that very similarly, our only concern at this point is not about which funds would be expended first, but really about the scope of the project because we are not sure what the full scope is. It seems premature to establish a particular design contract when we are not sure about the amount.

Governor: I understand and appreciate that. I also appreciate your acknowledgement. We really do not have any discretion here in terms of how that \$25 million of state money is expended. Would you prefer that we hold this contract, if you are in this uncertain position?

Diane Chase: We would feel more comfortable if we would hold on this contract for at least a period of time, yes.

Governor: Any objection from the State with regard to that?

Gus Nunez: For the record Gus Nunez, Administrator for the Public Works Division. No, there is no objection on our part. The only thing we have been trying to point out to UNLV is that, we have what I would call steep inflation going on right now and of course, the sooner the better. Like Chris indicated before, our intent is just to be ready to go as soon as they are ready to go.

Some of the things that we can do during the schematic design are to present UNLV various options that they could do, depending on where the funding comes in. Obviously there is going to be a need to do a certain minimum amount of work, in order to have an accredited medical school. Those things can be investigated, priced out and so that the information will be in front of UNLV at the time that they have their funding more solidified in order to make decisions.

Our recommendation to UNLV is and has been that some of this preliminary work needs to be done regardless of where the final project is going to be. It is part—it would be part of what we typically do as part of our design fee with any professional.

So, there is some things that could be done that would not waste any money at this point and it would be beneficial for those decision makers to have that information in front of them

when they go look at it and say, here is where we are with the funding and trying to make those final decisions as to how much of a project they want to build right now.

I understand their concerns and we will be glad to basically wait until they make their final decisions on this thing.

Governor: Thank you Mr. Nunez. I will honor UNLV's request to pull this but would really encourage UNLV and Public Works to get together and perhaps have this more detailed conversation like the one that you just shared with us.

Gus Nunez: Absolutely Governor, thank you.

Governor: So, I just want to make sure I have got it confirmed on the record. It is your request to have this matter pulled, this contract?

Diane Chase: Yes, it is.

Governor: All right, thank you.

Diane Chase: Thank you.

Governor: Mr. Nicks had referenced Contract number 14 being held. I do not have any questions on that. Did any of the other Board Members have any questions? I hear and see none. So, we could move on then to Contract number 36 and 37. I had asked for this to be held only because it is good news, with regard to the second iteration of the Second Chance Act and how Nevada is beneficiary of that. Please proceed.

John Borrowman: Good morning. My name is John Borrowman, Deputy Director of Support Services for the Department of Corrections. I think that we are privileged to have Sheila Lambert work for our Department and have been instrumental in not only pursuing this but also in administering it. So, I do not want to take away her glory here. This is a good thing for the state and if you don't mind, I will turn the microphone over to Sheila.

Sheila Lambert: Good morning, Sheila Lambert, Nevada Department of Corrections (NDOC) for the record. We are always very excited to talk about the Second Chance Act Grant. We are always very excited to have our successes. These particular contracts, while the first one on number 36 is for the University of Nevada, Reno (UNR). We do have a contract with both UNR and UNLV to do services throughout the State in terms of evaluation.

What we are doing with the Second Chance Act is to reduce recidivism and thus victimization in the community. We have been very successful over year one. The UNR contract actually is an evaluation of programs and services so it holds us accountable to the Governor's Re-Entry Strategic Taskforce and those objectives and the strategic priorities. It makes sure that we are focused on data driven decisions. We have community partners who are part of the deliverable from UNR. Across the state, from our

various departments of Health and Human Services, DETR, many non-profits, Attorney General's Office and a number of folks who have come together to work with us.

For item 36 you will see another item that will come up in January, where you will have three or four more contracts for us to continue with year two. We were just recently awarded year two for \$999,000.

Would you like me to just go into 37 as well?

Governor: Yes please.

Sheila Lambert: Thank you sir. Correctional Counseling is moral recognition therapy. The Nevada Department of Corrections working with the Pew Institute, LCB, many of those in the Governor's Office and other departments. We work to identify the number of programs within NDOC that were not evidence based and those were eliminated.

What we did was work with the Council of State Governments, the National Governor's Association and identified those programs that focused on the majority criminogenic features. So, this moral recognition therapy is a new program, evidence based. We are doing train the trainers throughout NDOC so we can have sustainability. So, even after the grant funds are gone, we will continue to be able to provide this program to the inmates to continue to support the reduction in recidivism.

Governor: Thank you Ms. Lambert. I was the beneficiary of a meeting with you and I really want to congratulate you on the work that you have done. It is going to take time, but I think the State and particularly the inmates are going to be the beneficiary of this and see a reduction in recidivism which will be a benefit everybody. This is really a complement to you and Director Dzurenda and everybody at the Department of Corrections. Not only did you get the first round, but now moving to the second round.

Sheila Lambert: Thank you. We do every once in a while get a comment as to why are we doing so much for inmates. We are targeting those inmates with the assessments that the programs will help them. Really, this is for the State of Nevada in reducing victimization. When we talk about recidivism, it is a big word, but what does it mean to mothers, fathers and community members? It means, one less victim and hopefully that would be one less victim in your family.

Governor: Thank you Ms. Lambert. That is what is important to reduce victimization but also put these men and women on a path where they can be productive members of society.

Sheila Lambert: Thank you.

Governor: Thank you. Are there any questions from Board Members with regard to Contracts 36 and 37? I hear and see none. All right, Board Members, any questions on any contract from 1 to 51? If there are none, the Chair will accept a motion to approve contracts 1-51, excluding 3 and 11.

Attorney General: Move to approve.

Governor: The Attorney General has moved to approve contracts 1-51 excluding number 3 and number 11.

Secretary of State: Second, Governor, thank you.

Governor: Seconded by the Secretary of State. Are there any questions or discussion on the motion? I hear and see none. That motion passes 3-0.

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

Governor: We will move on to agenda item 12, Master Service Agreements.

Clerk: There is one master service agreement on the agenda, item number 12 for approval by the Board this morning. No additional information has been requested by any of the Members.

Governor: Any questions Board Members? I hear and see none.

Attorney General: Move to approve.

Governor: The Attorney General has moved to approve the master service agreements presented in agenda item number 12. Is there a second?

Secretary of State: I will second that, Governor.

Governor: Secretary of State has seconded the motion. Are there any questions or discussion? I hear and see none. That motion passes 3-0.

13. 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 \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from October 23, 2017 through November 17, 2017.

Governor: We will move to agenda item 13, Information Item.

Clerk: There were 32 contracts under the \$50,000 threshold approved by the Clerk between October 23, 2017 and November 17, 2017. This item is informational only and no additional information has been requested by any of the members.

Governor: Any questions Board Members on agenda item 13? I hear and see none.

14. Information Item

State of Nevada – Compact with Washoe Tribe of Nevada and California Governing Class III Gaming

Pursuant to Public Law 100-497, the Indian Gaming Regulatory Act, codified at 25 USC. §§ 2701-2721 and 18 USC. §§ 1166-1168, a first amendment has been made to the compact between the Washoe Tribe of Nevada and California and the State of Nevada. The amendment terminates the Slots Only Compact which was approved in May 2004 and replaces it with the language of the amended compact.

Governor: We will move to agenda item number 14, State of Nevada Compact with the Washoe Tribe of Nevada and California governing Class III Gaming.

Clerk: Item 14 is an information item on the first amendment to the Tribal-State Gaming Compact between the Washoe Tribe of Nevada and California and the State of Nevada terminating the slots only compact and replacing it with an amended compact for Class III gaming on Indian lands of the Tribe pursuant to the federal Indian Gaming Regulatory Act.

Governor: Board members, are there any questions on agenda item number 14? I hear and see none.

15. Information Item

Department of Public Safety – Division of Emergency Management – Disaster Relief Account Grant Request – Clark County

Pursuant to NRS 353.2755, the Division of Emergency Management is notifying the Board of Examiners of Clark County's intent to request a grant from the Disaster Relief Account to cover expenses associated with the October 1, 2017 Las Vegas mass casualty event.

Governor: We will move to agenda item 15 which is another Information Item with regard to the Department of Public Safety, Division of Emergency Management, Disaster Relief Account Grant Request.

Clerk: This item is a notification from the Division of Emergency Management of intent to request an allocation from the Disaster Relief Account pursuant to NRS 353.2755. Pursuant to statute, state agencies and local governments can request a grant or loan through the Division of Emergency Management from the Disaster Relief Account if, because of the disaster, the local government is unable to pay for an expense from available funds.

Applicants must submit their intention to apply not later than 60 days after the Governor or the governing body of a local government determines an event constitutes a disaster. The Division must then notify the Board of Examiners and the Fiscal Analysis Division of the Legislative Counsel Bureau of the intent. Within 18 months of the determination an event constitutes a disaster, the state agency or local government must submit their final request to the Division of Emergency Management and the Department of Taxation, including whether the request is for a loan or a grant and the final amount of the request. The Division of Emergency Management and the Department of Taxation are required to review the requests and submit reports to the Board of Examiners who will make a recommendation to the Interim Finance Committee on the proposed amount and the determination of a grant or loan.

This notification is just the first step in this process. The application will come to the Board for approval of a recommendation to the Interim Finance Committee at a later date.

This notification is for the October 1 mass casualty event at the Route 91 Harvest Music Festival.

Governor: Thank you Mr. Nicks. Is this is another agenda item associated with the Route 91 Music Festival. Is this number \$3,784,271 the amount that we are being put on notice for?

Clerk: That is correct.

Governor: Okay, thank you. Board Members, are there any questions with regard to agenda item number 15? I hear and see none.

16. Information Item – Reports

A. Department of Conservation and Natural Resources – Division of State Lands - State Land Registrar

Pursuant to NRS 321 .5954, and 1993 Nev. Stat. 1153, 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 and Lake Tahoe Mitigation Program. The Registrar submits the report on program activities for the 1st quarter of Fiscal Year 2018.

Additional Information:

- 1989 Tahoe Basin Act
There were no transfers of lands or interest in lands during the quarter.
- Lake Tahoe Mitigation Program
The agency reports that there were no acquisitions of land or interest during the quarter. However, there were four land coverage transactions

that resulted in \$112,524 in proceeds for the Nevada Land Bank program.

B. Fiscal Year 2018 – 1st Quarter Overtime Report

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 1st Quarter Overtime Report and analysis for Fiscal Year 2018.

Governor: We will move to agenda item 16, another Information Item report with regard to the Department of Conservation and Natural Resources.

Clerk: There are two information reports under this agenda item.

The first is an informational report regarding lands or interests in lands transferred, sold, exchanged or leased under the Tahoe Basin Act Program as well as a quarterly report on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program which are required pursuant to NRS 321.5954 and Chapter 355, Statutes of Nevada, 1993 respectively.

This report is for the quarter ending September 30, 2017. There were no activities under the Tahoe Basin Act but there were four transactions under the Tahoe Mitigation Program resulting in total proceeds of \$112,523.50 for the Nevada Land Bank

The second report is on overtime paid for the first quarter of Fiscal Year 2018. Overtime pay and accrued compensatory leave accounted for a total of \$15,288,237, or 6.21% of total pay, for Fiscal Year 2018, a 30% increase from Fiscal Year 2017. This is the first time that overtime has topped \$15 million in a single quarter.

The five agencies with the highest dollar amount of overtime and accrued comp time for the year accounted for 92.3% of the total. They are the Department of Corrections at \$5.8 million; followed by the Department of Health and Human Services at \$2.8 million, the Department of Public Safety at \$2.2 million, and the Department of Conservation and Natural Resources at \$1.9 million and the Department of Transportation at \$1.4 million.

At the Department of Corrections, overtime and comp time are driven by the large institutions and medical personnel. Overtime and comp time for the year was greatest at High Desert at \$1.3 million; followed by Southern Desert at \$830,000; Ely State Prison \$804,000; Northern Nevada Correctional Center at \$741,000; Florence McClure at \$580,000; Prison Medical at \$402,000; and, Lovelock Correctional Center at \$329,000. Those seven equate to 86.9% of total.

Comparing first quarter Fiscal Year 2017 to first quarter Fiscal Year 2018, those budget accounts changed as follows: High Desert increased \$909,000; Southern Desert increased \$510,000; Ely State Prison increased \$196,000; Northern Nevada Correctional Center increased \$417,000, Florence McClure increased \$307,000; Prison Medical decreased \$13,000; and, Lovelock State Prison increased \$173,000. Pioche Conservation Camp and Three Lakes Valley Conservation Camp increased by more than \$25,000.

Overtime increased by a little over \$1.2 million for the 4th quarter Fiscal Year 2017 to 1st Quarter Fiscal Year 2018 with High Desert \$280,000; Ely \$261,000; Florence McClure \$199,000; and, Southern Desert \$162,000 accounting for 74.7% of the total combined increase in overtime for the quarter.

By event code, the highest four causes accounted for 75.4% of the overtime. They were: Covering vacant shifts; Hospital coverage; Covering holiday shifts and Wildfire coverage.

At the Department of Health and Human Services, overtime was driven by Public & Behavioral Health \$1.3 million, primarily in Southern Nevada Adult Mental Health at \$858,000 and the Facility for the Mental Offender \$258,000; Child and Family Services at \$880,000; and Aging and Disability Services at \$558,000, primarily at Desert Regional Center.

By event code, the highest four causes accounted for 72.5% of the overtime. They were: Covering vacant shifts; Covering 24-hour shifts; reducing backlog; covering holiday shifts.

The highest five by percentage of total pay for the year are the Department of Conservation and Natural Resources at 16.41%, followed by the Department of Corrections at 15.03%, the Department of Public Safety at 10.83%, the Commission on Mineral Resources at 8.75%, and the Department of Veterans Services at 8.67%.

The top five increases by dollar comparing Fiscal Year 2017 to Fiscal Year 2018 were Corrections at \$2.6 million; Conservation and Natural Resources \$357,000; Health & Human Services \$328,000, Public Safety \$229,000 and Transportation \$192,000 which account for 105.2% of the total increase year over year.

Conversely, only five Departments decreased their overtime/comp time accrual by more than \$20,000 from Fiscal Year 2017 to Fiscal Year 2018; the Department of Veteran Services \$63,000, the Department of Taxation \$74,000, the Department of Business and Industry \$46,000, the Governor's Finance Office \$31,000 and the Department of Employment, Training and Rehabilitation \$20,000.

As certain organizations have biennial overtime trends, such as the Governor's Finance Office due to the overtime accrued building budgets in odd-numbered fiscal years, the following compares those same 10 organizations to Fiscal Year 2016:

Corrections increased \$3.3 million from Fiscal Year 2016 to Fiscal Year 2018; Conservation and Natural Resources increased \$638,000; Health and Human Services increased \$963,000; Public Safety increased \$552,000; Transportation increased

\$534,000; Veterans Services increased \$100,000; Taxation increased \$24,000; Business & Industry decreased \$6,000; Governor's Office decreased \$3,000; Department of Employment, Training and Rehab increased \$4,000.

The Departments of Corrections, Health & Human Services, Public Safety, Conservation and Natural Resources, Transportation, Education, Motor Vehicles as well as the Division of Minerals are on a three-year trend of increasing overtime and comp time while only the Department of the Military and Department of Wildlife are on a three-year decreasing trend. Most other agencies are stable or do not show a consistent long-term trend.

Governor: You may have made the best record ever on an agenda item. So, thank you. It was very thorough. I appreciate that Mr. Nicks. Board Members, any questions with regard to agenda item number 16?

Secretary of State: None Governor.

Governor: All right thank you.

17. Public Comment (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)

Governor: We will move on to agenda item 17, Public Comment. Is there any member of the public present in Carson City that would like to provide public comment to the Board? I hear and see none. Is there anyone present in Las Vegas that would like to provide public comment to the Board?

Secretary of State: There is nobody Governor.

Governor: All right, before I take a motion to adjourn, I just wanted to wish everybody a Merry Christmas, Happy Holidays and Happy New Year. Please take some time for yourselves and spend some quality time with your families, all my best to all of you.

Secretary of State: Merry Christmas and Happy New Year to you Governor, from Las Vegas.

Governor: Thank you.

18. Adjournment (For possible action)

Governor: Is there a motion to adjourn?

Attorney General: Move to adjourn.

Governor: The Attorney General has moved to adjourn. Is there a second Madam Secretary?

Secretary of State: Yes. I will second that motion, thank you.

Governor: Seconded by the Secretary of State. That motion passes 3-0. This meeting is adjourned, thank you ladies and gentlemen.

DRAFT

Governor Brian Sandoval
Chairman

James R. Wells, CPA
Clerk of the Board



Attorney General Adam Paul Laxalt
Member

Secretary of State Barbara K. Cegavske
Member

STATE OF NEVADA BOARD OF EXAMINERS

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

MINUTES

Date and Time: December 18, 2017, 3:00 PM

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

Video Conference Location: Grant Sawyer Building
555 E. Washington Avenue, Ste. 5100
Las Vegas, Nevada 89101

MEMBERS PRESENT:

Governor Brian Sandoval
Attorney General Adam Paul Laxalt – Participated via telephone conference
Secretary of State Barbara Cegavske – Present in Las Vegas
James R. Wells, Clerk

OTHERS PRESENT:

Kat Miller, Director, Department of Veterans Services
Chris Chimits, Deputy Director, State Public Works Division

1. Call to Order / Roll Call

Governor: Good afternoon ladies and gentlemen, I will call this Special Meeting of the Board of Examiners to order. The Secretary of State is present in Las Vegas. The Attorney General is participating telephonically. Can you both hear me loud and clear?

Secretary of State: Yes.

Governor: Okay, wonderful.

Attorney General: Yes Governor.

2. Public Comment (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)

Governor: We will move to agenda item number 2, Public Comment. Is there any member of the public present in Carson City that would like to provide public comment? I hear and see none. Is there anyone present in Las Vegas to present public comment?

Secretary of State: The only thing I would like to say is congratulations to the Laxalt family for Baby Jack, if that is okay, Governor.

Governor: Of course, congratulations Mr. Attorney General.

Attorney General: Thank you both very much, I really appreciate it.

3. Approval of Proposed Contract (For possible action)

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-----------------------|--------|--|-------------------------|-------------------------------------|-----------|---|
| 1. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS – FALLEN SOLDIER GIFT FUND | PUNCH, LLC | OTHER: SETTLEMENT FUNDS; GIFT FUNDS | \$250,000 | |
| Contract Description: | | This is a new contract that provides the design and installation of the State Battle Born Memorial to Fallen Soldiers. | | | | |
| | | Term of Contract: | 12/18/2017 - 12/31/2018 | Contract # 19534 | | |

Governor: We have one item on the agenda and this is a new contract that provides for the design and installation of the State Battle Born Memorial to fallen soldiers which will be installed on the Capitol Grounds. This is something that I’m personally very excited about. It’s another way to honor the men and women of our military but particularly the men and women that have made the ultimate sacrifice. These are names that are contained in the Book of Heroes that is downstairs in the Capitol. I’m not sure who is presenting today, but Director Miller, if you could take us through what the Memorial is going to look like and what we have to expect and anticipated completion date. Thank you.

Kat Miller: Good morning Governor, Secretary of State, thank you very much. As Governor Sandoval said, the Battle Born Memorial to Nevada’s fallen is intended to honor the sacrifice of Nevada’s service members, men and women who have lost their lives in defense of the nation.

During the 77th Legislative Sessions, SB 230 was signed by the Governor authorizing the installation and maintenance of this Memorial to be placed on the Capitol Complex. The Nevada Veterans Service Commission formed a subcommittee, the Veterans Memorial Affairs Subcommittee to manage this project.

The Subcommittee was charged with recommending criteria for placing the names on the Memorial, to recommend a site location on the Capitol Grounds, propose a design and the criteria for identifying the names of the Memorial. The site proposal was concluded in 2014.

The process to design the Memorial took quite a bit longer. It was led by the Nevada Arts Council which was a very thorough and deliberative process that had many components, involved much of the veteran's community here in Nevada. It identified potential artists, design criteria, development and advertisement of the artist's request for qualifications. The Selection Committee included members of three veteran service organizations, the Director of the Visual and Public Arts Program at the Utah Arts Council, a renowned private sector architect, State Public Works and the Nevada Arts Council Executive Director.

Three finalists were selected by the Committee. The final selection of the artist occurred in April 2017 where three finalists made a presentation to the Selection Committee. The Veterans Memorial Advisory Subcommittee unanimously selected the Monument designed by Punch Art, LLC and forwarded the recommendation to the Veteran's Service Commission and then on to the Governor.

The Veterans Service Commission also voted to approve this recommendation. They agreed that the Monument's design, not only addressed all maintenance, public safety and access concerns, but was a fitting tribute to Nevada's fallen.

The design is really unique because it takes advantage of the sun. It has the names of the fallen on the roof of the Monument or on the ceiling and there are slats of metal with the name engraved of each one of the fallen. As the sun comes down, the light falls through the roof and the names of the fallen not only hit the ground, but they're draped over those who are there looking at the Monument. It is really unique visually and it also has a lighting element so that at night, you still get the effect of the light filtering through the names of the fallen. It's very interactive.

State Public Works is here to talk about any details of the contract. I can tell you, this design was unanimously recommended by the Veterans Service Commission and all the veterans that I know that have seen it are very, very pleased and believe it to be a fitting tribute.

Governor: Thank you, Director Miller. I don't mean to be paging through the book while you're speaking but it's pretty spectacular, at least the renderings that I'm looking at. Unlike anything else, not only in the United States, perhaps the world, but I'm really excited about the fact of what you—I think you termed as 'draping' the names so that whether it be

night or day, those names will be on the floor or be on the individuals that are visiting the Memorial. I'm happy to share this with everyone, to take a look at it, but this is —indeed a fitting memorial and something that Nevadans will be very proud of, as well as, something that again, if we can ever come up with something that is fitting for the men and women that have made that ultimate sacrifice—and I apologize to Madam Secretary and Attorney General because they don't have the benefit of seeing the renderings that I have but it is, again, a fitting and spectacular memorial and it will be a very proud addition to the Capitol Mall.

Do you have any idea or perhaps you're going to be talking about the start and completion dates and costs. Actually, Madam Secretary, Mr. Attorney General, do you have any questions for Director Miller?

Secretary of State: No, thank you Governor.

Attorney General: No Governor, thank you.

Governor: Okay.

Chris Chimits: Good afternoon Governor and Members of the Board of Examiners. I first would like to just thank you for having this meeting. It's unusual and we appreciate your level of commitment to helping us make the schedule, which is what I would like to talk about next.

We, after today, if this contract is approved, are moving forward with the preliminary design, which will be completed in February. Then, we'll finalize the design in March and then the artist, combining with certain contractors will establish shop drawings, which are nothing more than the contractor's version or iteration of how all the connections, the parts and the pieces, how those will all be made specifically. That shop drawing process will be completed by the end of April.

Then, we'll move into construction. We're going to start fabrication of the product in Las Vegas. That will occur in May and June. Much of the "visual construction" is art and it will be put together in Las Vegas. We'll have a groundbreaking in July, which would probably be the most appropriate date to have a groundbreaking, depending on everybody's schedule.

Then, the visual portion of construction that people could see be done by a contractor will occur in August of 2018. As that develops, then the art will be shipped up here and will be implemented into the structure with the whole thing being completed by November 5th. Then we would be available for a ribbon cutting ceremony at your disposal, after the 5th.

Governor: I am thinking Veterans Day, would be an appropriate day to do that, but—just for the benefit of the Secretary and the Attorney General, that was the motivation to schedule this Special Meeting today because we would not have been able to meet the

construction and installation schedule if we had to wait until the next scheduled meeting of the Board of Examiners.

Now, are one of you going to speak to the costs and where the money came from to build this?

Chris Chimits: Chris Chimits for the record. The cost of the project is \$250,000 for what we're calling the base bid or the fundamental aspect of the construction. It includes everything. There was a second alternate that—you would see it in those drawings there, it's kind of a reflective—they had originally proposed a water feature and that did not go over very well with Buildings and Grounds. So, what the artist is proposing is something that will look just like a flat water feature but it will be made out of black granite. That will be built on that perforated wall, on the west side of the Monument. That's in addition, along with the footings and foundation that would add \$90,000.

The complete construction contract would be \$340,000. Then, that would take care of all the work of the Monument. There's some—there's two preliminary contracts that Public Works will be doing in advance of the construction start by the artist. We'll be relocating a storm drain that runs right through the middle of that site. Then we'll also be bringing power to within five feet of where they need it to be. That will occur ahead of that, probably in May/June, in that timeframe. We'll have that work done in advance so that when they arrive on site for the official construction, the site will be ready for them.

Governor: Just looking at these renderings, that massive slab of granite will be polished and glossy to give it the wet look?

Chris Chimits: Yes sir, it's designed to look wet.

Governor: Okay.

Chris Chimits: I'm excited about that project as an architect. I've not seen a design solution for something that the State has been able to build like this ever. It's totally unique. It's not like any other Monument on the grounds out there. It's interactive. I think what Kat indicated, the aspect of the fallen, the men and women who are no longer with us, having a fleeting shadow that comes and moves as an interaction with people as they walk through that is really worth pursuing. The west wall of that is also going to be perforated, it's digitally perforated through the bronze, so you'll see images of soldiers running. And yet, you can perceive them up close, but again, they're fleeting too. You'll see it in the imagery there.

The whole Monument is truly remarkable and something that we're excited and proud to be associated with in every way. So, we spotted the site out there because I wanted the visual connection to the library, to the stone wall of the State Library that has the Veterans Memorial there. The site will be a very intimate area for people to experience on a small scale. Then also, that long sidewalk that connects it to the stone wall of the Library will

allow for larger events that—so we deliberately picked that site so it can be all things, as veterans visit that site.

I really very much appreciate the ability to get started on that. I want to get it done.

Governor: Thank you. Just looking at it, it will be an emotional tribute as it should be. As I said, this will be a destination for people to visit. I think it will be a very nice complement to the Nevada Veterans Memorial in Las Vegas at the State Office Building there. For everybody who is responsible for getting it to this—to where we are now and ensuring that it will get done by Veterans Day next year, I truly am thankful.

Questions or comments? Kat, did you have any conclusory remarks you'd like to make?

Kat Miller: Two things sir, first I'd like to apologize to the Attorney General for not acknowledging him. I didn't realize he was on the call, so sorry Attorney General.

Secondly, I did want to point out that there were so many people involved in the selection process and determining what the elements of this project were. I don't know other monuments across the country, what the voice of the veteran's community was, but I can say for this one here in Nevada, it definitely reflects the voice of the veteran's community. I wanted to publicly acknowledge all those veterans that participated in this and particularly the Nevada Veterans Service Commission for the work that they did in recommending this design.

Governor: Thank you. We all agree that we want Nevada to be the most military and veteran friendly state in the country. Part of that is showing our appreciation and respect for the men and women of the military. As I said, particularly for those that have made the ultimate sacrifice.

Again, I want to make sure that we leave these renderings out for everybody to look at them today, for the opportunity to do so because it truly is just an amazing, remarkable, emotional structure that will I think stand the test of time in terms of showing that respect and appreciation.

Madam Secretary, Mr. Attorney General, do you have any questions or comments?

Secretary of State: I do, Governor, if I might. I just wanted to make sure that I understood exactly the location, where this is going to be constructed, if you can tell me that. And then, it's on the Capitol Complex, but in the side, the front? I'm just trying to visualize where it will go.

Chris Chimits: Chris Chimits for the record. Thank you for that question. I'll do my best to kind of visually walk you through it. If you go to the east side of the Guinn Annex building, behind the Capitol. Before you get to the Nevada State Library, there's a long sidewalk that's about six or seven feet wide that runs in the north/south direction all along the front of the Nevada State Library and Archives Building. So, this Monument is going to

be located just to the South, slightly in front of the Archives Building, right along the edge of that sidewalk on the east side.

Secretary of State: Okay, so is it replacing a wall or adding to a wall right there? Because I know we have the one wall that's facing north. So I'm just trying to visualize, will this be—the back of it be facing the Archives or is that wall that's before you get into the Archives?

Chris Chimits: The new Monument will be approximately 200 feet south of the existing stone sculpted wall of the Nevada State Library. It will be immediately adjacent to the east edge of that sidewalk that runs along the front of the library.

Secretary of State: Okay I think I've got it but when I go up there, I'll have them show it to me. And then, Governor, my final question is, I know that you did such an excellent job, Governor, all—everybody that was involved with what we did down here at the Grant Sawyer Building for all of the time periods and it was really done very, very well. You did a great job and hats off to you all up there as well.

Was that done in the time that it needed to be done? Were we able to time that out so that we had it when we wanted it or was there any issue with the construction time and did we have to delay it or was it on time?

Kat Miller: Director Kat Miller, for the record. Ma'am, it was on time.

Secretary of State: Okay. Then I have all the faith in the world that this will be done as well. I know how important it is to us to have that done. That was just my other question. I just wanted to make sure—because I do know that sometimes our projects get a little delayed and fall behind, but I'm—I'm glad, Governor, you called this Special Meeting and we're able to make sure that this happens. So, thank you everybody. Appreciate it, thanks Governor, for letting me ask those questions.

Governor: Just one other thing because there's a reality here that I think needs to be part of the record, this project would not have happened without the contribution of the Attorney General's Office. There's a \$300,000 contribution by the Attorney General's from settlement funds.

I personally want to thank Attorney General Laxalt for the willingness of his office to do this because we wouldn't be here today without that. Certainly the Attorney General and his office deserve a lot of credit in terms of making this a reality.

Attorney General: Thank you Governor. Great to work with your team, as always on this important matter.

Governor: All right, any further questions or comments? If there are none, the Chair will accept a motion to approve Contract number 1, as presented in the agenda. Department of Administration, State Public Works, the Fallen Soldier Gift Fund in the sum of \$250,000.

Secretary of State: So moved.

Governor: Secretary of State has moved for approval, is there a second?

Attorney General: I second.

Governor: Seconded by the Attorney General. Any questions or comments on the motion? I hear none. All those in favor, please say aye. Those opposed say no. Was that an aye Mr. Attorney General?

Attorney General: That is an aye. I'm in a hospital room, so I hope you guys bear with me.

Governor: Just wanted to make sure. So, that motion passes unanimously 3-0. All right. Thank you very much. Congratulations and let's get to work.

4. Public Comment (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item)

Governor: We'll move to agenda item number 4 which is Public Comment. Is there any member of the public present in Carson City that would like to provide public comment to the Board? I hear none. Is there anyone present in Las Vegas for public comment?

Secretary of State: No, there is nobody. Thank you Governor.

Governor: Thank you. Is there—I guess before I take a motion for adjournment, I just wanted to wish everybody a Merry Christmas, Happy New Year, Happy Holidays and hope everyone has a wonderful holiday.

Secretary of State: Merry Christmas to you Governor.

Governor: Thank you.

5. Adjournment (For possible action)

Secretary of State: Motion to adjourn.

Governor: Secretary has moved to adjourn. Is there a second?

Attorney General: I second.

Governor: Seconded by the Attorney General. All in favor, say aye. That motion passes 3-0 and again, thank you to everybody that was responsible for making this meeting a reality, this meeting is adjourned. Thank you.

Secretary of State: Thank you.

Brian Sandoval
Governor

James R. Wells, CPA
Director

Paul Nicks
Deputy Director



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

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

Date: December 7, 2017
To: James R. Wells, Clerk of the Board
Governor's Finance Office
From: Melanie Young, Budget Officer *my*
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 ADMINISTRATION, FLEET SERVICES DIVISION

Agenda Item Write-up:

Pursuant to NRS 334.010 the Department of Administration, Fleet Services Division requests approval to purchase one replacement vehicle for a total amount not to exceed \$30,035.25.

Additional Information:


The replacement vehicle, a Ford Utility Police Interceptor, for monthly rental Fleet Service vehicle utilized by the Department of Public Safety, Parole and Probation which was totaled in an accident on August 30, 2017. This authorization will be funded with accident recovery funds in the amount of \$22,848.50 less salvage and deductible plus agency's reserves.

Statutory Authority:

BOE approval required pursuant to NRS 334.010

| |
|---------------------|
| REVIEWED: <i>my</i> |
| ACTION ITEM: _____ |

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

| | | |
|---|---|----------------|
| Agency Name: Fleet Services | Budget Account #: 1354 | |
| Contact Name: Robble Burges | Telephone Number: 684-1883 | |
| Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information: | | |
| Number of vehicles requested: <u>1</u> Amount of the request: <u>30035.25</u> Is the requested vehicle(s) new or used: <u>new</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Ford Utility Interceptor Mission of the requested vehicle(s): Parole and Probation | | |
| Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? internal service funds | |
| Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s) | | |
| Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. not applicable | | |
| Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: 2016 Odometer Reading: 9259 Type of Vehicle: Utility Interceptor <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <hr/> <i>Please attach an additional sheet if necessary</i> | Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Vehicle was totaled in an accident <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. | |
| APPOINTING AUTHORITY APPROVAL: | | |
|  | <u>Administrator</u> | <u>12/4/17</u> |
| Agency Appointing Authority | Title | Date |
| BOARD OF EXAMINERS' APPROVAL: | | |
| <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase | | |
| _____ Board of Examiners | | _____ Date |

Brian Sandoval
Governor



Patrick Cates
Director

Lee-Ann Easton
Deputy Director

Robbie Burgess
Administrator

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

750 E. King Street
Carson City, Nevada 89701-4768
Phone: (775) 684-1880 | Fax: (775) 684-1888
Website: www.fleetservices.nv.gov

Date: December 4, 2017

To: Melanie Young, Executive Branch Budget Officer II
Governor's Office of Finance

From: Lyn Letarti, Fleet Specialist II

Subject: January BOE Agenda Item Request

Please put the attached Board of Examiners (BOE) vehicle request on the January BOE agenda. This request is to replace one vehicle that was totaled in an accident. This vehicle will be purchased with reserve funds.

Attachments:

- BOE vehicle purchase form
- Accident report
- Vehicle spreadsheet
- Quote

STANDARD PAGE/COST MATRIX ~ BID #8477 POLICE ~ UPDATED 20170906

(Use separate page for each package)

DEALER NAME: JONES-WEST FORD, RENO, NEVADA (BILL FLETCHER/775-829-3207)

Specify State's Vehicle Item Number:

(i.e. 1.1 Sedan: Full size; 4-door; 6 passenger)

1.2, SUV, 4DR, 4WD, 5-6PASS

**Specify MANUFACTURER,
MODEL NAME, YEAR & BODY MODEL CODE:**

**Base Price for
RENO/CARSON CITY**

**Base Price for
LAS VEGAS**

2018 FORD UTILITY POLICE INTERCEPTOR (K8A)

\$27,489

\$27,789

State vehicle miles per gallon (MPG): 16 CITY / 21 HWY

State manufactures warranty: 3 YRS/36000 MILES

Specify alternate fuel engine size and emission rating: 3.7L V8 TIVCT FFV

Includes Minimum Standard Equipment Listed: X Yes No If no, state exceptions:

Exterior Color: List available colors: (CC=CLEARCOAT; CCM=CLEARCOAT/METALLIC)

| | | | |
|----------------------------------|----|--------------------------|----|
| Medium Brown Metallic | BU | Smokestone Metallic | HG |
| Arizona Beige Metallic Clearcoat | E3 | Medium Titanium Metallic | YG |
| Vermillion Red | E4 | Dark Blue | LK |
| Blue Metallic | FT | Royal Blue | LM |
| Shadow Black | G1 | Oxford White | YZ |

Seats, Cloth: List available colors:

BLACK

GVW: NA#

(When Applicable)

WHEELBASE: 114" / LENGTH: 197"

(When Applicable)

ITEMIZED OPTIONS PAGE ~ BID #8477 POLICE

(Use separate page for each package)

DEALER NAME: JONES-WEST FORD, RENO, NEVADA (BILL FLETCHER/775-829-3207)

Specify State's Vehicle Item Number:

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

1.2, SUV, 4DR, 4WD, 5-6PASS

Option Package Name/Code:

SEE ATTACHED ORDER GUIDE

DEDUCT AMOUNT

List Equipment Features Below:

FS013

2018 POLICE INTERCEPTOR UTILITY POLICE INTERCEPTOR CONTENT

Unique Police Interceptor Utility Features Include:

MODEL/SERIES/AVAILABILITY

- 2 Available Models
 - 3.7L V6 Ti-VCT FFV AWD
 - 3.5L V6 EcoBoost® AWD
- 1 Available Series
 - 500A

MECHANICAL

- AWD Drivetrain – Standard for enhanced handling precision and unsurpassed traction on wet or dry surfaces
- 3.7L Ti-VCT V6 FFV High efficient Police Calibrated (V6 displacement technology is optimal for long days spent idling or on the job)
- Brakes – Police calibrated high performance system. 4-Wheel heavy-duty disc w/heavy-duty front and rear calipers
- Rotors – large mass for high thermal capacity and calipers with large swept area.
- Electric Power-Assist Steering (EPAS) – Heavy-Duty
- Transmission – 6-speed automatic, exclusively police calibrated for maximum acceleration and faster closing speeds
- Alternator – Heavy-Duty 220 Amp
- Battery – Heavy-Duty 750 CCA
- Cooling System – Heavy-duty, large high volume radiator, Engine oil cooler and transmission oil cooler
- Engine Hour Meter
- Powertrain mounts – Heavy-Duty.
- Wheels
 - Heavy-duty steel, vented with center cap
 - Full size spare tire w/TPMS

INTERIOR FEATURES

- Cargo Area – Spacious area for police equipment
- Column Shifter
- Flooring – Heavy-duty vinyl, offers ease of cleaning, long term durability
- Pedals – Power-adjustable
- Seats
 - Front – Police grade cloth – 6-way power-adjustable Manual lumbar, seatback foam designed to comfortably accommodate a utility belt
 - Built-in steel intrusion plates in both front-seatbacks
 - 2nd Row – Police grade vinyl, offer easy care for cleaning
 - Liftgate access with manual lock cylinder
- Simple Fleet Key (w/o microchip, easy to replace)
- Speedometer – Certified, digital readout in message center and analog gauge
- Universal equipment tray atop instrument panel (ideal for radar and other police equipment)

POLICE UPFIT FRIENDLY

- Consistent 9-inch space between driver and passenger seats for aftermarket consoles
 - Console mounting plate
 - Dash pass-thru opening for aftermarket wiring
 - Headliner – Easy to drop
 - Integrated LED police flashers (Available)
 - Taillamps – Integrated police flashers (Available)
 - ★ Two (2) 50 amp battery ground circuits – power distribution junction block (repositioned behind 2nd row passenger seat floorboard).
- Note:** Now standard on the Police Interceptor Utility

TECHNOLOGY

- BLIS® – Blind Spot Monitoring with Cross-traffic Alert (Available)
- Ford SYNC® – Hands-free communications with programmable steering wheel-mounted controls (Available)
- Rear Video Camera with Washer (Standard)
- Reverse Sensing (Available)
- Unique Steering Wheel (with up to 4-remappable configurations – Available)

COMMONALITY

- Commonality of parts between the Sedan and Utility Interceptors include: Front brake calipers, rear brake calipers, wheels, battery, 220 amp alternator, PTU, RDU and front-seats.
- Maintenance Components – Oil filter, air filter, spark plugs, front and rear brake pads, front and rear brake rotors and tires.

SAFETY/SECURITY HIGHLIGHTS

- AdvanceTrac® w/RSC® (Roll Stability Control™) police tuned gyroscopic sensors work seamlessly with the ABS
- Ballistic Door-Panels (National Institute of Justice (NIJ) certified to stop Type III, IV and all lesser NIJ rounds) (Available)
- Exterior Key Locks – Driver, passenger side and liftgate
- 75-mph Rear End Crash Tested
(Note: The full-size spare tire secured in the factory location is necessary to achieve police-rated 75 mph rear impact crash-test performance attributes)

WARRANTY

- 3 Year / 36,000 Miles Bumper / Bumper

FORD POLICE INTERCEPTOR EXTENDED SERVICE PLAN Powertrain CARE PROTECTION

- 5-year/100,000-mile Powertrain CARE Extended Service Plan (zero deductible) on ALL 2018MY Police Interceptors – Sedan and Utility (Standard)

NEW FOR 2018

- **New**
 - Simple Fleet Key (4 Keys) (Standard)
 - Remote Keyless-Entry Key Fob (55F) (Includes 4-key fobs)
 - Rear bumper step pad (Standard)
- **Deleted**
 - Remote Keyless-Entry Key Fob (595) (2-key fobs)
- **Changed**
 - Scuff Guards (55D) – Top surface protection on rear bumper has been removed from package
- **New Colors**
 - Blue Metallic (FT)
- **Deleted Colors**
 - Blue Jeans Metallic

Product Changes and Features Availability

Features, options and package content subject to change. Please check www.fmcdealer.com for the most current information.

★ = New for this model year

2018 POLICE INTERCEPTOR UTILITY STANDARD EQUIPMENT

The following items are std. 2018MY POLICE INTERCEPTOR UTILITY vehicle:

MECHANICAL

- Alternator – 220-Amp
- Axle Ratio – 3.65 (AWD)
- Battery – H.D. maintenance-free 78A/750-CCA
- Brakes – 4-Wheel Heavy-Duty Disc w/H.D. Front and Rear Calipers
- Column Shifter
- Drivetrain – All-Wheel-Drive
- Electric Power-Assist Steering (EPAS) – Heavy-Duty
- Engine – 3.7L V6 Ti-VCT
- Engine Hour Meter
- Engine Oil Cooler
- Fuel Tank – 18.6 gallons
- Suspension – independent front & rear
- Transmission – 6-speed automatic

EXTERIOR

- Antenna, Roof-mounted
- Cladding – Lower bodyside cladding (Black)
- Deflector Plate – Undercarriage deflector plate protect the underbody, powertrain and chassis components (Standard on EcoBoost® Only)
- Door Handles – Black (MIC)
- Exhaust True Dual
- Front-Door-Lock Cylinders (Front Driver / Passenger / Liftgate – Lock cylinder repositioned into decklid appliqué trim)
- Glass – 2nd Row, Rear Quarter and Liftgate Privacy Glass
- Grille – Black
- Headlamps – LED Low Beam; Incandescent (Halogen) High Beam
- Liftgate – Manual 1-Piece – Fixed Glass w/Door-Lock Cylinder
- Mirrors – Black Caps (MIC), Power Electric Remote, Manual Folding with Integrated Spotter (integrated blind spot mirrors not included when equipped with BLIS®)
- ★ Rear bumper step pad
- Spare – Full size 18" Tire w/TPMS
- Spoiler – Painted Black
- Tailgate Handle – Painted Black
- Tail lamps – LED
- Tires – 245/55R18 A/S BSW
- Wheel-Lip Molding – Black (MIC)
- Wheels – 18" x 8.0 painted black steel with wheel hub cover
- Windshield – Acoustic Laminated

INTERIOR/COMFORT

- Cargo Hooks
- Climate Control – Single-Zone Manual
- Door-Locks
 - Power
 - Rear-Door Handles and Locks Operable
- Floor – Flooring – Heavy-Duty Thermoplastic Elastomer
- Glove Box – Locking/non-illuminated
- Grab Handles – (1 – Front-passenger side, 2-Rear)
- Liftgate Release Switch located in overhead console (45 second timeout feature)
- Lighting
 - Overhead Console with sunglass holder
 - 1st row task lights (driver and passenger)
 - Dome Lamp – 1st row (red/white)
 - 2nd/3rd row overhead map light
- Mirror – Day/night Rear View
- Particulate Air Filter
- Power-Adjustable Pedals (Driver Dead Pedal)
- Powerpoints – (2) First Row
- Rear-window Defrost
- Scuff Plates – Front & Rear

INTERIOR/COMFORT (continued)

- Seats
 - 1st Row Police Grade Cloth Trim, Dual Front Buckets
 - 1st Row – Driver 6-way Power track (fore/aft. Up/down, tilt with manual recline, 2-way manual lumbar)
 - 1st Row – Passenger 2-way manual track (fore/aft. with manual recline)
 - Built-in steel intrusion plates in both driver/passenger seatbacks
 - 2nd Row Vinyl, 60/40 Split Bench Seat (manual fold-flat, no tumble) – fixed seat track
- Speed (Cruise) Control
- Speedometer – Calibrated (includes digital readout)
- Steering Wheel – Manual / Tilt, Urethane wheel finish w/Silver Painted Bezels) with Speed Controls and Redundant Audio Controls
- Sun visors, color-keyed, non-illuminated
- Universal Top Tray – Center of I/P for mounting aftermarket equipment
- Windows, Power, 1-touch Up/Down Front Driver/Passenger-Side with disable feature

SAFETY/SECURITY

- AdvanceTrac® w/RSC® (Roll Stability Control™) w/Hydraulic Brake Assist
- Airbags, 2nd generation driver & front-passenger, side seat, Roll Curtain Airbags and Safety Canopy®
- Anti-Lock Brakes (ABS) with Traction Control
- Belt-Minder® (Front Driver / Passenger)
- Child-Safety Locks (capped)
- Individual Tire Pressure Monitoring System (TPMS)
- LATCH (Lower Anchors and Tethers for Children) system on rear outboard seat locations
- Seat Belts, Pretensioner/Energy-Management System w/adjustable height in 1st Row
- SOS Post-Crash Alert System™

FUNCTIONAL

- Audio
 - AM/FM / CD / MP3 Capable / Clock / 6 speakers
 - 4.2" Color LCD Screen Center-Stack "Smart Display"
 - 5-way Steering Wheel Switches, Redundant Controls
 - Note:** Radio does "not" include USB Port or Aux. Audio Input Jack
 - Note:** USB Port and Aux. Audio Input Jack requires SYNC® (53M)
- Easy Fuel® Capless Fuel-Filler
- Front door tether straps (driver/passenger)
- Power pigtail harness
- Rearview Camera with Washer viewable in 4" centerstack – OR – Rear View Camera viewable in rear view mirror 87R (No charge option)
- Recovery Hook, Rear Only
- Simple Fleet Key (w/o microchip, easy to replace)
- Two-way radio pre-wire
- Two (2) 50 amp battery ground circuits – power distribution junction block (repositioned behind 2nd row passenger seat floorboard)
- Windows – Rear Defroster
- Wipers – Front Speed-Sensitive Intermittent; Rear Dual Speed Wiper

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2018 POLICE INTERCEPTOR UTILITY EQUIPMENT GROUP

PROPRIETARY

| Series | Option Code | Police Interceptor 500A |
|---|------------------|-------------------------|
| Police Interceptor Utility AWD (Incl. D&D) | K8A | S |
| 3.7L V6 Ti-VCT FFV with 6-Speed Automatic Transmission | 99R / 44C | S |
| 3.5L V6 EcoBoost® – (121mph Top Speed) | 99T / 44C | \$3130 |
| EQUIPMENT GROUP | | |
| Interior Upgrade Package – 1 st and 2 nd Row Carpet Floor Covering – Cloth Seats – Rear – Center Floor Console less shifter w/unique Police console finish plate – includes Console – Top Plate – Finish 3 (incl. 2 cup holders) – Floor Mats, front and rear (carpeted) – Deletes the standard console mounting plate (85D) Note: Not available with options: 67G, 67H, 67U, 85R, 96W, 96T | 65U | \$371 |
| Front Headlamp / Police Interceptor Housing Only – Pre-drilled hole for side marker police use, does not include LED installed lights (eliminates need to drill housing assemblies) – Pre-molded side warning LED holes with standard sealed capability (does not include LED installed lights) Note: Not available with options: 66A and 67H | 86P | \$119 |
| Front Headlamp Lighting Solution – Includes base LED Low beam/Incandescent (Halogen) High beam headlamp with High Beam Wig-wag function and two (2) white rectangular LED side warning lights – Includes pre-wire for grille LED lights, siren and speaker (60A) – Wiring, LED lights included. Controller "not" included Note: Not available with option: 67H Note: Recommend using Cargo Wiring Upfit Package (67G) or Ultimate Wiring Package (67U) | 66A | \$809 |
| Tail Lamp / Police Interceptor Housing Only – Pre-existing holes with standard twist lock sealed capability (does not include LED installed lights) (eliminates need to drill housing assemblies) Note: Not available with options: 66B and 67H | 86T | \$58 |
| Tail Lamp Lighting Solution – Includes base LED lights plus two (2) rear integrated hemispheric lighthead white LED side warning lights in taillamps – LED lights only. Wiring, controller "not" included Note: Not available with option: 67H Note: Recommend using Cargo Wiring Upfit Package (67G) or Ultimate Wiring Package (67U) | 66B | \$404 |
| Rear Lighting Solution – Includes two (2) backlit flashing linear high-intensity LED lights (driver's side red / passenger side blue) mounted to inside liftgate glass – Includes two (2) backlit flashing linear high-intensity LED lights (driver's side red / Passenger side blue) installed on inside lip of liftgate (lights activate when liftgate is open) – LED lights only. Wiring, controller "not" included Note: Not available with option: 67H Note: LED lights only – does "not" include wiring or controller Note: Recommend using Cargo Wiring Upfit Package (67G) or Ultimate Wiring Package (67U) | 66C | \$433 |
| Cargo Wiring Upfit Package – Rear console plate (85R) – contours through 2 nd row; channel for wiring – Wiring overlay harness with lighting and siren interface connections – Vehicle Engine Harness: o Two (2) light connectors – supports up to six (6) LED lights (engine compartment) o Two (2) grille light connectors o One (1) 10-amp siren/speaker circuit (engine to cargo area) – Whelen Lighting PCC8R Control Head – Whelen PCC8R Light Relay Center (mounted behind 2 nd row seat) – Light Controller / Relay Center Wiring (jumper harness) – Whelen Specific Cable (console to cargo area) Connects PCC8R to Control Head – Pre-wiring for grille LED lights, siren and speaker (60A) – Does "not" include LED lights o Recommend Police Wire Harness Connector Kits 47C and 21P Note: Not available with options: 65U, 67H and 67U | 67G | \$1272 |
| Ready for the Road Package: All-in Complete Package – Includes Police Interceptor Packages: 66A, 66B, 66C, plus – Whelen Cencom Light Controller Head with dimmable backlight – Whelen Cencom Relay Center / Siren / Amp w/Traffic Advisor (mounted behind 2 nd row seat) – Light Controller / Relay Cencom Wiring (wiring harness) w/additional input/output pigtails – High current pigtail – Whelen Specific WECAN Cable (console to cargo area) connects Cencom to Control Head – Pre-wiring for grille LED lights, siren and speaker (60A) – Rear console plate (85R) – contours through 2 nd row; channel for wiring – Grille linear LED Lights (Red / Blue) and harness – 100-Watt Siren / Speaker – Hidden Door-Lock Plunger / Rear-Door Handles Inoperable (52P) Note: Not available with options: 66A, 66B, 66C, 67G, 87U and 65U | 67H | \$3244 |

* = New for this model year

P = Included in Equipment Group, S = Standard Equipment, O = Optional

2018 POLICE INTERCEPTOR UTILITY EQUIPMENT GROUP

| EQUIPMENT GROUP | | |
|---|-----|--------------------------------------|
| (Continued) | | |
| Ultimate Wiring Package Includes the following: - Rear console mounting plate (85R) – contours through 2 nd row, channel for wiring - Pre-wiring for grille LED lights, siren and speaker (60A) - Wiring harness I/P to rear cargo area (overlay) <ul style="list-style-type: none"> o Two (2) light cables – supports up to six (6) LED lights (engine compartment/grille) o One (1) 10-amp siren/speaker circuit engine cargo area - Rear hatch/cargo area wiring – supports up to six (6) rear LED lights - Does "not" include LED lights, side connectors or controller <ul style="list-style-type: none"> o Recommend Police Wire Harness Connector Kits 47C and 21P Note: Not available with options: 65U, 67G, 67H | 67U | \$524 |
| Police Wire Harness Connector Kit – Front For connectivity to Ford PI Package solutions Includes: (42) Male 4-pin connectors for siren (15) Female 4-pin connectors for lighting/siren/speaker (11) 4-pin IP connector for speakers (11) 4-pin IP connector for siren controller connectivity (8) 8-pin sealed connector (14) 14-pin IP connector Note: See Upfitters guide for further detail www.fordpoliceinterceptorupfit.com | 47C | \$100 |
| Police Wire Harness Connector Kit – Rear For connectivity to Ford PI Package solutions includes: (2) 2-pin connector for rear lighting (2) 2-pin connector (8) Female 4-pin connectors (8) Male 4 pin connectors (1) 10-pin connector Note: See Upfitters guide for further detail www.fordpoliceinterceptorupfit.com | 21P | \$123 |
| KEY EXTERIOR OPTIONS | | |
| Engine Block Heater | 41H | \$86 |
| License Plate Bracket – Front | 153 | NC |
| Lamps / Lighting | | |
| Auto Headlamp | 86L | \$109 |
| Dark Car Feature – Courtesy lamps disabled when any door is opened Note: Not available with Daytime Running Lamps (942) | 43D | \$19 |
| Police Silent Mode – When activated, courtesy lamps and Daytime Running Lamps disabled (user configurable) Note: Daytime Running Lamps do not disable where required by law Note: Requires Daytime Running Lamps (942) | 43L | \$19 |
| Daytime Running Lamps | 942 | \$42 |
| Dome Lamp – Red/White in Cargo Area | 17T | \$49 |
| Front Warning Auxiliary LED Lights (Driver side – Red / Passenger side – Blue) Note: Requires 60A | 21L | \$524 |
| Forward Indicator Pocket Warning LED Lights – Warn, Park, Turn (Driver side – Red / Passenger side – Blue) Note: Requires 60A | 21W | \$607 |
| Front Interior Visor Light Bar (LED) – Super low-profile warning LED light bar fully integrated into the top of the windshield near the headliner. (Red/Red or Blue/Blue operation. White "take down" and "scene" capabilities) Note: Requires Rear Console Plate (85R). Not available with Interior Upgrade Package (65U) | 96W | \$1059 |
| Pre-wiring for grille LED lights, siren and speaker | 60A | \$49 / P-66A / P-67G / P-67H / P-67U |
| Rear Quarter Glass Side Marker LED Lights (Driver side – Red / Passenger side – Blue) | 63L | \$546 |
| Rear Spoiler Traffic Warning Lights (LED) – Fully integrated in rear spoiler for enhanced visibility – Provides red/blue/amber directional lighting Note: Requires Rear Console Plate (85R). Not available with Interior Upgrade Package (65U) | 96T | \$1330 |
| Side Marker LED – Sideview Mirrors (Driver side – Red / Passenger side – Blue) – Located on backside of exterior mirror housing – LED lights only. Wiring, controller "not" included. Note: Requires 60A Note: Recommend using Cargo Wiring Upfit Package (67G), Ready for the Road Package (67H) or Ultimate Wiring Package (67U) | 63B | \$276 |
| Spot Lamp Prep Kits | | |
| Spot Lamp Prep Kit, Driver Side Note: Does not include spot lamp housing and bulb | 51P | \$132 |
| Spot Lamp Prep Kit, Dual Side Note: Does not include spot lamp housing and bulbs | 51W | \$266 |
| Spot Lamp – Incandescent Bulb: | | |
| Driver Only | 51Y | \$204 |
| Dual (driver and passenger) | 51Z | \$334 |
| Spot Lamp – LED Bulb: | | |
| Driver Only (Unity) | 51R | \$375 |

¹⁹ = New for this model year

P = Included in Equipment Group, S = Standard Equipment, O = Optional

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2018 POLICE INTERCEPTOR UTILITY EQUIPMENT GROUP

PROPRIETARY

| EQUIPMENT GROUP | | |
|--|-----|---------------|
| Spot Lamp - LED Bulb (continued) | | |
| Driver Only (Whelen) | 51T | \$399 |
| Dual (driver and passenger) (Unity) | 51S | \$589 |
| Dual (driver and passenger) (Whelen) | 51V | \$632 |
| Body | | |
| Glass - Solar Tint 2 nd Row, Rear Quarter and Liftgate Window (Deletes Privacy Glass) | 92G | \$114 |
| Glass - Solar Tint 2 nd Row Only, Privacy Glass on Rear Quarter and Liftgate Window | 92R | \$81 |
| Roof Rack Side Rails - Black | 68Z | \$148 |
| Deflector Plate (Standard on EcoBoost® engine) | 76D | \$318 |
| VINYL WRAP OPTIONS | | |
| Two-Tone Vinyl Package #1 <ul style="list-style-type: none"> • Roof Vinyl • RH/LH Front-Doors Vinyl • RH/LH Rear-Doors Vinyl • White (YZ) Only Note: Not available with the following options: 91C, 91D, 91E, 91F, 91G, 91H, 91J | 91A | \$797 |
| Two-Tone Vinyl Package #3 <ul style="list-style-type: none"> • Roof Vinyl • RH/LH Front-Doors Only Vinyl • White (YZ) Only Note: Not available with the following options: 91A, 91D, 91E, 91F, 91G, 91H, 91J | 91C | \$665 |
| Two-Tone Vinyl - Roof <ul style="list-style-type: none"> • Roof Vinyl • White Only Note: Not available with the following options: 91A, 91C | 91H | \$466 |
| Two-Tone Vinyl - RHLH Front-Doors <ul style="list-style-type: none"> • White Only Note: Not available with the following options: 91A, 91C, 91D, 91E, 91F, 91G | 91J | \$290 |
| Vinyl Word Wrap - POLICE "non-reflective" <ul style="list-style-type: none"> • White (YZ) lettering located on LH/RH sides of vehicle Note: Not available with the following options: 91A, 91C, 91E, 91F, 91G, 91J | 91D | \$755 |
| Vinyl Word Wrap - POLICE "reflective" <ul style="list-style-type: none"> • Black lettering located on LH/RH sides of vehicle Note: Not available with the following options: 91A, 91C, 91D, 91F, 91G, 91J | 91E | \$755 |
| Vinyl Word Wrap - POLICE "reflective" <ul style="list-style-type: none"> • White lettering located on LH/RH sides of vehicle Note: Not available with the following options: 91A, 91C, 91D, 91E, 91G, 91J | 91F | \$755 |
| Vinyl Word Wrap - SHERIFF "non-reflective" <ul style="list-style-type: none"> • White lettering located on LH/RH sides of vehicle Note: Not available with the following options: 91A, 91C, 91D, 91E, 91F, 91J | 91G | \$755 |
| Wheels | | |
| Wheel Covers (18" Full Face Wheel Cover) Note: Only available with the standard Police wheel, not available with 64E | 65L | \$58 |
| 18" Painted Aluminum Wheel Note: Spare wheel is an 18" conventional (Police) black steel wheel | 64E | \$451 |
| Audio / Video | | |
| Rear View Camera (Includes Electrochromic Rear View Mirror - Video is displayed in rear view mirror) Note: This option would replace the camera that comes standard in the 4" center stack area. Note: Camera can only be displayed in the 4" center stack (std) "OR" the rear view mirror (87R) | 87R | NC |
| SYNC® Basic (Voice-Activated Communication System) - Includes single USB port and single auxiliary audio input jack | 53M | \$280 |
| Remappable (4) switches on steering wheel (less SYNC®) | 61R | \$148 |
| Remappable (4) switches on steering wheel (with SYNC®) | 61S | \$148 |
| Doors / Locks (Select only one¹) | | |
| Hidden Door-Lock Plunger w/Rear-door handles operable ¹ | 52H | \$132 |
| Hidden Door-Lock Plunger w/Rear-door handles inoperable ¹ | 52P | \$153 / P-67H |
| Rear-Door Handles Inoperable / Locks Operable ¹ | 68L | \$33 |
| Rear-Door Handles Inoperable / Locks Inoperable ¹ | 68G | \$33 |
| Global Lock / Unlock feature (Door-panel switches will lock/unlock all doors and rear liftgate. Eliminates overhead console liftgate unlock switch and 45-second timer. Also eliminates the blue liftgate release button if ordered with Remote Keyless) | 18D | NC |
| Windows | | |
| Windows - Rear-window power delete, operable from front driver side switches | 18W | \$24 |
| Flooring / Seats | | |
| 1 st and 2 nd row carpet floor covering (includes floor mats, front and rear) | 16C | \$119 / P-65U |
| 2 nd Row Cloth Seats | 88F | \$58 / P-65U |
| Power passenger seat (6-way) w/manual recline and lumbar | 87P | \$309 |

¹ Options 68L, 68G, 52H and 52P not available in any combination

* = New for this model year

P = Included In Equipment Group, S = Standard Equipment, O = Optional

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2018 POLICE INTERCEPTOR UTILITY EQUIPMENT GROUP

PROPRIETARY

EQUIPMENT GROUP

Flooring / Seats (continued)

| | | |
|---|-----|------------|
| Front Console Plate – Delete Note: Not available with option: 67G, 67H, 67U, 65R | 86D | NC / P-65U |
|---|-----|------------|

| | | |
|---|-----|------------------------------|
| Rear Console Plate Note: Not available with option: 65U, 65D | 86R | \$33 / P-67G / P-67H / P-67U |
|---|-----|------------------------------|

Keys (Note: Can be ordered with Remote Keyless Entry - 55F. Not available with Perimeter Anti-Theft Alarm 593)

| | | |
|---------------------|-----|------|
| Keyed Alike – 1435x | 59E | \$49 |
| Keyed Alike – 1284x | 59B | \$49 |
| Keyed Alike – 0135x | 59D | \$49 |
| Keyed Alike – 0576x | 59F | \$49 |
| Keyed Alike – 1111x | 59J | \$49 |
| Keyed Alike – 1294x | 59C | \$49 |
| Keyed Alike – 0151x | 59G | \$49 |

Safety & Security

| | | |
|---|-----|--------|
| Ballistic Door-Panels (Level III) – Driver Front-Door Only ² | 90D | \$1506 |
|---|-----|--------|

| | | |
|--|-----|--------|
| Ballistic Door-Panels (Level III) – Driver & Pass Front-Doors ² | 90E | \$3012 |
|--|-----|--------|

| | | |
|---|-----|--------|
| Ballistic Door-Panels (Level IV+) – Driver Front-Door Only ³ | 90F | \$2294 |
|---|-----|--------|

| | | |
|--|-----|--------|
| Ballistic Door-Panels (Level IV+) – Driver & Pass Front-Door Only ³ | 90G | \$4588 |
|--|-----|--------|

| | | |
|--|-----------|-------|
| BLIS® – Blind Spot Monitoring with Cross-traffic Alert (Requires 54Z) Note: Includes manual fold-away mirrors, w/heat, w/o memory, w/o puddle lamps | 56B / 54Z | \$517 |
|--|-----------|-------|

| | | |
|---|-----|------|
| Lockable Gas Cap for Easy Fuel® Capless Fuel-Filler | 19L | \$19 |
|---|-----|------|

| | | |
|--|-----|------|
| Mirrors – Heated Sideview Note: Not required when ordering BLIS® (heated mirror is included with BLIS®) | 549 | \$58 |
|--|-----|------|

| | | |
|---|-----|-------|
| Perimeter Anti-Theft Alarm – Activated by Hood, Door or Liftgate – Requires Key Fob (55F) Note: Cannot be ordered with Keyed-Alike options | 593 | \$114 |
|---|-----|-------|

| | | |
|--|-----|-------|
| Police Engine Idle feature – This feature allows you to leave the engine running and prevents your vehicle from unauthorized use when outside of your vehicle. Allows the key to be removed from ignition while vehicle remains idling. | 47A | \$248 |
|--|-----|-------|

| | | |
|--|-----|-------|
| Remote Keyless-Entry Key Fob (w/o Keypad, less PATS) – (includes 4-key fobs) Note: Available with Keyed Alike, however, key fobs are “not” fobbed alike when ordered with Keyed-Alike | 56F | \$322 |
|--|-----|-------|

| | | |
|-----------------|-----|-------|
| Reverse Sensing | 76R | \$261 |
|-----------------|-----|-------|

Misc

| | | |
|--|-----|-------|
| Aux Air Conditioning Note: Not available with Cargo Storage Vault (63V) | 17A | \$579 |
|--|-----|-------|

| | | |
|--|-----|----|
| Badge Delete – Deletes the “Police Interceptor” badging on rear liftgate – Deletes the “Interceptor” badging on front hood (EcoBoost®) | 16D | NC |
|--|-----|----|

| | | |
|---|-----|-------|
| Cargo Storage Vault (includes lockable door and compartment light) Note: Not available with Aux Air Conditioning (17A) | 63V | \$232 |
|---|-----|-------|

| | | |
|---|-----|------|
| Scuff Guards – Protective wrap edging located on front edge of both rear-doors | 55D | \$67 |
|---|-----|------|

| | | |
|---|-----|------|
| My Speed Fleet Management – Allows dealer or fleet administrator to lower the maximum vehicle speed and the maximum audio system volume using a Ford authorized IDS diagnostic service tool – Allows the VMAX speed to be set in 5mph increments (between 90 – 131 mph) Note: See Upfitter’s Guide for further detail www.fordpoliceinterceptorupfit.com | 43S | \$58 |
|---|-----|------|

| | | |
|---|-----|------|
| Noise Suppression Bonds (Ground Straps) | 60R | \$95 |
|---|-----|------|

| | | |
|--|-----|--------|
| Enhanced PTU Cooler – Power Transfer Unit – Recommended Usage: EVOC Training; Continuous / Extended Track Usage Note: This PTU Cooler is not required for day to day patrol usage Note: Requires the 3.5L V6 EcoBoost® Engine (99T) | 52B | \$2779 |
|--|-----|--------|

| | | |
|---|-----|---------------|
| 100 Watt Siren/Speaker (includes bracket and pigtail) | 18X | \$285 / P-67H |
|---|-----|---------------|

² Tested and meets the requirements of NIJ Standard 0108.01 Level III:
 • 7.62 x 51 mm 9.7g M80 (.308 Winchester 150gr)
 Per LAPD requirements, they’re also designed to withstand special threat rounds:
 • 7.62 x 39 mm MSC 7.9g (Type 56)
 • 5.56 x 45 mm M193 3.36g
 • 5.56 x 45mm M855 4g

³ Tested and meets the requirements of NIJ Standard 0108.01 Level IV:
 • 30-08 M2 AP 166gr (7.62 x 63 APM2 10.8g)
 Designed to withstand special threat rounds:
 • 7.62 x 54R LPS 9.65g
 • 7.62 x 51 mm M61 9.75g (.308 Winchester 150.5gr)
 In addition, Level IV+ includes all of the NIJ Level III and LAPD rounds listed in footnote 2.

★ = New for this model year

P = Included in Equipment Group, S = Standard Equipment, O = Optional

AXLE AVAILABILITY

***Final Drive Ratio = 3.65
AWD Police Interceptor***

***Final Drive Ratio = 3.16
AWD EcoBoost®
Police Interceptor***

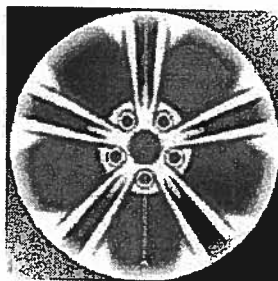
WHEEL AVAILABILITY



18" 5-spoke painted black steel wheels with center caps (5th wheel is full-size spare) – Standard



18" 5-spoke full face wheel covers with metal clips – Optional (65L)



18" painted Aluminum wheels, Optional (64E)

★ = New for this model year

07/17/17

2018 POLICE INTERCEPTOR UTILITY COLOR & TRIM AVAILABILITY

PROPRIETARY

| Police Interceptor Utility | Police Interceptor Utility | Interior Color Charcoal Black |
|----------------------------------|--|-------------------------------|
| Cloth Front Buckets / Vinyl Rear | Front – Unique Heavy-Duty Cloth, Front Bucket Seats Driver 6-way Power track (fore/aft.up/down, tilt with manual recline, 2-way manual lumbar) Passenger – 2-way manual track (fore/aft. with manual recline) Rear – 60/40 Split Vinyl. | 9W |
| Cloth Front Buckets / Cloth Rear | Front – Unique Heavy-Duty Cloth, Front Bucket Seats Driver 6-way Power track (fore/aft.up/down, tilt with manual recline, 2-way manual lumbar) Passenger – 2-way manual track (fore/aft. with manual recline) Rear – 60/40 Split Cloth | FW |

COLOR OFFERINGS

| EXTERIOR COLOR POLICE | Order Code | Charcoal Black |
|----------------------------------|------------|----------------|
| | | Availability |
| Medium Brown Metallic | BU | ■ |
| Arizona Beige Metallic Clearcoat | E3 | ■ |
| Vermillion Red | E4 | ■ |
| Blue Metallic | FT | ■ |
| Shadow Black | G1 | ■ |
| Smokestone Metallic | HG | ■ |
| Kodiak Brown Metallic | J1 | ■ |
| Dark Toreador Red Metallic | JL | ■ |
| Norsea Blue Metallic | KR | ■ |
| Dark Blue | LK | ■ |
| Royal Blue | LM | ■ |
| Light Blue Metallic | LN | ■ |
| Silver Grey Metallic | TN | ■ |
| Sterling Grey Metallic | UJ | ■ |
| Ingot Silver Metallic | UX | ■ |
| Medium Titanium Metallic | YG | ■ |
| Oxford White | YZ | ■ |

VINYL WRAP COLOR TREATMENT OFFERINGS*

| Vinyl Wrap Color | Accent Order Code |
|---|-------------------|
| Police White NOTE: Not available with exterior paint Oxford White (YZ) | YZ |
| * Accent Color Wrap for Vinyl Packages 91A, 91C, 91D | |

★ = New for this model year

EMISSIONS

EMISSIONS REQUIREMENT LOCATIONS

CALIFORNIA EMISSIONS STATES
 CA, CT, DE, MA, MD, ME, NJ, NY, OR, PA, RI, VT, WA
CROSS BORDER STATES.....
 AZ, DC, ID, NH, NV, OH, VA, WV
FEDERAL EMISSIONS STATES.....
 Remaining States/Regions

ENGINE BLOCK HEATER 41H
 Standard and only available in AK, MN, ND, SD, MT, WI and WY states. Other states available via FCSD
NOTE: Fleet Only – Engine block heater optional in all states with valid FIN code.

EMISSIONS STANDARD/OPTIONAL EQUIPMENT

FEDERAL/NON-CALIFORNIA EMISSIONS SYSTEM

Standard equipment for vehicles shipped to Federal Emissions State or Cross Border State dealer destinations. Equipped on vehicles when Code 936 or 423 is applicable for California Emissions State dealer destinations.
Note: Flexible-fuel vehicle (FFV) system is standard equipment for vehicles with 3.7L TI-VCT V6 engine shipped to Federal Emissions State or Cross Border State dealers and is only available with a Federal emissions system (FFV system not available with Code 422 and requires Codes 936 or 423 if applicable for California Emissions State dealer destinations).

CALIFORNIA EMISSIONS SYSTEM 422
 Available on 3.7L TI-VCT V6 gasoline only engine (non-FFV)

Required code for California Emissions States registration unless Codes 936 or 423 are applicable.
 Optional code for Cross Border State dealers.

CALIFORNIA EMISSIONS SYSTEM NOT REQUIRED 423
 Dealers ordering a vehicle without a California Emissions System and which is being shipped to a California Emissions State dealer are also required to use Code 423 to attest either that the vehicle is not being registered in a California Emissions State or that Code 936 is applicable.
Note: In Maine, Rhode Island and Vermont, dealers cannot use Code 423 for customers outside of California Emissions States locations (except Public Service/Emergency Vehicles – Code 936).

CALIFORNIA EMISSIONS EXEMPTION FOR PUBLIC SERVICE/EMERGENCY VEHICLES 936
 This exemption may only apply in certain California Emissions States. Ordering dealer is responsible to contact the proper state authorities for clarification on qualifying exempted vehicles for registration. Only available on vehicles sold for authorized public service or emergency service use. Must also use Code 423 when ordering.

FEDERAL EMISSIONS STATE DEALER ORDER FOR CALIFORNIA EMISSIONS STATES REGISTRATION 93N
 Federal Emissions State dealers ordering a California Emissions System (Code 422) are also required to use Code 93N to attest that the vehicle is to be registered in a California Emissions State. **Note:** It is a violation of Federal law for a Federal Emissions State dealer to sell a vehicle with a California Emissions System for registration in a Federal Emissions State, unless the vehicle also meets EPA standards (i.e., 50-state emissions).
 Not available for stock orders.

MISCELLANEOUS

COV Required 79V
 Priced DORA C09

SNOW PLOW USAGE

Not recommended for snow plowing.

* = New for this model year



Department of Administration
RISK MANAGEMENT



VEHICLE ACCIDENT REPORT

INSTRUCTIONS:

COMPLETE as much information as possible at the scene.
REPORT all accidents involving third parties, whether or not there is damage or injury.
COOPERATE with investigating officer(s) and the State's adjuster(s).

18-030
18082

WITHIN 48 HOURS:

Send original to AG's Office Claims Manager, 100 N. Carson St., Carson City, NV 89710
Send copy to Risk Management Claims Manager, 201 S. Roop St., Suite.201 Carson City NV 89701

Date of Accident 8/30/17 Time 1726

OUR INFORMATION:

Driver's Name [REDACTED] Agency [REDACTED]
Office Address 215 E. Bonanza Rd. Bus. Phone 702-486-3646
Driver's Lic. No. [REDACTED] State Nevada Expiration Date _____
Contact Person [REDACTED] Title Sergeant Phone 702-486-7594

Is this a MOTORPOOL Vehicle? Yes Vehicle ID No. (VIN) 1FMSK8AR1GGC93206

Plate No. [REDACTED] Year 2016 Make Ford Model Explorer

Location of vehicle 7060 La Cienega Street Las Vegas, NV 89119 (Motor Pool) Location of Accident Hualapai/Russell

Describe Damage to State Vehicle: Windshield Damage only? If NO describe damage Windshield shattered; driver's side window shattered; entire driver's side of vehicle dented and scratched; extensive damage to passenger side front quarter panel tire and axel.

Accident Reported to NHP Yes Report # 170803074 Citations Issued? NO If Yes, explain: _____

THEIR INFORMATION: Self-Insurance card provided to driver/owner? Yes No Unknown

Owner's Name _____ Daytime Phone _____

Address _____ City/State/Zip _____

Insurance Company _____ Policy No. _____ City/State _____

Insurance Agent _____ Phone No. _____

Plate No. _____ State _____ Year _____ Make _____ Model _____

Driver's name _____ Daytime phone _____

Address _____ City/State/Zip _____

Driver's Lic. No. _____ State _____ Expiration Date _____

Describe damage to other vehicle and any injuries reported: _____

EXPLAIN WHAT HAPPENED: V1 was traveling westbound on Russell west of Hualapai negotiating a curve in the #2 travel lane. D1 was traveling too fast for conditions causing V1 to run off the roadway right. V1's right front tire struck the right side curb and V1's right side tires travelled west in the rock landscape. V1's right side tires continued west in the rock landscape and V1's front right side struck a utility pole causing V1 to roll onto its left side and continue west in the right shoulder and #2 travel lane. V1 came to rest on its left side in the #2 travel lane and partially in the right shoulder facing west.

WITNESSES (Please include NAME, ADDRESS and PHONENUMBER) None

PERSONS INJURED (If injured person is a State Employee, complete a Worker's Compensation Claim Form): [REDACTED]

Agency Information: D Damage estimates attached D Estimates will follow

State Driver's Signature _____ Date _____

Reviewed by Safety Coordinator _____ Date _____

Reviewed by Department Head _____ Date _____

RSK-001 (webversion)

Brian Sandoval
Governor



James R. Wells, CPA
Director

Paul Nicks
Deputy Director

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

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

Date: December 12, 2017
To: James R. Wells, Clerk of the Board
Governor's Finance Office
From: Heather Field, Executive Budget Officer - *HVF*
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

**DEPARTMENT OF AGRICULTURE
PLANT INDUSTRY**

Agenda Item Write-up:

Pursuant to NRS 334.010 the department requests approval to purchase one new vehicle not to exceed \$26,879 and retain the used vehicle this purchase was legislatively approved to replace.

Additional Information:

The department seeks approval to purchase a Chevrolet pickup truck, not to exceed \$26,879. The authorization for this vehicle was approved in the 2017 Legislative Session, decision unit E711, for fiscal year 2018 in the amount of \$29,626 to replace an older vehicle. Due to an increase in inspection activities the department seeks approval to retain the older used vehicle within the fleet.

Statutory Authority:

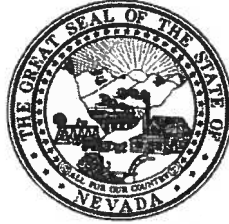
BOE approval required pursuant to NRS 334.010.

| |
|-------------------------------|
| REVIEWED: <u><i>AM</i></u> #3 |
| ACTION ITEM: _____ |

BRIAN SANDOVAL
Governor

STATE OF NEVADA

JAMES R. BARBEE
Director



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DEPARTMENT OF AGRICULTURE

405 South 21st Street
Sparks, Nevada 89431-5557
Telephone (775) 353-3601 Fax (775) 353-3661
Website: <http://www.agri.nv.gov>

December 5, 2017

MEMORANDUM

TO: Jim Wells, Director - Administration
FROM: James Barbee, Director - Nevada Department of Agriculture
RE: Approval to purchase vehicles - FY18

This memorandum will serve to advise that the Nevada Department of Agriculture is requesting approval to purchase three new vehicles as outlined below:

Budget Account 4552 is requesting approval to purchase a new vehicle which will service the Mormon Cricket Program with required inspections and surveys. This vehicle was Legislatively approved in the FY18/19 budget and will be purchased utilizing Grant Funds specifically provided for this purpose. Program initially intended to replace an older program vehicle, however, the Plant Division wishes to retain this vehicle to accommodate an increase in inspection activities planned for the third and fourth quarter of FY18. The budgeted amount of \$29,626 is more than sufficient for the type of vehicle required by this program.

Budget Account 4545 is requesting approval to purchase a new vehicle which will service the EPA Pesticide Enforcement project with required inspections and surveys. This vehicle was Legislatively approved in the FY18/19 budget in Year 2, however, Plant Industry is requesting to move the request to Year 1. Due to the unexpected surplus of program vehicles in FY18, this request is for an additional vehicle instead of a replacement vehicle. The Dodge Nitro, previously slated to be excessed, is needed by the Division to continue program inspections and surveys. The budgeted amount of \$27,894 is sufficient for the type of vehicle required by this program; work programs will be submitted to request expenditure in FY18 and to remove expenditure in FY19.

Budget Account 1362 is requesting approval to purchase a new vehicle for the Food and Nutrition Division. The vehicle was Legislatively approved in the FY18/19 budget. This vehicle is an addition to the program. The budgeted amount of \$28,626 is sufficient for the type of vehicle required by this program.

Thank you for your consideration.

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

| | | | |
|--|--|---|----------------------|
| Agency Name: Dept. of Agriculture | | Budget Account #: 4552 | |
| Contact Name: Debra Crowley | | Telephone Number: 775-353-3602 | |
| Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information: | | | |
| Number of vehicles requested: <u>1</u> | | Amount of the request: <u>\$26,879.00</u> | |
| Is the requested vehicle(s) new or used: <u>New</u> | | | |
| Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: | | | |
| Pick up | | | |
| Mission of the requested vehicle(s): | | | |
| To perform tasks relating to the Mormon cricket program. | | | |
| Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | If yes, please provide the decision unit number: E711 If no, please explain how the vehicles will be funded? | |
| Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input checked="" type="checkbox"/> <u>1</u> Addition(s) <input type="checkbox"/> Replacement(s) <i>Increased inspection activities require keeping vehicle previously slated as replacement.</i> | | | |
| Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. Vehicle classification is not a sedan, nor compact or intermediate in size. | | | |
| Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <i>Please attach an additional sheet if necessary</i> | | Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. | |
| APPOINTING AUTHORITY APPROVAL: | | | |
| <i>Debra Crowley</i> | | <i>Fiscal Administrator</i> | |
| Agency Appointing Authority | | Title | Date <u>12/13/17</u> |
| BOARD OF EXAMINERS' APPROVAL: | | | |
| <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase | | | |
| Board of Examiners | | Date | |

Vehicle Cost Summary - Budget 4552

| | |
|--------------------------|-----------------------|
| <u>Base Price</u> | \$ <u>21,219.00</u> ✓ |
| <u>Options</u> | \$ 1,140.00 |
| | \$ 2,882.00 |
| | \$ 200.00 |
| | \$ 242.00 |
| | \$ 317.00 |
| | \$ 95.00 |
| | \$ 348.00 |
| | \$ 88.00 |
| | \$ <u>348.00</u> |
| <u>Total</u> | \$ <u>26,879.00</u> |

STANDARD PAGE ~ BID 8476 FLEET VEHICLES

ca. 5' bed

DEALER NAME - *Champion Chevrolet*

| | | |
|---|------------------------------------|-----------------------------|
| Vehicle Item Number: 2.9 - Truck 1/2 Ton; Full Size; Extended Cab; Short Bed | | |
| Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE: | Base Price for RENO/CARSON CITY | Base Price for LAS VEGAS |
| 2018 Chevrolet Silverado - CC15753 | \$21,219.00 | \$21,419.00 |
| State vehicle miles per gallon (MPG): 18 CITY / 24 HIGHWAY | | |
| Manufactures Suggested Retail Price(MSRP): \$33,315.00 | | |
| State manufactures warranty: 3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain | | |
| Specify standard engine size and emission rating: 4.3L ECOTEC3 FLEX FUEL V-6 Federal Emission | | |
| Includes Minimum Standard Equipment Listed: ___ Yes ___ X ___ No If no, state exceptions: | | |
| AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW | | |
| | | |
| | | |
| Exterior Color: List available colors: | | |
| Black, White , Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic, Silver Ice Metallic, Red Hot | | |
| | | |
| | | |
| Seats, Cloth: List available colors: | | |
| Dark Ash | | |
| | | |
| | | |
| GVW: 6900 | | WHEELBASE: 143.5 |
| | | |

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.9 1/2 Ton; Full Size; Extended Cab; Short Bed*

Option Package Name/Code: *1LT* (Requires 2WD) \$3,951.00 (Requires 4WD) \$3,392.00

List Equipment Features Below:

*17" Bright Aluminum Wheels, Chrome Front/Rear Bumper, Chrome Grille, EZ Lift Tailgate
Heated Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows),
Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel,
My Link Radio w/ 8 inch display, Single Slot CD Player, Bluetooth, Steering Wheel Audio Controls, Onstar,*

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

| Vehicle Item Number: 2.9 1/2 Ton; Full Size; Extended Cab; Short Bed | | DEDUCT AMOUNT |
|--|----------------------------|---------------|
| ABS Brake System | \$ STD | \$- N/A |
| Air Conditioning | \$ STD | \$- N/A |
| Backup Camera | \$ STD | \$- N/A |
| Bedliner, Spray In | \$495.00 | \$- N/A |
| Bluetooth for Phone(Includes My Link Radio) | \$ STD | \$- N/A |
| Cruise Control | \$ STD | \$- N/A |
| Deep Tint Glass | \$176.00 | \$- N/A |
| Engine, Alt Size 5.3L Ecotec V-8 | \$1,052.00 | \$- N/A |
| Engine, Alt Size 5.3L Ecotec V-8 (Flex Fuel) | \$1,140.00 ✓ | \$- N/A |
| Engine Block Heater | \$88.00 | \$- N/A |
| Four Wheel Drive (4x4) | \$2,882.00 ✓ | \$- N/A |
| Frontal Air Bags (Requires X4) | \$200.00 | \$- N/A |
| Increased Trailer Brake Controller (Req Low Pack) | \$242.00 ✓ | \$- N/A |
| Keyless Start w/Fob (Includes Power Mirrors) | \$317.00 ✓ | \$- N/A |
| Keys - Two (Remote Start) | \$95.00 ✓ | \$- N/A |
| Trailer Hitch (Class II) | \$348.00 ✓ | \$- N/A |
| Paint, Metallic | \$STD | \$- N/A |
| Power Mirrors (Includes Keyless Entry w/Fob) | \$317.00 | \$- N/A |
| Power Locks | \$STD | \$- N/A |
| Power Seat (Driver's Side) | \$383.00 | \$- N/A |
| Power Windows | \$STD | \$- N/A |
| Radio;AM/FM Stereo,CD Player(Incl My Link/Bluetooth) | See option Package | \$- N/A |
| Rear Window Defogger | \$198.00 | \$- N/A |
| Seats, Vinyl | \$ Avail @ no extra charge | \$- N/A |
| Vinyl Colors: Dark Ash | | |
| Skid Plate (Requires X4 Option) | \$88.00 ✓ | \$- N/A |
| Steps, 4" Black Round | \$630.00 | \$- N/A |
| Tilt Steering | \$STD | \$- N/A |
| Tire, Spare, Full Size | \$STD | \$- N/A |
| Tires, All Terrain | \$200.00 | \$- N/A |
| Trailer Tow Mirrors (Not avail with Power Mirrors) | \$62.00 | \$- N/A |
| Trailer Tow Mirrors-Power (Requires Power Mirrors) | \$308.00 | \$- N/A |
| Trailer Tow Package (Incl 7.3L Alt Connectors) | \$348.00 ✓ | \$- N/A |
| Upfitter Switches Bank of 4 @ 30 Amps Each | \$125.00 | \$- N/A |

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 flat.

Schedule Selection G: Equipment Schedule

Budget Account: 4552 AGRI - PEST, PLANT DISEASE NOXIOUS WEED CONTROL
 Equipment Replacement Log [See Attachment]

| Catg | GL Acct | Description | Priority | Year1 Count | Year2 Count | Year1 Rate | Year2 Rate | Year1 Amt | Year2 Amt |
|--|---------|--|----------|-------------|-------------|------------|------------|---------------|---------------|
| E710 | | EQUIPMENT REPLACEMENT | | | | | | | |
| 18 | 8371 | HARDWARE-DESKTOP PC WO MONITOR, 5YR WAR MED COST | 0 | 0 | 1 | 1,155.00 | 1,155.00 | 0 | 1,155 |
| 18 | 8371 | HARDWARE-DUAL 22" DESKTOP MONITORS W/SPEAKER BAR | 0 | 0 | 1 | 365.00 | 365.00 | 0 | 365 |
| 26 | 7771 | SOFTWARE-ADOBE ACROBAT | 0 | 4 | 4 | 175.00 | 175.00 | 700 | 700 |
| 26 | 7771 | SOFTWARE-MICROSOFT OFFICE 365 NEW | 0 | 5 | 0 | 199.00 | 199.00 | 995 | 0 |
| 26 | 7771 | SOFTWARE-MICROSOFT OFFICE 365 RENEWAL | 0 | 0 | 5 | 144.00 | 144.00 | 0 | 720 |
| 26 | 8371 | HARDWARE-DUAL 22" DESKTOP MONITORS W/SPEAKER BAR | 0 | 0 | 1 | 365.00 | 365.00 | 0 | 365 |
| 26 | 8371 | HARDWARE-LAPTOP DOCKING STATION | 0 | 0 | 1 | 355.00 | 355.00 | 0 | 355 |
| 26 | 8371 | HARDWARE-TABLET | 0 | 0 | 1 | 1,000.00 | 1,000.00 | 0 | 1,000 |
| Total for Decision Unit: E710 | | | | 9 | 14 | | | 1,695 | 4,660 |
| E711 | | EQUIPMENT REPLACEMENT | | | | | | | |
| 05 | 8310 | VEHICLE-FLEET-LV-2.7 TRUCK 2WD 1/2 TON;CREW CAB;SHORT BED | 0 | 1 | 0 | 25,605.00 | 25,605.00 | 25,605 | 0 |
| Year 1 vehicle to be replaced - 2005 Chev Tahoe EX19806 - Asset# 279946 - high miles > 100,000 | | | | | | | | | |
| 05 | 8310 | VEHICLE-FLEET-LV-5.3 SPORT UTY VEH:1/2 TON;4X4;6 DOOR;5-6 PASS | 0 | 0 | 1 | 36,363.00 | 36,363.00 | 0 | 36,363 |
| Year 2 vehicle to be replaced - 2005 Chev Silverado EX46337 - Asset# 276232 - high miles > 100,000 | | | | | | | | | |
| 05 | 8310 | OPTIONS OUTSIDE THE BASE PRICE OF LV 2.7 | 0 | 1 | 0 | 4,021.00 | 0.00 | 4,021 | 0 |
| VEHICLE SCHEDULE DOES NOT OFFER OPTIONS NECESSARY FOR DIVISION REQUIREMENTS FOR THIS VEHICLE. [See Attachment] | | | | | | | | | |
| Total for Decision Unit: E711 | | | | 2 | 1 | | | 29,626 | 36,363 |
| Total for Budget Account: 4552 | | | | 11 | 15 | | | 31,321 | 41,023 |

Brian Sandoval
Governor



James R. Wells, CPA
Director


Paul Nicks
Deputy Director

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

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

Date: December 12, 2017

To: James R. Wells, Clerk of the Board
Governor's Finance Office

From: Heather Field, Executive 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 AGRICULTURE
PLANT INDUSTRY**

Agenda Item Write-up:

Pursuant to NRS 334.010 the department requests approval to purchase a replacement vehicle not to exceed \$27,842 in fiscal year 2018 instead of fiscal year 2019.

Additional Information:

The department seeks approval to purchase a pickup truck, not to exceed \$27,842. The authorization for this vehicle was approved in the 2017 Legislative session, decision unit E711, for fiscal year 2019. Work programs #C42171 and #C42244 have been completed to eliminate authority for this purchase in fiscal year 2019 and create the authority for purchase in fiscal year 2018. The need to purchase this vehicle early is due to unexpected surplus of program vehicles in fiscal year 2018.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: 
ACTION ITEM: _____

BRIAN SANDOVAL
Governor

STATE OF NEVADA

JAMES R. BARBEE
Director

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DEPARTMENT OF AGRICULTURE

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Sparks, Nevada 89431-5557
Telephone (775) 353-3601 Fax (775) 353-3661
Website: <http://www.agri.nv.gov>

December 5, 2017

MEMORANDUM

TO: Jim Wells, Director - Administration
FROM: James Barbee, Director - Nevada Department of Agriculture
RE: Approval to purchase vehicles - FY18

This memorandum will serve to advise that the Nevada Department of Agriculture is requesting approval to purchase three new vehicles as outlined below:

Budget Account 4552 is requesting approval to purchase a new vehicle which will service the Mormon Cricket Program with required inspections and surveys. This vehicle was Legislatively approved in the FY18/19 budget and will be purchased utilizing Grant Funds specifically provided for this purpose. Program initially intended to replace an older program vehicle, however, the Plant Division wishes to retain this vehicle to accommodate an increase in inspection activities planned for the third and fourth quarter of FY18. The budgeted amount of \$29,626 is more than sufficient for the type of vehicle required by this program.

Budget Account 4545 is requesting approval to purchase a new vehicle which will service the EPA Pesticide Enforcement project with required inspections and surveys. This vehicle was Legislatively approved in the FY18/19 budget in Year 2, however, Plant Industry is requesting to move the request to Year 1. Due to the unexpected surplus of program vehicles in FY18, this request is for an additional vehicle instead of a replacement vehicle. The Dodge Nitro, previously slated to be excessed, is needed by the Division to continue program inspections and surveys. The budgeted amount of \$27,894 is sufficient for the type of vehicle required by this program; work programs will be submitted to request expenditure in FY18 and to remove expenditure in FY19.

Budget Account 1362 is requesting approval to purchase a new vehicle for the Food and Nutrition Division. The vehicle was Legislatively approved in the FY18/19 budget. This vehicle is an addition to the program. The budgeted amount of \$28,626 is sufficient for the type of vehicle required by this program.

Thank you for your consideration.

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

| | |
|--|---|
| Agency Name: Department of Agriculture | Budget Account #: 4545 |
| Contact Name: Lynn Hettrick | Telephone Number: 775-353-3729 |
| <p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: 1 Amount of the request: \$27,842</p> <p>Is the requested vehicle(s) new or used: <u>New pickup</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: pickup</p> <p>Mission of the requested vehicle(s): To conduct pesticide product inspections, monitoring pesticide applications, ground water sampling and pesticide disposal.</p> | |
| <p>Were funds legislatively approved for the request?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>If yes, please provide the decision unit number: E711 approved the purchase of this vehicle in Year2 -refer to WP C42171</p> <p>If no, please explain how the vehicles will be funded?</p> |
| <p>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</p> <p><input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> Replacement(s)</p> | |
| <p>Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.</p> <p>Pickup trucks do not fall under the Smart Way/Smart Way Elite requirements.</p> | |
| <p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: 1992 Jeep Cherokee Odometer Reading: 109,878 Type of Vehicle: SUV</p> <hr/> <p>Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:</p> | <p>Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced.</p> <p>Yes, mileage and age both qualify vehicle to be replaced.</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p> |
| <p><i>Please attach an additional sheet if necessary</i></p> | |
| <p>APPOINTING AUTHORITY APPROVAL:</p> <p><u>Nebra Crowley</u> <u>Fiscal Administrator</u> <u>12/21/17</u></p> <p>Agency Appointing Authority Title Date</p> | |
| <p>BOARD OF EXAMINERS' APPROVAL:</p> <p><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase</p> <p>_____</p> <p>Board of Examiners Date</p> | |

Vehicle Cost Summary – Budget 4545

| | |
|-------------------|--------------------|
| <u>Base Price</u> | <u>\$23,593.00</u> |
| <u>Options</u> | \$ 1,140.00 |
| | \$ 2,114.00 |
| | \$ 242.00 |
| | \$ 317.00 |
| | \$ 88.00 |
| | <u>\$ 348.00</u> |
| <u>Total</u> | <u>\$27,842.00</u> |

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

| | | |
|---|--|-----------------------------|
| Vehicle Item Number: <i>2.7 - Truck 1/2 Ton; Full Size; Crew Cab; Short Bed</i> | | |
| Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE: | Base Price for RENO /CARSON CITY | Base Price for LAS VEGAS |
| <i>2018 Chevrolet Silverado - CC15543</i> | \$23,693.00 | \$23,793.00 |
| State vehicle miles per gallon (MPG): <i>18 CITY / 24 HIGHWAY</i> | | |
| Manufactures Suggested Retail Price(MSRP): <i>\$37,740.00</i> | | |
| State manufactures warranty: <i>3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain</i> | | |
| Specify standard engine size and emission rating: <i>4.3L ECOTEC3 FLEX FUEL V-6</i> Federal Emission | | |
| Includes Minimum Standard Equipment Listed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, state exceptions: <i>AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW</i> | | |
| | | |
| | | |
| Exterior Color: List available colors: <i>Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic, Silver Ice Metallic, Red Hot</i> | | |
| | | |
| Seats, Cloth: List available colors: <i>Dark Ash</i> | | |
| | | |
| | | |
| GVW: <i>6900</i> | | WHEELBASE: <i>143.60</i> |
| | | |

0.0
23,593.00
1,140.00
2,114.00
242.00
317.00
88.00
348.00
27,842.00

0.0

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

| | | |
|--|----------------------------------|----------------------------------|
| Vehicle Item Number: <i>2.7 1/2 Ton; Full Size; Crew Cab; Short Bed</i> | | |
| Option Package Name/Code: <i>1LT</i> | (Requires 2WD) <i>\$3,708.00</i> | (Requires 4WD) <i>\$4,029.00</i> |
| List Equipment Features Below: | | |
| <i>17" Bright Aluminum Wheels, Chrome Front/Rear Bumper, Chrome Grille, EZ Lift Tailgate</i> | | |
| <i>Heated Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows),</i> | | |
| <i>Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel,</i> | | |
| <i>My Link Radio w/ 8 Inch display, Single Slot CD Player, Bluetooth, Steering Wheel Audio Controls, Onstar,</i> | | |
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ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - Champlon Chevrolet

| Vehicle Item Number: 2.7 - Truck 1/2 Ton; Full Size; Crew Cab; Short Bed | | DEDUCT AMOUNT |
|---|----------------------------|----------------------|
| ABS Brake System | \$ STD | \$- N/A |
| Air Conditioning | \$ STD | \$- N/A |
| Backup Camera | \$ STD | \$- N/A |
| Bedliner, Spray In | \$495.00 | \$- N/A |
| Bluetooth for Phone(Includes My Link Radio) | \$ STD | \$- N/A |
| Cruise Control | \$ STD | \$- N/A |
| Deep Tint Glass | \$176.00 | \$- N/A |
| Engine, Alt Size 5.3L Ecotec V-8 | \$1,052.00 | \$- N/A |
| Engine, Alt Size 5.3L Ecotec V-8 (E86 FlexFuel) | \$1,140.00 | \$- N/A |
| Engine Block Heater | \$88.00 | \$- N/A |
| Four Wheel Drive (4x4) | \$2,114.00 | \$- N/A |
| Electronic Transfer Case(Requires 4x4) | \$200.00 | \$- N/A |
| Integrated Trailer Brake Controller(Req Tow Pack) | \$242.00 | \$- N/A |
| Keyless Entry w/Fob (Includes Power Mirrors) | \$317.00 | \$- N/A |
| Keys, Two Additional(4 Total) | \$95.00 | \$- N/A |
| Limited Slip Differential | \$348.00 | \$- N/A |
| Paint, Metallic | \$STD | \$- N/A |
| Power Mirrors (Includes Keyless Entry w/Fob) | \$317.00 | \$- N/A |
| Power Locks | \$STD | \$- N/A |
| Power Seat (Driver's Side) | \$383.00 | \$- N/A |
| Power Windows | \$STD | \$- N/A |
| Radio;AM/FM Stereo,CD Player(Incl My Link/Bluetooth) | See option Package | \$- N/A |
| Rear Window Defogger | \$198.00 | \$- N/A |
| Seats, Vinyl Vinyl Colors: Dark Ash | \$ Avail @ no extra charge | \$- N/A |
| Skid Plate (Requires 4X4 option) | \$88.00 | \$- N/A |
| Steps, 4" Black Round | \$830.00 | \$- N/A |
| Tilt Steering | \$STD | \$- N/A |
| Tire, Spare, Full Size | \$STD | \$- N/A |
| Tires, All Terrain | \$200.00 | \$- N/A |
| Trailer Tow Mirrors (Not avail with Power Mirrors) | \$62.00 | \$- N/A |
| Trailer Tow Mirrors-Power (Requires Power Mirrors) | \$308.00 | \$- N/A |
| Trailer Tow Package (Incl 7 & 4 pin connectors) | \$348.00 | \$- N/A |
| Upfitter Switches Bank of 4 @ 30 Amps Each | \$125.00 | \$- N/A |

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 flat.

State of Nevada - Budget Division
 Statewide View of BAV Schedules
 2017-2019 Biennium (FY18-19)
 L01 LEGISLATIVELY APPROVED

Schedule Selection: Equipment Schedule

Budget Account: 4545 AGRI - AGRICULTURE REGISTRATION/ENFORCEMENT
 Equipment Replacement Log [See Attachment]

| Category | GL Acct | Description | Priority | Year1 Count | Year2 Count | Year1 Rate | Year2 Rate | Year1 Amt | Year2 Amt |
|---|-----------------------|---|----------|-------------|-------------|------------|------------|-----------|-----------|
| E710 | EQUIPMENT REPLACEMENT | | | | | | | | |
| 26 | 7771 | SOFTWARE-ADOBE ACROBAT | 0 | 3 | 3 | 175.00 | 175.00 | 525 | 525 |
| 26 | 7771 | SOFTWARE-MICROSOFT OFFICE 365 NEW | 0 | 35 | 0 | 199.00 | 199.00 | 6,965 | 0 |
| 26 | 7771 | SOFTWARE-MICROSOFT OFFICE 365 RENEWAL | 0 | 0 | 35 | 144.00 | 144.00 | 0 | 5,040 |
| 26 | 8370 | APPLE IPAD AIR WIFI + 4G LTE - 16GB (HARDWARE ONLY) | 0 | 25 | 0 | 599.00 | 599.00 | 14,975 | 0 |
| 26 | 8371 | HARDWARE-DESKTOP PC W/ MONITOR & OS, HIGH COST | 0 | 3 | 0 | 1,355.00 | 1,355.00 | 4,065 | 0 |
| 26 | 8371 | HARDWARE-DESKTOP PC WO MONITOR, 5YR WAR MED COST | 0 | 5 | 5 | 1,155.00 | 1,155.00 | 5,775 | 5,775 |
| 26 | 8371 | HARDWARE-DUAL 22" DESKTOP MONITORS W/SPEAKER BAR | 0 | 9 | 9 | 365.00 | 365.00 | 3,285 | 3,285 |
| 26 | 8371 | HARDWARE-LAPTOP DOCKING STATION | 0 | 4 | 4 | 355.00 | 355.00 | 1,420 | 1,420 |
| 26 | 8371 | HARDWARE-LAPTOP PC WITH OPERATING SYSTEM | 0 | 3 | 1 | 1,585.00 | 1,585.00 | 4,755 | 1,585 |
| 26 | 8371 | HARDWARE-TABLET | 0 | 1 | 4 | 1,000.00 | 1,000.00 | 1,000 | 4,000 |
| Total for Decision Unit: E710 | | | | 88 | 66 | | | 42,765 | 28,405 |
| E711 | EQUIPMENT REPLACEMENT | | | | | | | | |
| 14 | 8310 | VEHICLE-FLEET-LV-2.7 TRUCK 4WD 1/2 TON,CREW CAB,SHORT BED | 0 | 0 | 1 | 27,894.00 | 27,894.00 | 0 | 27,894 |
| The vehicle being replaced is a 2008 Dodge Nitro - EX19856 - State ID tag#: 303156 > 112,000. | | | | | | | | | |
| Total for Decision Unit: E711 | | | | 0 | 1 | | | 0 | 27,894 |
| E720 | NEW EQUIPMENT | | | | | | | | |
| 05 | 8250 | TSQEVO GCMS/MS MASS SPEC | 0 | 1 | 0 | 266,733.00 | 0.00 | 266,733 | 0 |
| New major equipment - chemistry lab [See Attachment] | | | | | | | | | |
| 24 | 8250 | SURVEY GRADE GPS PLUS SOFTWARE | 0 | 1 | 0 | 3,200.00 | 0.00 | 3,200 | 0 |
| GPS Devices [See Attachment] | | | | | | | | | |
| Total for Decision Unit: E720 | | | | 2 | 0 | | | 269,933 | 0 |
| Total for Budget Account: 4545 | | | | 90 | 67 | | | 312,698 | 56,299 |

Brian Sandoval
Governor



James R. Wells, CPA
Director

Paul Nicks
Deputy Director

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

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

Date: December 13, 2017
To: James R. Wells, Clerk of the Board
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting. An analysis of the action item and recommendation is also provided.

APPROVAL TO PAY A CASH SETTLEMENT

Pursuant to Article 5, Section 21 of the Nevada Constitution, the State Board of Examiners may approve, settle or deny any claim or action against the State, any of its agencies or any of its present or former officers, employees, immune contractors or State Legislators.

Agenda Item Write-up:

Department of Transportation (NDOT) – Administration - \$65,000

The Department requests settlement approval in the total amount of \$815,000 to fully resolve an eminent domain action to acquire 1.11 acres of land owned by I-15 & Cactus, LLC, for an interchange along I-15 at Cactus Avenue in Las Vegas. The roadway improvement is complete, and NDOT previously deposited \$750,000 with the Court. NDOT's proposed settlement would require \$65,000 in "new money". The funds will be paid in exchange for entry of judgment and a final order of condemnation, resolving this eminent domain action in its entirety. NDOT now requests an additional \$65,000 to resolve the action.

Additional Information:

NDOT has considered the benefits of settlement and has made the decision that settlement is reasonable, prudent, and in the public interest. If the board approves the settlement, NDOT intends to enter into a settlement agreement and/or stipulated order to resolve the action in full for the said amount, inclusive of all attorneys' fees, costs, and interest. The property will be acquired in fee simple, free and clear of all liens and future rights of reversion. NDOT will seek reimbursement from the Federal Highway Administration for the proposed settlement amount.

Statutory Authority:

NRS 41.037

REVIEWED: my

ACTION ITEM: _____

ADAM PAUL LAXALT
Attorney General



STATE OF NEVADA

NICHOLAS A. TRUTANICH
Chief of Staff

KETAN D. BHIRUD
General Counsel

OFFICE OF THE ATTORNEY GENERAL
Transportation Division
1263 S. Stewart Street, Room 315
Carson City, Nevada 89712

December 5, 2017

Hand Delivered

RECEIVED

DEC 05 2017

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Budget and Planning Division
Board of Examiners
209 East Musser Street, Rm 200
Carson City, Nevada 89701

Re: Agenda Item for January 9, 2018 Meeting of the Board of Examiners
Proposed Settlements of Eminent Domain Action
State of Nevada vs. I-15 and Cactus, LLC, et al.; 8th JD Case No. A-12-664403-C

Enclosed are the Nevada Department of Transportation's submittal for the January 9, 2018 Board of Examiners board agenda. This proposed settlement memorandum has been signed by the Director of the Nevada Department of Transportation, Rudy Malfabon, and Chief Deputy Attorney General, Dennis Gallagher.

Should you have any questions regarding this information, please don't hesitate to call our office and speak to Dennis Gallagher at 775-888-7423.

Sincerely,

By 
Alice G. Coffman
Supervising Legal Secretary
Transportation Division
775-888-7412

/agc
Enclosure



1263 South Stewart Street
Carson City, Nevada 89712
Phone: (775) 888-7420
Fax: (775) 888-7309

MEMORANDUM

RECEIVED

DATE: December 4, 2017

DEC 05 2017

TO: Board of Examiners
Governor Brian Sandoval
Attorney General Adam Paul Laxalt
Secretary of State Barbara K. Cegavske

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

FROM: Rudy Malfabon, Director, Nevada Department of Transportation
Dennis Gallagher, Chief Deputy Attorney General
Janet Merrill, Senior Deputy Attorney General

SUBJECT: Proposed Settlement of an Eminent Domain Action
State of Nevada, ex rel. Department of Transportation
v. I-15 & Cactus, LLC, et al.
Eighth Judicial District Court Case No. A-12-664403-C

SUMMARY

The Nevada Department of Transportation ("NDOT") is requesting approval of an eminent domain settlement in the total amount of \$815,000. NDOT is acquiring 1.11 acres of land owned by I-15 & Cactus, LLC, for an interchange along I-15 at Cactus Avenue in Las Vegas. The roadway improvement is complete, and \$750,000 has already been deposited with the Court. NDOT's proposed settlement would require \$65,000 in "new money." The funds will be paid in exchange for entry of judgment and a final order of condemnation, resolving this eminent domain action in its entirety. The property will be acquired in fee simple, free and clear of all liens and future rights of reversion.

THE ACTION

In furtherance of the I-15/Cactus Interchange Project, NDOT filed an eminent domain action to acquire 1.11 acres (48,185 square feet) of vacant land owned by I-15 & Cactus, LLC ("Cactus"). In December 2014, Cactus filed a Chapter 7 bankruptcy petition, and the legal action was automatically stayed per 11 U.S.C. § 362. NDOT obtained stay relief in the bankruptcy court, to proceed to trial and toward a final judgment, against the property and the remaining defendants. Cactus's bankruptcy trustee indicated that Cactus will not participate any further in the case, but agreed to a settlement (in principal, and subject to final approval by the bankruptcy court) of \$15,000 in exchange for full release and waiver of all claims to compensation and rights in the property. Default was entered in the State Court action against Cactus on November 7, 2017.

The remaining defendants (Karen T. Mangione, Johanna L. Blake, Jeffrey L. Blake and Jamie B. Blake, collectively "Lender Defendants") are parties to the action by reason of their deed of trust against the subject property, and attendant security interest (approximately \$1,500,000) in the condemnation award. These defendants were

prepared to go to trial on the sole remaining issue of just compensation, but agreed to a settlement of \$800,000.

To secure its right of occupancy, NDOT deposited \$353,000 which has been withdrawn by the Lender Defendants. At that same time, the Court further required NDOT to post a bond for an additional \$397,000, pursuant to NRS 37.100. In lieu of a bond, NDOT actually deposited a separate check for \$397,000 (for a total deposit of \$750,000).

Prior to successful settlement negotiations, the case was set for jury trial on November 7, 2017. The stipulated and statutorily required date of value is July 6, 2012. Tami Campa is NDOT's expert appraiser in this case; her opinion of value is \$195,000. The Lender Defendants will rely upon the testimony of Cactus's former managing member, real estate broker Michael Longi, and his disclosed opinion of value of \$6,297,959.25.

POINTS THAT FAVOR SETTLEMENT

Evidentiary realities create uncertainty and a potential opportunity for the jury to award far more than the current settlement option. There is a large discrepancy between the parties' opinions of value (\$195,000 - \$6,400,000). Additionally, the State Court issued pretrial rulings which permit sales price evidence (\$1,800,000) and testimony by Michael Longi and his associated hearsay valuations. Depending on the ultimate jury award, pre-judgment interest could be over \$1,500,000, equaling total potential exposure of \$7,700,000.

If this settlement is approved, it will fully resolve the State Action, permit formal settlement in the bankruptcy court, eliminate accrued prejudgment interest and avoid additional fees and costs should either party determine that an appeal is warranted.

RECOMMENDATION

NDOT has considered the benefits of settlement and has made the decision that settlement is reasonable, prudent, and in the public interest. NDOT requests the authority to settle the action for a total amount of \$815,000 (\$65,000 in "new money"), resolving the action in its entirety as among all parties, inclusive of all attorney's fees, costs and interest. The property will be acquired in fee simple, free and clear of all liens and future rights of reversion.

FISCAL NOTE STATEMENT

NDOT will seek reimbursement from the Federal Highway Administration for the proposed settlement amount.

Brian Sandoval
Governor



James R. Wells, CPA
Director


Paul Nicks
Deputy Director

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

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

Date: December 12, 2017

To: James R. Wells, Clerk of the Board
Governor's Finance Office

From: Jim Rodriguez, Executive 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 – DIRECTOR'S OFFICE

Agenda Item Write-up:

Pursuant NRS 286.523, the Director of the Department of Public Safety (DPS) requests that the Board of Examiners designate DPS Officer I and DPS Officer II position classifications as "critical need positions" and grant a Public Employees Retirement System exception for the reemployment of qualifying retired employees to fill positions for which a critical labor shortage has been appropriately identified and designated.

Additional Information:

On January 12, 2016, the Board of Examiners previously approved the Department of Public Safety's critical need request and per NRS 286.523, the department is requesting that the Board consider reaffirming its previous approval for another two year period.

The department reports that it currently has 721 authorized DPS Officer positions. Of those 721 positions, 96 are currently vacant and of those 96 vacant positions the department has made 21 offers of employment to new recruits. If all those offers are accepted, the net vacancy number would be 74 of 721 positions.

The department continues to report difficulties in recruitments and vacancies and that these conditions continue to place the department in the untenable position of dealing with a critical shortage of qualified candidates to fill these vacant DPS Officer positions.

The department indicates that the primary factors impacting its ability to recruit and retain these positions include the following: higher wages offered by other local law enforcement agencies, necessarily intensive background investigations, rigorous peace officer training requirements and the recent financial situation. Despite increased efforts to recruit and retain DPS Officers and the addition of two academies per year, the department continues to be challenged by low recruitment pools and the loss of officers to other law enforcement agencies, both in-state and out-of-state.

The department indicated that there is an immediate and critical need within the Parole and Probation Division to fill these positions and the ability/flexibility to re-employ retired officers would be a vital tool to utilize in mitigating the division vacancy issue.

Statutory Authority:

NRS 286.510 - 286.523

| |
|--|
| REVIEWED: <u> <i>mg</i> </u> |
| ACTION ITEM: _____ |

NRS 286.523 Employment of retired employee: Exception for reemployment of certain retired employees to fill positions for which critical labor shortage exists; determination and designation of such positions; limitation on length of designation of position. [Effective through June 30, 2015.]

1. It is the policy of this State to ensure that the reemployment of a retired public employee pursuant to this section is limited to positions of extreme need. An employer who desires to employ such a retired public employee to fill a position for which there is a critical labor shortage must make the determination of reemployment based upon the appropriate and necessary delivery of services to the public.

2. The provisions of subsections 1 and 2 of NRS 286.520 do not apply to a retired employee who accepts employment or an independent contract with a public employer under the System if:

(a) The retired employee fills a position for which there is a critical labor shortage; and

(b) At the time of the retired employee's reemployment, the retired employee is receiving:

(1) A benefit that is not actuarially reduced pursuant to subsection 6 of NRS 286.510; or

(2) A benefit actuarially reduced pursuant to subsection 6 of NRS 286.510 and has reached the required age at which the retired employee could have retired with a benefit that was not actuarially reduced pursuant to subsection 6 of NRS 286.510.

3. A retired employee who is reemployed under the circumstances set forth in subsection 2 may reenroll in the System as provided in NRS 286.525.

4. Positions for which there are critical labor shortages must be determined in an open public meeting held by the designating authority as follows:

(a) Except as otherwise provided in this subsection, the State Board of Examiners shall designate positions in State Government for which there are critical labor shortages.

(b) The Supreme Court shall designate positions in the Judicial Branch of State Government for which there are critical labor shortages.

(c) The Board of Regents shall designate positions in the Nevada System of Higher Education for which there are critical labor shortages.

(d) The board of trustees of each school district shall designate positions within the school district for which there are critical labor shortages.

(e) The governing body of a charter school shall designate positions within the charter school for which there are critical labor shortages.

(f) The governing body of a local government shall designate positions with the local government for which there are critical labor shortages.

(g) The Board shall designate positions within the System for which there are critical labor shortages.

5. In determining whether a position is a position for which there is a critical labor shortage, the designating authority shall make findings based upon the criteria set forth in this subsection that support the designation. Before making a designation, the designating authority shall consider all efforts made by the applicable employer to fill the position through other means. The written findings made by the designating authority must include:

(a) The history of the rate of turnover for the position;

(b) The number of openings for the position and the number of qualified candidates for those openings after all other efforts of recruitment have been exhausted;

(c) The length of time the position has been vacant;

(d) The difficulty in filling the position due to special circumstances, including, without limitation, special educational or experience requirements for the position; and

(e) The history and success of the efforts to recruit for the position, including, without limitation, advertising, recruitment outside of this State and all other efforts made.

6. A designating authority that designates a position as a critical need position shall submit to the System its written findings which support that designation made pursuant to subsection 5 on a form prescribed by the System. The System shall compile the forms received from each designating authority and provide a biennial report on the compilation to the Interim Retirement and Benefits Committee of the Legislature.

7. A designating authority shall not designate a position pursuant to subsection 4 as a position for which there is a critical labor shortage for a period longer than 2 years. To be redesignated as such a position, the designating authority must consider and make new findings in an open public meeting as to whether the position continues to meet the criteria set forth in subsection 5.

(Added to NRS by 2001, 2400; A 2003, 2062; 2005, 1077; 2009, 1549, 1550; R 2011, 90, effective June 30, 2015)

Brian Sandoval
Governor



James M. Wright
Director

Jackie Muth
Deputy Director

Director's Office

555 Wright Way
Carson City, Nevada 89701-0525
Telephone (775) 684-4556 • Fax (775) 684-4809

MEMORANDUM

Date: December 13, 2017

To: James R. Wells, Clerk of the Board
Department of Administration

From: James M. Wright, Director
Department of Public Safety *James M. Wright*

Subject: Continuation of Critical Labor Designation – DPS Officers I and II

The Department of Public Safety (DPS) respectfully requests the Board of Examiners' review and renewal of the critical needs designation of DPS Officer I and DPS Officer II positions.

On January 12, 2016, the State Board of Examiners reviewed and designated the DPS Officers I and II as critical needs positions. This provided a much needed flexibility to allow the Department of Public Safety to reemploy retired officers to help carry out its responsibilities.

The Department currently has about 712 DPS Officer positions, of which, 95 are vacant. Out of these vacant positions, we have offered 21 of them to new officers who are scheduled to start the February 2018 academy. This reduces the total number of sworn officer vacancies to 74 positions department-wide. However, the Department continues to face challenges in filling these sworn officer positions as a result of higher wages offered by other local and regional law enforcement agencies, the mandatory and extensive background investigations involved, rigorous peace officer training, and the current climate of negativity towards law enforcement agencies.

This request is intended to allow DPS to continue to reemploy retired officers throughout the Department to help with our operational needs. However, the immediate and urgent needs are located within the Division of Parole and Probation, where we have the most officer vacancies (currently 50). With the 2016 critical labor designation by the BOE, the Department has reemployed about 28 retired officers to help meet our day-to-day operational needs.

The Division of Parole and Probation utilized retired officers to assist with general supervision caseloads.

The Nevada Highway Patrol also reemployed retired officers to perform patrol duties in both its Northern and Southern Command districts. The Capitol Police has also utilized retired officers to supplement its permanent officers who maintain security and safety of state employees and offices.

The Department continues its efforts to recruit and retain DPS Officers in order to meet its objectives. These efforts include consistently attending career fairs at military bases, university and community colleges, local community events, conducting continuous recruitment and testing (including weekend testing), and hiring additional staff whose sole purpose is to conduct pre-employment background investigations. In addition, the Department is also running multiple training academies in both Carson City and Las Vegas to train newly hired officers.

These efforts, coupled with the critical needs designation, have helped us meet our operational needs. However, we continue to compete with the Las Vegas Metropolitan Police Department, Henderson Police Department, North Las Vegas Police Department, Washoe County Sheriff's Office and the Sparks Police Department. More recently, out-of-state law enforcement agencies have also recruited from our sworn workforce. These agencies are from the states of Washington, Oregon and Colorado. All these agencies have hired DPS Officers at a significantly higher rate of pay. These added challenges further supports the need for the Department to temporarily hire former retired officers with institutional knowledge, and relevant training and experience to supplement our permanent sworn staff.

Within the Division of Parole and Probation, the retired officers have provided crucial relief by performing administrative casework management duties in support of the permanent officers. Such duties include preparation of reports and management of monthly offender reporting duties. The retired officers are playing an instrumental role in overseeing the administrative responsibilities, which allows the permanent officers to ensure the compliance of the offenders in the field. Both of these elements of supervision lend to the safety of our community. Without the retired officers, the permanent sworn officers would each handle overwhelming number of offender caseloads.

Prior to the critical needs designation, the retired officers have been hired through the use of temporary hiring methods. However, this option imposes strict limitations on the number of hours and wages they can earn in a fiscal year. For the fiscal year beginning July 1, 2017, the retired officers are limited to \$24,751 wages and 1039 hours. This makes it difficult for the Department to reap the full benefits of the officers' expertise. Should they exceed the wages and hours thresholds, the officers will forfeit their retirement benefits, which will create a negative impact on their retirement plans.

Through resignations, retirements and competition with other law enforcement agencies, the Department continues to lose its officers in spite of our consistent and continued efforts. We are currently considering other measures, including social media and press releases, in addition to our current recruiting efforts. However, these efforts require time and financial resources. Therefore, continuing the critical needs designation for additional two years will allow the Department to continue to utilize the retired officers to effectively provide public safety services in our communities. Even after filling the officer vacancies, it takes over a year for a sworn officer to complete all their necessary training to become a fully-functioning officer.

Please contact me if you have any questions or need further information. I appreciate your consideration of this request.

Brian Sandoval
Governor



James R. Wells, CPA
Director

Paul Nicks
Deputy Director

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

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

Date: December 14, 2017
To: James R. Wells, Clerk of the Board
Governor's Finance Office
From: Jim Rodriguez, 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 – OFFICE OF TRAFFIC SAFETY

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Office of Traffic Safety requests authority to contract with Peter Mulvihill to assist the agency in drafting/updating agency regulations as required by statute. This will be a part-time contracted position working five to ten hours per week for a six month period.

Additional Information:

The division indicates that it has insufficient staff to meet its statutory requirements in this area of its operations. This previous employee of the department would provide much needed experience and expertise in the regulation development and approval process. The division believes that the addition of this temporary position is vital in meeting its NRS mandate. Mr. Mulvihill retired on September 13, 2016 as the Chief of the Fire Marshal Division.

Statutory Authority:

NRS 333.705

REVIEWED: umj
ACTION ITEM: _____

Brian Sandoval
Governor



James M. Wright
Director

Patrick Conmay
Interim Deputy Director

Director's Office

555 Wright Way
Carson City, Nevada 89711-0525
Telephone (775) 684-4808 • Fax (775) 684-4809

Memorandum

RECEIVED

DEC 07 2017

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

DATE: December 7, 2017
TO: James Wells, Director, Governor's Finance Office
THROUGH: Melissa Carr, Contract Manager, Department of Public Safety
FROM: Amy Davey, Administrator, Office of Traffic Safety
SUBJECT: Authorization to Contract with a Former Employee

Pursuant to SAM 300, the Office of Traffic Safety, Department of Public Safety requests to contract with a former employee. This former employee has been identified as having significant relevant experience within the DPS in successfully drafting regulations, working with stakeholders to receive and incorporate input, guiding committee members through the regulation adoption process, and meeting LCB requirements for language, format, process and timelines.

The employee will be hired using a temporary staffing agency and will work directly with agency program staff to ensure there is knowledge transfer. Temporary employment is projected to end with submission to LCB of approved regulations, estimated at approximately six months of time. The former employee retired on September 13, 2016.

Thank you for your consideration in this matter.

Authorization to Contract with a Former Employee

Former Employee Name: Peter Mulvihill
Former Employee ID number: 25824
Former Job Title: Chief, State Fire Marshal Division
Former Employing Agency: Department of Public Safety, Fire Marshal Division
Former Class and Grade: Unclassified
Employment Dates: 11/7/2011 – 9/12/2016
Contracting Agency: Office of Traffic Safety

Please check which of the following applies:

- Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee. Please complete steps a-i below.
- 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. Please complete all steps except f-h below.

| | |
|---|--|
| a. Summarize scope of contract work. | Short term project contract, approximately six months duration, to draft regulations, as directed by statute, related to two program areas. The contracted employee will be responsible for working with subject matter experts, legal counsel, Legislative staff, agency leadership, committee members, and stakeholders to gather input and data, write, edit, and submit for approval implementing regulations from the ground up (no current regulations exist). Contracted employee will ensure timelines, process requirements, documentation, and Open Meeting Law requirements are adhered to. |
| b. Document former job description. | Chief, State Fire Marshal Division |
| 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 time frame for the transfer? | <p>This former employee has been identified as having significant relevant experience within the DPS with successfully drafting regulations, working with stakeholders to receive and incorporate input, guiding committee members through the regulation adoption process, and meeting LCB requirements for language, format, process and timelines.</p> <p>The employee will be hired using a temporary staffing agency (no contract) and will work directly with agency program staff to ensure there is knowledge transfer.</p> |
| d. Explain why existing State employees within your agency cannot perform | The Office of Traffic Safety has 12 FTE employed primarily as grant and program managers. Development of all new implementing regulations requires significant time, research, and analysis, an understanding of State |

| | |
|---|---|
| this function. | process, and adherence to requirements and timelines. OTS staff are fully engaged in meeting federal grant requirements and program delivery and are unable to devote sufficient resources to the technical development of regulations in order to meet implementation dates. |
| 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 <u>NAC 284.750</u> . | No relationship exists |
| f. List contractor's hourly rate. | \$35/hour. |
| g. List the range of comparable State employee rates. | Management Analyst 3 position salary range is \$25.26 - \$37.65 |
| h. Justify contract rate if it exceeds the maximum employee/employer rate paid for a comparable State position by more than 10 percent. Additionally, has the contract term been limited as a result? | Temporary employment is projected to end with submission to LCB of approved regulations, estimated at approximately six months of time. |
| i. Document justification for hiring contractor. | <ol style="list-style-type: none"> 1. Implementing regulations must be in place by the statutory start date of October 1, 2018 per SB259 for DUI/Ignition Interlock requirements. The Office of Traffic Safety is responsible to Chair, and provide administrative support to, The Committee on Testing for Intoxication, a committee of non-State employees, whose previous scope of services involved testing of devices intended to determine intoxication. Costs for this project will be fully funded with federal grant funds. 2. Additionally, the Program for the Education of Motorcycle Riders is charged through NRS 486.372 to adopt rules and regulations which are necessary to carry out the Program. To date, this has not been done which has resulted in disruption to program services and lack of clear process in policies. Costs for this project will be funded through program revenue. |

Comments:

Amy Davey

12/7/17

Contracting Agency Head's Signature and Date

Jim. Poo

Budget Analyst

Clerk of the Board of Examiners

Brian Sandoval
Governor



James R. Wells, CPA
Director

Paul Nicks
Deputy Director

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

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

Date: December 14, 2017
To: James R. Wells, CPA, Director
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Governor's Finance Office
Subject: BOARD OF EXAMINERS **ACTION** ITEM

DEPARTMENT OF CORRECTIONS – CORRECTIONAL PROGRAMS

Agenda Item Write-up:

Pursuant to NRS 353.268, the Department requests an allocation of \$130,305 in Fiscal Year 2018 from the Interim Finance Committee Contingency account to fund the addition of one Program Officer 2 position, four Program Officer 1 positions and other associated costs. The requested positions are needed to ensure compliance with Senate Bill 268 which was enacted during the 2017 Legislative Session to verify an offender's full legal name and date of birth before issuing a photo identification card. This action would result in an increase of the agencies authorized positions from 99 full time equivalents to 104 full time equivalents.

Additional Information:

During the 2017 Session, the Legislature amended Nevada Revised Statute (NRS) 209.511 subsection 1 by requiring the Department of Correction, to verify an offender's full legal name and age before issuing a photo identification card. The legal name and date of birth of the individual will be verified by ordering legal and certified copies of the offender's birth certificate, social security card and additional certification documents as required by the Nevada Department of Motor Vehicles.

NDOC does not have the staff to accomplish the additional workload resulting from SB 268 without additional resources. Currently the Department of Corrections confiscates the inmate's identification card upon release to comply with SB 268.

NDOC did submit a fiscal note related to BDR 16-546 indicating an additional eleven Correctional Caseworkers would be needed, but the verified fiscal impact could not be

determined at the time as further study would be needed to determine the appropriate staffing amount.

To comply with SB 268 requiring the Department of Correction, as part of the inmate pre-release process, to verify an offender's full legal name and date of birth before issuing a photo identification card which was enacted during the 2017 Legislative Session the agency is requesting \$130,305 in fiscal year 2018 from the Interim Finance Contingency Account.

At the November 14th Board of Examiners meeting a request for this same purpose was submitted in the amount of \$234,372 for Fiscal Year 2018 and \$375,056 for Fiscal Year 2019. However at the December 7th Interim Finance Committee (IFC) the amount was adjusted to \$80,226 to fund two contract positions which would start addressing the verification of the offender's full legal name. This request before the January Board of Examiners is for 5 positions, which were included in the original submission. The amount of \$130,305 plus the \$80,226 approved by IFC is a reduction to the original request of \$23,841. The reduction is the result of delaying the 5 positions start date to March 2018. Additionally, it was determined to wait until Fiscal Year 2019 to ascertain if the agency needed an Interim Finance Contingency Request before approving the funding.

Relates to IFC work program # C42250.

Statutory Authority:

NRS 353.268

REVIEWED:

ACTION ITEM:

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9912



**State of Nevada
Department of Corrections**

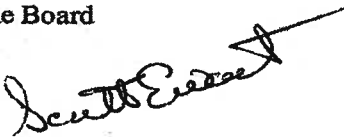
Brian Sandoval
Governor

James Dzurenda
Director

John Borrowman
Deputy Director
Support Services

Date: December 13, 2017

To: James R. Wells, Clerk of the Board
Governor's Finance Office

From: Scott Ewart
Chief of Fiscal Services 

Subject: IFC Contingency Funds Request Supporting Senate Bill 268

The Department of Corrections is requesting a favorable recommendation from the Board of Examiners to request State Fiscal Year (SFY) 2018 funding in the amount of \$130,305 from the Interim Finance Committee Contingency Account to fund five new permanent positions to comply with Senate Bill 268 from the 79th Legislative Session. The Department has submitted SFY18 Work Program C42250 in the amount of \$130,305 pursuant to this request.

During the 2017 Session, the Legislature amended Nevada Revised Statute (NRS) 209.511.1 by requiring the Department of Corrections, as part of the inmate pre-release process, to verify an offender's full legal name and date of birth before issuing a photo identification card pursuant to NRS 209.511.1 paragraph (f) of subsection 1. The legal name and date of birth of the individual will be verified by the NDOC researching and ordering legal and certified copies of the offender's birth certificate, social security card and additional certification documents as required by the Nevada Department of Motor Vehicles.

The NDOC does not have the staff to accomplish the additional workload resulting from SB 268 without additional resources. Currently the NDOC confiscates the inmate identification card upon release from the NDOC to comply with SB 268.

The NDOC did submit a solicited Fiscal Note related to BRR 16-546 indicating an additional eleven Correctional Caseworkers would be needed, but the verified fiscal impact could not be determined at that time as further study would be needed to determine the appropriate staffing amount.

Based on the current enacted revised NRS and completed NDOC research, the NDOC is requesting funding to be used to fund the following permanent positions during SFY 18, with associated costs;

| | <u>2018</u> |
|----------------------------|------------------|
| One (1) Program Officer II | \$20,903 |
| Four (4) Program Officer I | \$77,892 |
| Information Services | \$14,104 |
| Office Equipment | \$13,016 |
| <u>Operating/Travel</u> | <u>\$4,390</u> |
| Total | \$130,305 |

Please contact me if you have any questions.

Thank you



State of Nevada Department of Corrections *Request for Funds to Implement Senate Bill (SB) 268*

Department of Corrections, Division: Programs

Geographic Locations of Positions required at Facilities:

Deadline: October 1, 2017. NDOC no longer issues un-verified identification to offenders who exit the facility either by sentence expirations or parole in compliance with SB 268.

Overview of Request: Five (5) FTE to comply with Senate Bill (SB) 268.1 (f) and Section 2 of Senate Bill (SB) 268, *prohibiting* the Director of the Nevada Department of Corrections from providing Identification Cards (IDs) for inmates upon request who are about to be released from NDOC institutions unless their true identity can be verified.

What is the Major Change?

NDOC was previously allowed to provide an inmate a photo identification card upon release from prison, and did not stipulate any restriction. This photo identification (ID) was accepted by community partners which satisfied the reporting requirements of federal and state grants. All grant programs and community service programs require the documentation of some photo identification from the person receiving services. The NDOC identification was approved as an acceptable form of photo identification by all agencies and community partners. As part of existing law enforcement processes prior to incarceration, there was never any request for validation as the expectation by many community partners is that this would be done during the arrest and court phase. The previous photo ID, although not validated, was able to support the agencies in non-duplicating or supplanting of services. This is no longer the case, as NDOC does not provide any photo ID upon release, pursuant to SB 268. This is the minimum requirement to access care in the community and serves as the base for the building blocks for medical, mental health, substance abuse, re-entry and other programs.

The legislation now places the burden of proof with the NDOC. NDOC must now validate the inmate's true identity upon request through a certified birth certificate prior to authorizing any inmate to be provided with an NDOC issued identification card upon release. The birth certificate meets the standards for identification verification for all agencies, while other identification would only allow for specific agencies. Previously, the NDOC used the Judgment of Conviction (JOC), which may or may not have been written using the inmate's legal identity for the purpose of providing an inmate with a NDOC photo identification card upon their release. The NDOC Inmate Identification Card was used by the former NDOC inmate to obtain legal government identification and access to the services below:

- Department of Motor Vehicles, which utilized the NDOC identification provided to validate identification when accompanied with an application for official government identification. NRS 483.290 or 483.860. The law stated that DMV would accept the NDOC identification as proof of identification. DMV also accepted as proof of residence. The non-verified identification created challenges for DMV that did not allow compliance with State legislation;
- Compliance with law enforcement officers and Parole and Probation to produce identification NRS 171.123, and conformation with our Deputy Attorney General that it is fair to interpret that as having to produce photo identification;
- To obtain social security card for employment (JobConnect) or access to WIOA funding through the Department of Employment, Training and Rehabilitation – which is a standard condition on the parole agreement and requires identification and social security number, this is documented in

the Workforce Innovation and Opportunity Act (WIOA Final Rules (Pub. L.) Employment requires both photo identification and a social security number.

- NDOC is required under the Memorandum of Understanding with the Social Security Administration to process individuals under this agreement for SSI/SSDI benefits, which requires NDOC to obtain legal identification records (referencing in the Program Operations Manual System for the Social Security Administration – RM 10225.125, 130, 135, 145, 150, 155) for which NDOC is a partner);
- Food banks require identification as they are required to add information into the community CMIS database to access federal and state support to ensure no duplication of services (threesquare.org);
- Community based programs such as Hope for Prisoners (hopeforprisoners.org) or contact Jon Ponder, requires identification for services under their grants;
- Access to transitional housing, including indigent funding requires picture identification on the day presented to the housing (federal and state funds require photo documentation upon entry into a housing program – to validate funds are being expended on the individual appropriately and for reporting. They also need to validate a photo ID upon each entrance);
- Rental agreements, bank accounts, all require identification and are conditions of employment, access, and parole to ensure housing, jobs and security (Employers require two forms of identification, including a social security number to report appropriately to the Internal Revenue Service);
- And Substance abuse/mental health and housing programs which bill Medicaid for services (Centers for Medicaid and Medicare criteria under the Code of Federal Regulations and the Final Rule requiring an individual to produce photo identification and proof of residency).

What is the new mandate?

2. The Director shall not provide an offender with a photo identification card pursuant to paragraph (f) of subsection 1 unless the Director has verified the full legal name and age of the offender by obtaining an original or certified copy of the documents required by the Department of Motor Vehicles pursuant to NRS 483.290 or 483.860, as applicable, furnished as proof of the full legal name and age of an applicant for a driver's license or identification card.

What are the Results?

The inmate will not receive any photo identification upon exit from the institutions or facilities and will be restricted on their ability to re-integrate into society without going through the 90-day plus process of obtaining the birth certificate and legal identification to comply with the parole orders of employment, housing, or treatment. Previously, NDOC provided the inmate photo identification and they used it for all programs and services.

- It will impact an offender's release to the community because the offender will not be able to meet their conditions of parole in their "Parole Plans" because they will not be able to produce any identification when seeking employment, housing or services.
<http://parole.nv.gov/FAQs/ConditionsOfParole/>
- This will result in an increase in recidivism, which will impact the bed capacity, with the offender not having continuity of care with health care and community service providers for medication management, mental health and other programs. This is supported by the Bureau of Justice and practices to ensure continuity of care research;
- This will result in violations of parole agreements with the offender being unable to obtain work timely.

- Impact the Sexual Offender Kit Initiative (SAKI) grant – as NDOC would need to validate the identification of the inmate and update the system as who the offender is, and the DNA collected – this could reduce the ability of NDOC to comply with federal reporting. Previous agencies funded were not the correction institutions, so identification was accepted as what the police department or courts had available.
- Impact the Second Chance Act Grant – as we would no longer be in compliance with the warm hand off to community organizations, because that requires identification (see page 1). (A copy of the strategic plan priorities submitted by the grant is available for members of the committee) The **Second Chance Act (SCA)** supports state, local, and tribal governments and nonprofit organizations in their work to reduce recidivism and improve outcomes for people returning from state and federal prisons, local jails, and juvenile facilities. Existing adult and juvenile offender state and local reentry demonstration projects (including educational, literacy, vocational and job placement services; a full continuum of substance abuse treatment services; and provision of comprehensive services upon reentry, including mental and physical health care). A key component of the Second Chance Act, as approved for Nevada, was the wrap around services immediately from exit to the community partners with access to identification, health care and job-related services. This would jeopardize \$2 million in federal grant re-entry funding, as well as impact community partner programs such a FIT and Hope for Prisoners because their grant funding is contingent on the inmate having photo identification.
- It will also impact an inmate’s ability to obtain employment with Silver State Industries because a Social Security card is required. Prior to the language in this statute, the NDOC accepted the JOC and requested a Social Security card under that name. This statute, does not exclude inmates that are currently serving their sentence.

What is the funding request?

The new legislation (SB 268) increases the NDOC workload and costs associated with providing validated Identification as outlined in this request. NDOC is working with DHHS to expedite the process by reviewing opportunities of efficiency through electronic reporting. DHHS is willing to provide Nevada birth certificates at no-cost to the NDOC.

It is expected that the new program officers will handle approximately 144 inmate birth certificate applications in February.

| Requested Staff 2017 Average Monthly Release = 550 (6,600/12) | FTE Monthly Caseload @ 78% = 429 (550*78%) | FTE Monthly Caseload (1,736 working hours per year) | Monthly Processing Avg 2-hours per request | Projected 2017 Inmate Exit Total 6,600 |
|---|---|--|---|--|
| 4.0 (3.62) FTE - Program Officer I | 261 | 72 per month | 144 hours | 3,132 |
| 2.0 Contract Employees (Prior to Requesting FTE to Validate Workload) – approved December 1FC | 144 | 72 per month | 144 hours | 1,728 |
| 1.0 FTE – Program Officer II (Supervisor/caseload) Complex cases = 3 hour average | 24 | 24 per month | 72 hours direct service/73 hours Supervisory | 288 |
| Totals | 429 | | | 5,148 |

Total Admissions and Releases Over Three Years

| 2015 | | | 2016 | | | 2017 | | |
|---------|------------|----------|---------|------------|----------|---------|------------|----------|
| Months | Total | | Months | Total | | Months | Total | |
| | Admissions | Releases | | Admissions | Releases | | Admissions | Releases |
| Jan. | 449 | 414 | Jan. | 442 | 464 | Jan. | 486 | 548 |
| Feb. | 463 | 440 | Feb. | 489 | 474 | Feb. | 507 | 490 |
| Mar. | 564 | 484 | Mar. | 606 | 464 | Mar. | 645 | 584 |
| Apr. | 567 | 478 | Apr. | 539 | 471 | Apr. | 510 | 528 |
| May | 497 | 478 | May | 503 | 460 | May | 629 | 601 |
| June | 492 | 549 | June | 565 | 514 | June | 537 | 599 |
| July | 631 | 539 | July | 489 | 476 | July | 441 | 538 |
| Aug. | 530 | 446 | Aug. | 521 | 512 | Aug. | 647 | 571 |
| Sept. | 468 | 490 | Sept. | 513 | 503 | Sept. | 504 | 547 |
| Oct. | 512 | 393 | Oct. | 502 | 473 | Oct. | 502 | 544 |
| Nov. | 428 | 393 | Nov. | 494 | 450 | Nov. | | |
| Dec. | 572 | 468 | Dec. | 578 | 519 | Dec. | | |
| Y-T-D | 6173 | 5572 | Y-T-D | 6241 | 5780 | Y-T-D | 5408 | 5550 |
| Average | 514 | 464 | Average | 520 | 482 | Average | 541 | 555 |

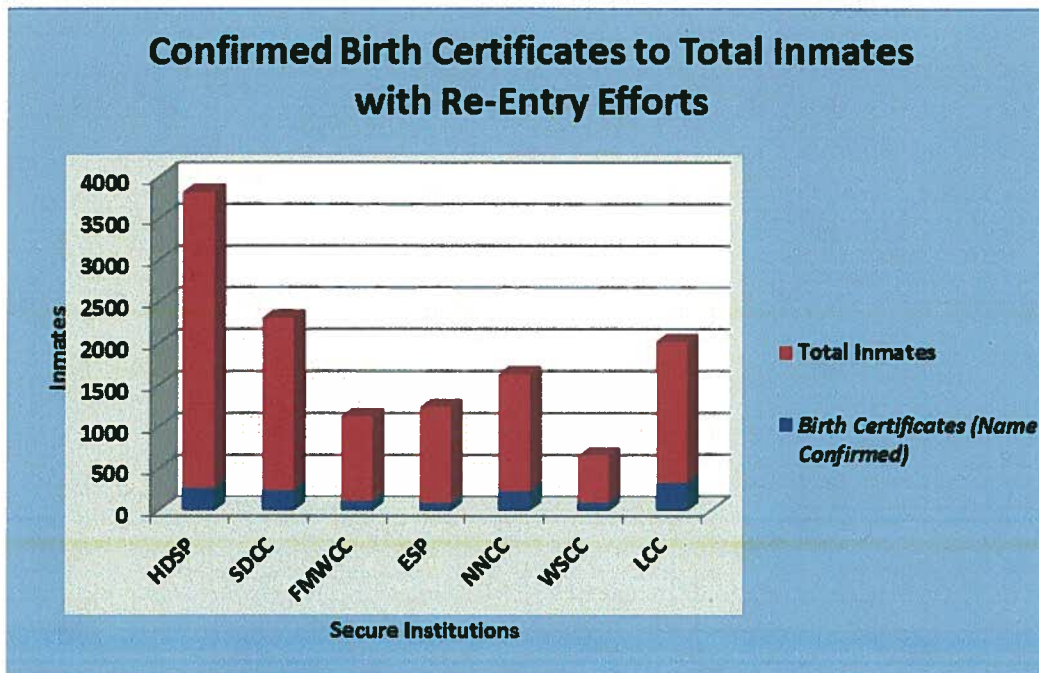
Why did you use 78% for the monthly average caseloads?

NDOC currently receives requests from 80% of the population for programming assistance, from either the caseworker or program officers, which includes the mandatory identification verification for eligibility into prison industry, prison work assignments, programs and other programs. NDOC does not have a current process for documenting KITEs (inmate requests). NDOC is however implementing a tracking process during January to demonstrate the need. This will all be done manually since all KITEs are done by paper. In addition, we are requesting that Program Officers and Caseworkers document the requests by name and NDOC number so we can validate the requests for the February 2017 IFC. The 78% was determined by the following: There is currently 12% of the population with validated identification through birth certificates as proven through our audit. It is important to note that the 12% is a high number and can also be contributed to current efforts by program and caseworker staff across the institutions. Of the 20% that does not request assistance, we expect that is based on past crimes; length of sentence; death row (80 inmates); or other issues.

How did you determine the number of employee hours available for caseloads?

The total number of working hours per calendar year is 2,080 (52 weeks X 40 hours). There are eleven holidays (8 hours X 11 holidays or 88 hours, reducing available hours to 1,992. NDOC has 80-hours of mandatory training for all employees referred to as PST for Year 1, and for 40 hours of IST for year 2. There is another 40 hours of training to maintain certification for facilitating evidence based programming to include MRT, Getting it Right, Correctional Practices, and for auditing program statistics. This reduces the available hours available to 1912. There is the expectation that employees will utilize their sick or vacation time with an average of 80-hours per year or 1,832. Employees have an average of 2 hours per week (or 8 hours per month: 8 X 12 = 96 hours) of administrative hours to handle staff meetings, collaboration, documentation, and required coordination with other team members. The total number of hours available is 1,736 or 145 hours per month for direct service.

How do you know what birth certificates will be required?



| | Total Inmates | Confirmed Birth Certificates | Percentage of Total Inmates w/Birth Certificates |
|-------|---------------|------------------------------|--|
| HDSP | 3547 | 267 | 7.5% |
| SDCC | 2064 | 238 | 11.5% |
| FMWCC | 1016 | 114 | 11.2% |
| ESP | 1154 | 88 | 7.6% |
| NNCC | 1403 | 227 | 16.1% |
| WSCC | 564 | 94 | 16% |
| LCC | 1691 | 328 | 19.3% |

How did you determine caseloads?

NDOC's Re-Entry Program which processes approximately 750 inmates annually. Re-Entry staff works to obtain a certified copy of the inmate's birth certificate prior to the inmate being released into the community which means that about 750 of the approximately 6,000 inmates released have their true identity verified. Current Re-Entry program staff calculated that it takes an average of 3-4 hours per inmate to process and between 6-9 months for the process to be complete.

What does the process include?

The process includes: The inmate requests the identification card; information provided by the inmate has to be verified against the information in NOTIS; the inmate bank slip withdrawal (brass slip) form to pay for the birth certificate has to be completed and submitted; the request for the birth certificate has to be mailed, (NDOC has assumed in this request that an agreement will be able to be completed for those with a Nevada birth certificate through the electronic process); and once the birth certificate is received it has to be entered in NOTIS; Copies have to be made for the inmate and the inmate file; all appropriate holds that would prevent access to prison jobs or programs is released; and National Crime Information Center (NCIC) has to be updated if the name is different. Unfortunately, NDOC is required by the agreement

with the Federal Bureau of Investigations (FBI), that if a new ID is discovered, the NCIC process must take place. NDOC currently does this upon entrance into the facility for all JOC names. This system is utilized by all law enforcement agencies to identify criminal activity and it is also used to locate hold, warrants or detainers by law enforcement agencies. If the inmate's true identity is different than the JOC and their true identity is not listed in the NCIC "rap sheet" another NCIC is required to ensure that this offender is not wanted for other crimes under the true identity. It also updates the NCIC data base. This also requires the coordination of data runs and matching up with PED records and expire records so the Program Officers can prioritize the data and information.

Inmates will not be assigned to paying jobs because the NDOC cannot verify their true identity and validate the social security number for tax purposes. Other steps include notifying the Social Security Administration that there may be fraud involved regarding the inappropriate use of a social security number not belonging to that inmate.

How is NCIC part of the process?

When a new inmate identity is discovered, NDOC performs a background check on that inmate for the safety and security of the facility. For every inmate that requests a new ID and/or that NDOC discovers new identity, NDOC searches the NCIC for other warrants or crimes under the new identity. Through the agreement with the FBI, the NDOC is obligated to use and update NCIC with newly discovered inmate identities and certify that these efforts are underway.

The NCIC has been called the lifeline of law enforcement—an electronic clearinghouse of crime data that can be tapped into by virtually every criminal justice agency nationwide, 24 hours a day, 365 days a year. It helps criminal justice professionals apprehend fugitives, locate missing persons, recover stolen property, and identify terrorists. It also assists law enforcement officers in performing their duties more safely and provides information necessary to protect the public.

NCIC has operated under a shared management concept between the FBI and federal, state, local, and tribal criminal justice users since its inception. There are two facets to the shared management concept—policy and functional. The FBI provides a host computer and telecommunication lines to a single point of contact in each of the 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and Canada, as well as federal criminal justice agencies. Those jurisdictions, in turn, operate their own computer systems, providing access to nearly all local criminal justice agencies and authorized non-criminal justice agencies nationwide. The entry, modification, and removal of records are the responsibility of the agency that entered them. It is a joint operational agreement that we would update the files, including gang affiliations and activities.

Unfortunately, NDOC is not able to contract for these services because the work required to conduct an exhaustive analysis of an inmate's true identity will require the use of the NCIC to check for additional arrest or criminal information under aliases, married and maiden names as well as contacting other law enforcement agencies, probation departments and foreign consulates for information regarding an inmate's identity.

The NCIC supports the collaborative agreements with the Las Vegas Metropolitan Police Department, Homeland Security, Federal Bureau of Investigations, Drug Enforcement Administration, and other law enforcement agencies across the country. The NDOC responsibility is to run background checks on individuals incarcerated to ensure the appropriate information is updated into NCIC. These efforts serve as part of the national database to close out cold cases and provide the documentation, if the individual offends in the future.

Data in NCIC files is exchanged with and for the official use of authorized officials (defined as employees of the department or agency with the appropriate training and background clearances) of the Federal Government, the States, cities, penal and other institutions, and certain foreign governments.

The Program Officer would be required to facilitate the running of the NCIC for the legal identification – to update the system so all departments and agencies had the information. This is included in the average three (3) hours of processing time.

Why is NDOC issuing a card today at intake and does that violate SB 268?

The NDOC must continue to issue inmate photo identification cards while the inmates are in NDOC's custody, simply to ensure a safe and orderly operation within the institution.

This does not mean that the NDOC can, at the present time, ensure that each inmate in its custody has been thoroughly vetted as to their true identity to ensure that outstanding warrants, holds or detainers under an alias have been addressed. Therefore, each time that an inmate is being considered for minimum custody in a camp, outside work crew or transitional housing, a calculated risk is being incurred by the staff classifying the inmate as minimum custody. This risk is also incurred by staff when classifying an inmate to a custody level within the institution, because without verifying the true identity of an inmate, an inmate may be classified without critical arrest, conviction or mental health information that could change an inmate's classification and/or housing status. This is especially true in Nevada where NDOC houses many inmates that are non-Nevada residents. Without program activities, the inmate is less likely to be granted parole.

Why do we care?

NDOC conducts a good faith effort to ensure that there are no outstanding warrants or holds, but this search is based on the name provided by the courts on the Judgment of Conviction (JOC). Prior to SB 268, all agencies and departments accepted the NDOC photo identification as proof of residency and identification. While there were challenges that were discussed with DMV and P&P, the ID continued to be the only ID available. Inmates being released to the community without any identification will become a serious problem for Parole and Probation, local law enforcement, Immigration and Customs Enforcement, Department of Motor Vehicles, Veteran's Administration, social services agencies, community service providers, Medicaid, DHHS (services for the mentally ill) DETR, Social Security Administration (social security cards) and employers who cannot identify the inmate's identity. All of these issues impact the Statewide Re-Entry Strategic Plan initiative to reduce recidivism.

Summary of Funding Required:

The NDOC is requesting funding for a total of 5 (five) FTE's; for the first year. This would be in addition to the two contract employees. The employees would report to the Statewide Re-Entry Administrator.

The request is to ensure identification processes are followed for those inmates not specifically assigned to a Re-Entry program. Applying the most conservative estimate of three hours per inmate to verify their true identity, NDOC will need 5 (FTE) program officer I staff positions; one (1) Program Officer II positions. If the caseloads are not as expected, the NDOC would not request these positions to continue and would provide the IFC the documentation of the current caseloads.

The Program Officer II – Grade 33 Supervisory position to perform administrative work in planning, coordinating and prioritizing which inmate's identifications required relevant to their projected release dates. The position will be responsible for the supervision of the PO I positions, as a working supervisor position. The PO II would also interview inmates that were more problematic, completing request forms or assisting inmates in gathering and compiling the comprehensive information needed to be in compliance with SB 268. They would be entering and auditing NOTIS entries; reviewing NCIC documentation; and this may include but not

limited to submitting applications for or other identification as required in compliance with the Department of Motor Vehicle.

The Program Officer I –The PO I positions and temporary positions would actively engage and interview inmates, completing request forms; gathering and compiling the comprehensive information needed to be in compliance with SB 268. They would be entering correct information in NOTIS to ensure identification of inmates was compared against existing information; validate information and process updated identification information; including submitting applications for birth certificates, social security cards, or other identification as required in compliance with the Department of Motor Vehicle.

Based on the request from the inmates, NDOC would identify those offenders who will be released the soonest from NDOC and immediately work with them to process paperwork for the identification. For those from Nevada, we may be able to work with DHHS to expedite the process for those releasing 30-60 days.

2600 Claims

2601 Authority

The Board of Examiners is created in the Nevada Constitution Article 5, Section 21. More information regarding claims and the Board of Examiners can be found in [Nevada Revised Statutes Chapter 353](#).

2602 State Accounting System

The State maintains an accounting system to track the receipt and expenditure of funds.

Cash Receipt (CR) documents should be keyed into the accounting system on the same day the funds are deposited at the bank; but in no circumstance shall they be entered in more than two business days after the deposit has been made.

Expenditure documents (purchase orders, payment vouchers and receipts of goods) and adjustment documents (journal vouchers) should be keyed into the accounting system timely in order to process orders and payments and maintain accurate accounting of the State's revenues and expenditures.

The State maintains a set of accounting policies and procedures for the use of the accounting system which are issued by the State Controller and are available on-line at the following link:

http://intra.ktl.nv.gov/intranet/FinancialReport/FR_index.html

2610 Review of Each Individual Claim by Board of Examiners Not Required

The Board of Examiners does not generally act on individual claims. [Nevada Revised Statutes 353.090](#) allows the Board to adopt regulations providing for the use of sampling procedures and post audit techniques for determining the correctness of claims for payment from the State pursuant to an appropriation or authorization by the Legislature. The Board has set up rules for the Compliance Review section in the Division of Internal Audits to follow regarding test samples of agencies' fiscal transactions for compliance with statutes, laws, regulations and internal control standards. Exceptional transactions may be referred to the Board for its action.

2614 Invoices

Invoice is a document issued by a vendor showing the character, quantity, price, terms, nature of delivery and other particulars of goods sold or of services rendered.

All invoices are to be processed for payment following the vendor's standard payment terms unless a discount for early payment is offered. Payments should generally be made within 30 days of invoice date.

2616 Supporting Documentation for Expenditures

1. The State has established a Standard Chart of Accounts to be used for the processing of transactions in the State's accounting system. A complete listing is available on the [Data Warehouse of Nevada \(DAWN\)](#) website by clicking on the [Chart of Accounts link](#).
2. Departments, agencies, or offices of state government, as well as any boards/commissions utilizing the state accounting system (or the agency providing fiscal services for same) shall maintain original documentation justifying each expenditure, including purchase orders, original invoices, receiving documents and any other original evidence documenting the State's obligation to pay the claim.
3. Each transaction must have support that is signed or initialed by the agency's approving authority. Facsimile or scanned signatures or initials are acceptable in lieu of original signatures.
4. Employees requesting reimbursement for out-of-pocket expenses for items purchased on behalf of the State must submit the invoice and proof of payment or a signed statement which certifies the invoice has been paid. Employees must not approve their own claims unless they are the head of the agency.

2622 Stale Claims

Stale claim is defined in [NRS 353.097\(1\)](#).

Pursuant to statute, the State Board of Examiners may authorize its Clerk, or a person designated by the Clerk, to approve stale claims on behalf of the Board. The Board has authorized the Clerk to approve stale claims less than \$50,000, with claims \$50,000 or greater submitted to the Board of Examiners for action. Pursuant to statute, state agencies may pay from the appropriate budget account in the current fiscal year (i.e., the budget account from which the claim would have been paid had it been received prior to the close of the fiscal year), if funding is available, a stale claim of the state agency which is:

- (a) Less than \$100 ; or
- (b) For medical related expenses pursuant to a claim from a third-party administrator where the agency has established a separate designated category for medical related third-party claims; or
- (c) For payroll related expenses incurred in the immediately preceding fiscal year.

All other stale claims must be submitted to the Budget Division for approval.

When submitting a stale claim, the agency must specify whether the stale claim will be paid from agency resources or from the Stale Claims Account established pursuant to NRS 353.097(2). In

some cases, partial payment may be made from the Stale Claims Account and partial payment from the current year funds of the budget account where the claim was incurred.

Payment of stale claims from the Stale Claims Account for an agency may not exceed the amount reverted by that agency for the fiscal year during which the claims were incurred. If the stale claims of an agency exceed the amount reverted for the fiscal year in which the obligations represented by the stale claims were incurred, the state agency may:

- (a) Pay the balance from the appropriate budget account with current year funds;
or
- (b) If savings cannot be generated to cover the stale claims expenditure within the current fiscal year, request Interim Finance Committee Contingency Account funds or, if the Legislature is in session, a supplemental appropriation.

Stale claims from available federal grants or from a permanent fund other than the State General Fund or the State Highway Fund may be paid from the appropriate budget account with current year funds once approved. For non-General Fund or non-Highway Fund stale claims, the payment from current year funds cannot exceed the amount that was available to pay the claim in the account at the close of the fiscal year in which the obligation was incurred.

2624 Clerk's Authority

Agencies requesting funding from the Stale Claims Account, the Emergency Account or the Statutory Contingency Account must submit a written request including the reasons the funds are needed and copies of supporting documents that demonstrate the need for the funds as well as the timing and cause of the request.

If the submission falls within the thresholds approved by the Board of Examiners for designation to the Clerk, the Clerk will review and approve or deny the request. If the agency disagrees with the Clerk's determination, the agency may appeal the decision to the Board of Examiners.

If the submission is outside of the thresholds delegated to the Clerk, the request will be placed on the next Board of Examiners agenda for consideration.

Other Policies

The following are miscellaneous policies not included elsewhere.

2626 Subscriptions

Subscriptions for the purchase of books, magazines, newspapers, newsletters, films, software instructions or other publications shall be in the name of the agency and the position, not in the name of the incumbent. All subscriptions must be relevant to the operations of the agency.

Payment of new or renewal subscriptions, for up to two years, may be made in the fiscal year in which the original subscription begins or the renewal invoice is received. The subscription period does not need to coincide with the State's fiscal year.

2628 Professional Association Dues

Professional association dues for individual State employees are not an allowable State expense. State funds may be used to pay dues if:

1. The State employee is eligible by virtue of the unique State position held;
2. The membership is institutional; and
3. There are demonstrable benefits accruing to the State rather than the individual.

2629 Professional Licensure and Continuing Professional Education Costs

Where applicable, the State abides by federal and state laws and accreditation requirements regarding licensure, registration and certification of employees. Any employee whose position requires a license, registration or certification must obtain and maintain an active license, registration or certification unless there is an exception in statute and the employee meets the conditions for the exception or the director of the agency is able to and has, for good cause, waived the requirement for a period of time in order for the employee to obtain the license, registration or certification. Exceptions and waivers must be properly documented and justified, and employees must obtain the license, registration or certification within the timeframe allowed by the exception or the waiver.

Professional licensure or certification costs for employees whose job requires licensure or certification as a requirement for duty is not an allowable expense. This applies to both initial costs to obtain the license, registration or certification as well as renewal costs for employees to maintain professional credentials or licensure.

The State encourages employees to keep their job skills current, and the continuing education and training of employees is an allowable expense, subject to budget availability, as long as the continuing education or training relates to the employee's work assignments and/or benefits the agency for which the employee works. Continuing education credits for the sole purpose of renewing licensure or other professional certification are not an allowable expense. Registration fees for conferences, classes, or other formal opportunities for skill refreshment and networking are permissible expenses as long as continuing professional education credits are only incidental to attendance.

Conference registration fees are also allowable costs if an employee:

1. Participates in the program or gives a presentation;
2. Must attend as part of his/her State duties; or

3. Participates in events or other activities related to or sponsored by State economic development or tourism marketing.

The name and dates of the conference, and the employee's name must be listed on the registration receipt.

2630 Decorating Offices

It is the policy of the State to furnish offices with appropriate furniture and equipment for the position. Personal decorations are not an allowable State expense.

2632 Meeting Room Rentals

Meeting rooms are available in State or government-owned buildings throughout the State. Agencies should explore the availability and allowable use of all such facilities prior to incurring expenses relating to the rental of meeting rooms.

2634 Portrait Photographs

State policy prohibits payment of claims for portrait photography with the exception of full-time elected officials who are entitled to one official State photograph during their term in office. The payment is limited to \$150 including the sitting charge, photographs and copies.

2636 Refreshments/Host Fund

Refreshments served to individuals in offices or to attendees of meetings, receptions or other activities associated with State economic development or tourism marketing are allowable expenditures only if the agency has a legislatively-approved host fund or the activity is financed with non-public revenues such as registration fees charged to individual conference attendees.

Agencies which have a legislatively approved host fund may conduct activities associated with State economic development or tourism marketing, and incur actual costs such as transportation, lodging and food/refreshments for hosted dignitaries and/or client attendees. Host funds cannot be used to purchase alcoholic beverages. The person or persons hosting such dignitaries or client attendees may be reimbursed for the actual cost of their meal associated with the hosted event. Normal and reasonable gratuities paid to service providers at agency directed, produced or hosted functions are allowable expenditures. All claims must be approved by the Department head or authorized representative, and any claim in excess of \$5.00 must be substantiated by receipts and accompanied by a detailed expense report.

Host funds may not be used for normal agency social functions or as adjuncts to an agency's normal course of business (e.g., board meetings or grant review panels).

In certain cases, the Legislature may authorize food expenditures without specifically authorizing a Host Fund. Agencies may not expend any State funds on food without legislative approval.

2638 Conference Hosting

Agencies may charge registration fees to finance contracts or other costs related to organizing seminars or conferences at State owned or non-state owned facilities. If refreshments served to attendees and/or lodging and meals for seminar or conference participants exceed State rates, the agency shall provide documentation that the contract costs are not coming directly from funds originally under control of the State agency. State agencies may pay the registration fees for employees only if they meet the criteria under Section 2629.

2640 Sales and Use Tax

Sales and use tax is not paid on purchases made within the State or purchases shipped in from another state. Sales and use tax may be reimbursed to an employee when claimed as an out-of-pocket expense.

2644 Service Awards

The Governor or head of a State agency may present service awards to State employees if:

1. The cost of each award does not exceed \$50; and
2. The Office of the Governor or the agency has sufficient funds available for such awards.

As used in this section, **service award** means a suitable symbol, other than money, for faithful and exceptional public service.

State agencies are not allowed to include costs relating to the provision of service awards to employees in their requested budget.

2646 Awards/Gifts to Volunteers

Individuals performing a service for a particular State agency on a voluntary basis and for which they are not otherwise compensated may be presented with an award/gift from that agency if:

1. The service performed is on the individual's own time and is not in the normal course of his employment;
2. The cost of each award/gift does not exceed \$50; and
3. The agency has sufficient funds available for such awards/gifts.

Members of a State board or commission are not eligible under the definition of a volunteer.

2648 Plaques

Plaques may be presented to new or expanded businesses or to individuals in appreciation of their contributions to the State.

The cost of each plaque may not exceed \$50, and the State agency presenting the plaque must have sufficient funds available for such costs. State agencies are not allowed to include costs relating to the provision of appreciation plaques in their requested budget.

2650 Purchase of Bottled Water

Generally, the purchase of bottled water is not an allowable expense.

If a State agency believes there are health related issues associated with either the source of domestic water or the inadequacy of the domestic water delivery system, the agency may submit justification of the need to the agency's assigned Budget Analyst. Any approved justification must be kept on file at the respective agency and attached to each biennial budget submission.

The purchase of paper cups is only permitted when the public is the consumer.

2652 Break Room Supplies

The purchase of break room supplies is not an allowable expense. Break room supplies include, but are not limited to, small appliances, cleaning supplies, coffee, napkins, cups, plates and utensils.

2656 Medical Malpractice Insurance

Medical professionals in State employment are not required to carry medical malpractice insurance as the State indemnifies those employees for acts or omissions carried out in their duty as State employees.

2700 Reserved

2800 Reserved

2600 Claims

2601 Authority~~2 Board of Examiners to Examine Claims against the State~~

The Board of Examiners is created in the Nevada Constitution Article 5, Section 21. More information regarding claims and the Board of Examiners can be found in Nevada Revised Statutes Chapter 353.

~~The Governor, Secretary of State and Attorney General constitute the Board of Examiners, with power to examine all claims against the State (except salaries or compensation of officers fixed by law). No claim against the State (except salaries or compensation of officers fixed by law) shall be passed on by the Legislature without having been considered and acted upon by the Board of Examiners. (Nevada Constitution Article 5, Section 21)~~

2602 State Accounting System~~4 Payment of Claims When No Legislative Appropriation Has Been Made~~

The State maintains an accounting system to track the receipt and expenditure of funds.

Cash Receipt (CR) documents should be keyed into the accounting system on the same day the funds are deposited at the bank,; but in no circumstance shall they be entered in more than two business days after the deposit has been made.

Expenditure documents (purchase orders, payment vouchers ~~receipts~~ and receipts of goods) and adjustment documents (journal vouchers) should be keyed into the accounting system timely in order to process orders and payments and maintain accurate accounting of the State's revenues and expenditures.

The State maintains a set of accounting policies and procedures for the use of the accounting system which are issued by the State Controller and are available on-line at the following ~~internet address by clicking on the "Accounting Policies and Procedures"~~ link:

http://intra.ktl.nv.gov/intranet/FinancialReport/FR_index.html

~~The Board of Examiners shall:~~

- ~~1. Examine all claims against the State presented to the Board by petition, for which no appropriation has been made and which requires action by the Legislature;~~
- ~~2. Take all evidence in regard to the claim, which may be offered by the claimant or deemed proper by the Board. The evidence shall be reduced to writing, and the petition, the written~~

~~evidence and the opinion of the Board in reference to the merits of the claim shall be transmitted to the Legislature on the first day of its next session. (NRS 353.085)~~

~~2606 Payment of Claims When Legislative Appropriation Has Been Made~~

~~All claims against the State, for which an appropriation has been made by law and which have been authorized by law, may be presented to the Board of Examiners. The form and manner of presentation of the claim shall be prescribed by the Board of Examiners. The Board shall either reject or allow the claim, in whole or in part, within 30 days from its presentation and shall transmit the claim to the State Controller. The Board may adopt regulations providing for the use of sampling procedures and post audit techniques for making such a determination. (NRS 353.090)~~

~~2607 Reserve Category~~

~~No state claim shall be paid directly from a Reserve category without prior written approval of the Department of Administration, Budget Division.~~

~~2608 Budget Director is Ex Officio Clerk of Board of Examiners~~

~~The Budget Director is the ex officio Clerk of the Board of Examiners. The Clerk assists the Board of Examiners in the examination, classification and preparation for audit of all claims required to be presented to the Board; conducts an effective check and post audit of all such claims submitted to the Board.~~

2610 Review of Each Individual Claim by Board of Examiners Not Required

The Board of Examiners does not generally act on individual claims. [Nevada Revised Statutes 353.090](#) ~~Statute~~ allows the Board to adopt regulations providing for the use of sampling procedures and post audit techniques for determining the correctness of claims for payment from the State pursuant to an appropriation or authorization by the Legislature. The Board has set up rules for the [Compliance](#) ~~Post~~ Review section in the Division of Internal Audits to follow [regarding](#) ~~Post Review~~ will test samples of agencies' s fiscal transactions for compliance with statutes, laws, regulations, and internal control standards. Exceptional transactions [may be](#) ~~are~~ referred to the Board for its action.

~~2612 State Controller Shall Not Pay Claims Unless Allowed by Board of Examiners, Exceptions~~

~~The State Controller shall not allow or draw his warrant for any claim which has not been approved by the Board of Examiners, or for a greater amount than allowed by the Board, except when the~~

~~claim has not been acted upon by the Board within 30 days after its presentation to the Board. (NRS 353.090).~~

2614 Invoices **Terms Defined**

Invoice is a document issued by a vendor showing the character, quantity, price, terms, nature of delivery and other particulars of goods sold or of services rendered.

All invoices are to be processed for payment following the vendor's standard payment terms unless a discount for early payment is offered. Payments should generally be made within 30 days of invoice date.

~~**Payment Voucher** is an electronic document that authorizes payment to vendors.~~

~~**Statement** as used in connection with the term invoice, means a summary of transactions between a vendor and an agency for a specific accounting period (usually a month) presented by a vendor to show the amount due.~~

~~**Warrants** and **Electronic Funds Transfer** are issued by the State Controller in response to a claim approved for payment by the Clerk of the Board of Examiners, which is appealable to the Board of Examiners. The State Treasurer's Office is responsible for distributing all warrants to vendors after they have been issued by the State Controller and advising State agencies of the distribution.~~

2616 Supporting Documentation for **Expenditures** Transactions

~~1. The State has established a Standard Chart of General Ledger Accounts to be used for the processing of transactions in the State's accounting system. A complete listing is available on the _____ are _____ defined _____ on _____ the _____ Controller's _____ Office _____ website (<http://dawn12.state.nv.us:7777/swmenu.htm>) by clicking on the _____ under Reports as referred to in **Chapter 2800 of SAM**.~~

1. Agencies (or the agency providing fiscal services for the agency) should use General Ledger account coding in accordance with Controller's Office Account Policies and Procedures and as listed in the Data Warehouse of Nevada (DAWN).

2. Departments, a Agencies, or offices of state government, as well as any boards/commissions utilizing the state accounting system (or the agency providing fiscal services for ~~same~~the agency) shall maintain original documentation:

a. Justifying each expenditures, including; e.g., purchase orders, original invoices, receiving documents and any other original evidence documenting of the State's obligation to pay the claim; If an original invoice is not available, the documentation submitted should indicate it is to be used as an original invoice. An invoice must support payment of previous balances. Agencies shall make this documentation available as requested by Post Review employees.

b. Justifying each non-expenditure transaction, including check copies, deposit slip copies or any other original evidence supporting the posting of the transaction;

c. If original documentation is not available, the documentation retained should indicate it is to be used as original documentation.

~~2.~~

~~3. When deviating from standard procedures, written explanations should be included with supporting documentation.~~

~~4. Each transaction must have support that is signed or initialed by the agency's approving authority. Facsimile signatures or initials, or scanned signatures or initials, ~~or scanned signatures or initials~~ are acceptable in lieu of original signatures ~~for all documents identified in subparagraph 2 above.~~~~

~~3.1. When deviating from standard procedures, written explanations should be included with supporting documentation.~~

~~4.5. Employees requesting reimbursement for out-of-pocket expenses for items purchased on behalf of the State must submit the invoice and proof of payment or a signed statement which certifies the invoice has been paid. ~~Where State employees are reimbursed for expenditures made on behalf of the State, those e~~Employees ~~should~~ must not approve their own ~~claims~~ vouchers unless they are the head of the agency.~~

~~Alternate documentation and/or procedures which provide at least the level of control described in this section are acceptable.~~

~~2620 Miscellaneous Invoices – Items Required~~

~~1. All payments are to be processed following standard vendor payment terms. Standard vendor payment terms indicate payment within 30 days of invoice date.~~

~~2. All invoices for auto repairs, parts and services must bear the State "Exempt" license plate number of the vehicle being repaired.~~

~~3. Client prescriptions must bear the name of the client on the invoice.~~

~~4. Employees requesting reimbursement for out-of-pocket expenses for items purchased for State use must submit the invoice and a signed statement, which certifies that they have paid this expense on behalf of the State.~~

2622 Stale Claims

~~Stale claim is defined in NRS 353.097(1). ~~means any claim which is presented for payment after the funds from which the claim should have been paid were reverted. Payment of stale claims for an agency may not exceed the amount reverted by that agency for the fiscal year during which the liabilities were incurred.~~~~

~~Pursuant to statute, ayment of all stale claims must be approved by the State Board of Examiners may authorize its Clerk, or a person designated by the Clerk, to approve stale claims on behalf of the Board. The Board has authorized the Clerk to approve stale claims less than \$50,000, with claims \$50,000 or greater submitted to the Board of Examiners for action. ~~Clerk hereby designates~~ sPursuant to statute, state agencies may ~~to~~ pay ~~stale claims that qualify under sections (a) and (b)~~ below.~~

~~A state agency may pay~~ from the appropriate budget account in the current fiscal year (i.e., the budget account from which the claim would have been paid had it been received prior to the close of the fiscal year), if funding is available, a stale claim of the state agency which is:

Is:

- (a) Less than \$100 (~~includes payroll-related~~); or
- (b) For medical related expenses pursuant to a claim from a third-party administrator where the agency has established a ~~special~~, separate designated category ~~established~~ for medical related third-party claims; or
- (c) For payroll related expenses incurred in the immediately preceding fiscal year. ~~These stale claims may be paid from either the State Claims Account or from current year funds as determined by the agency.~~

~~All other stale claims over \$100 must be submitted to the Budget Division for approval. Stale claims less than \$50,000 may be approved by the Clerk of the Board of Examiners or his/her designee, but those claims \$50,000 or greater are sent to the Board of Examiners for action.~~

When submitting a stale claim, the agency must specify whether the stale claim will be paid from agency resources or from the State Claims Account established pursuant to NRS 353.097(2). In some cases, partial payment may be made from the State Claims Account and partial payment from the current year funds of the budget account where the claim was incurred. ~~Stale claims that are eligible to be paid from money that was appropriated, must be paid from the State Claims Account up to the amount of reversion.~~

Payment of stale claims from the State Claims Account for an agency may not exceed the amount reverted by that agency for the fiscal year during which the claims were incurred. If the stale claims of an agency exceed the amount of the reversion for the fiscal year in which the obligations represented by the stale claims were incurred, the state agency may:

- (a) ~~Pay~~ the balance from the appropriate budget account with current year funds; or
- (b) ~~in advance of~~ If savings cannot be generated to cover the stale claims expenditure within the current fiscal year, requesting Interim Finance Committee Contingency Account funds or, if the Legislature is in session, a supplemental appropriation ~~if savings cannot be generated to cover the stale claims expenditure within the current fiscal year.~~

Stale claims ~~Once approved, a stale claim may be paid at any time, despite the age of the claim, if payable from available federal grants or from a permanent fund other than the State General Fund or the State Highway Fund may be paid from the appropriate budget account with current year funds once approved. For Agencies must remember that if the claim is being paid from authorized (i.e., non-General Fund or non-Highway Fund stale claims) monies, the claim payment from current year funds cannot exceed the amount that was available to pay the claim in the account at the close of the fiscal year in which~~ where ~~the obligation was incurred (NRS 353.097[1] [b]).~~

No stale claim shall be paid directly from a Reserve category without prior written approval of the Budget Division.

2624 Clerk's Authority

~~The Clerk of the Board of Examiners, or his designee, has been delegated authority to approve statutory contingency fund claims and state claims if the agency reverted a sufficient amount to have paid the claims if they had been presented in a timelier manner.~~ Agencies requesting funding money from the Sstate eClaims Account, the eEmergency Account or the sStatutory eContingency Account ~~funds~~ must submit a written request including the reasons the funds are needed and copies of supporting documents that demonstrate both the need for the funds as well as the timing and that caused of the request, in the case of state claims.

If the submission falls within the thresholds approved by the Board of Examiners for designation to the Clerk, the Clerk will review and approve or deny the request. If the agency disagrees with the Clerk's determination, the agency may appeal the decision to the Board of Examiners.

If the submission is outside of the thresholds delegated to the Clerk, the request will be placed on the next Board of Examiners agenda for consideration.

Other Policies

The following are miscellaneous policies not included elsewhere.:

2626 Subscriptions

Subscriptions for the purchases of books, magazines, newspapers, newsletters, films, software instructions or other publications shall be in the name of the agency and the position, not in the name of the incumbent. All subscriptions must be relevant to the operations of the agency.

Payment ~~of either~~ new or renewal subscriptions, for up to two years, may be made in the fiscal year in which that the original subscription begins or the renewal invoice is received ~~or the original subscription is invoiced.~~ The subscription period ~~does need~~ not need to coincide ~~to with~~ the State's fiscal year ~~period.~~

2628 Professional Association Dues

Professional association dues for individual State employees are not an allowed ~~at~~ State expense. State funds may be used to pay dues if:

1. The State employee is eligible by virtue of the unique State position held ~~holds~~;
2. The membership is institutional; and
- ~~3. There are demonstrable benefits accruing to the State rather than the individual. ; or~~
- ~~4. The professional organization is not open to all individuals of the profession such as the National Association of Accountants, the American Society for Public Administration, etc.~~
- 3.

2629 Professional Licensure and Continuing Professional Education Costs

Where applicable, ~~T~~the State abides by federal and state laws and accreditation requirements regarding licensure, registration and certification of employees. Any~~No~~ employee whose position requires a license, registration, or certification must obtain and maintain~~shall work without~~ an active~~current~~ license, registration, or certification unless there is an exception in statute and the employee meets the conditions for the exception or the director of the agency is able to and has, for good cause, waived the requirement for a period of time in order for the employee to obtain the license, registration or certification. Exceptions and waivers must be properly documented and justified, and employees must obtain the license, registration or certification within the timeframe allowed by the exception or the waiver.

~~Each employee is responsible for maintaining current licensure, registration, and/or certification if required for his/her position. The State will not pay the costs of p~~Professional licensure or certification costs for those State employees whose job requires licensure or certification as a requirement for duty is not an allowable expense. This applies to both initial costs to obtain the license, registration or certification as well as renewal, nor will it pay licensure costs for employees to maintain professional credentials or licensure, either because it is a job requirement or for the convenience of the State employee.

~~Medical professionals in State employment are not required to carry medical malpractice insurance, as the State indemnifies those employees for acts or omissions carried out in their duty as State employees.~~

~~It is the policy of t~~The State to encourages employees to keep their job skills current, and the continuing education and training of employees is an allowable expense, subject to budget availability, as long as the continuing education or training relates to the employee's work assignments and/or benefits the agency for which the employee works credits toward that goal may be paid by the State. However, eContinuing education credits for the sole purpose of renewing licensure or other professional certification are must not an allowable be at State expense. Registration fees for Cconferences, classes, or other formal opportunities for skill refreshment and networking are permissible State expenses as long as, but continuing professional education credits are may only be incidental to attendance in order for those to be a State expense.

Conference registration fees are also allowable costs if an employee:

1. Participates in the program or gives a presentation;
2. Must attend as part of his/her State duties; or
3. Participates in events or other activities related to or sponsored by State economic development or tourism marketing.

The name and dates of the conference, and the employee's name must be listed on the registration receipt.

2630 Decorating Offices

It is ~~not~~ the policy of the State to ~~furnish~~~~decorate~~ offices ~~with appropriate furniture and equipment for the position.~~ Personal decorations are not an allowable State expense, ~~only to furnish them.~~

2632 Meeting Room Rentals

Meeting rooms are available in State ~~or government~~-owned buildings ~~throughout the State~~~~in certain Nevada cities.~~ State~~a~~ Agencies should explore the availability and allowable use of all such~~these~~ facilities prior to incurring expenses relating to the rental ~~wherever possible and not submit claims for the expense~~ of meeting rooms ~~until exploring all State-owned facilities.~~

2634 Portrait Photographs

State policy prohibits payment of claims for portrait photography with the exception of full-time elected officials who are entitled to one official State photograph during their term in office. The payment is limited to \$150 including the sitting charge, photographs and copies.

2636 Refreshments/Host Fund

Refreshments served to individuals in offices or ~~at~~ attendees of meetings, ~~and attendees of~~ receptions or other ~~marketing Nevada~~ activities associated with State economic development or tourism marketing ~~will be regarded as reasonable~~ are allowable expenditures only if the agency has a legislatively-approved host fund or the activity is financed with non-public revenues such as registration fees charged to individual conference attendees.

Agencies which have a legislatively approved host fund may ~~with~~ conducting activities associated with State economic development or tourism marketing, which have a legislatively approved host fund, may and incur actual costs such as transportation, lodging, food and food/refreshments for hosted dignitaries and/or client attendees of agency functions. Host funds cannot be used to purchase alcoholic beverages. The person or persons hosting such dignitaries or client attendees may ~~can~~ be reimbursed for their actual cost of their meal associated with the hosted event. Normal and reasonable gratuities paid to service providers at agency directed, produced or hosted functions are allowable ~~acceptable~~ expenditures. All claims must be approved by the Department head or authorized representative, and any claim in excess of \$5.00 must be substantiated by receipts and accompanied by a detailed expense report.

Host funds may ~~are~~ not ~~to~~ be used for normal agency social functions or as adjuncts to an agency's normal course of business (e.g., board meetings or grant review panels).

In certain cases, the Legislature may ~~has~~ authorized food expenditures without specifically authorizing a Host Fund. Any agencies may not expend any State funds on food without legislative approval ~~does not have authority to expend State funds on food.~~

2638 Conference Hosting

Agencies may charge registration fees to finance contracts or other costs related to organizing ~~which provide for the rental of conference rooms for~~ seminars or conferences at State owned or non-state owned facilities. ~~If when~~ refreshments ~~are~~ served to attendees and/or lodging and meals for seminar or conference ~~or seminar~~ participants ~~which exceed State rates, the agency shall provide documentation that the contract costs~~ registration fees are not coming directly from funds originally under control of ~~the~~ a State ~~granting~~ agency. State agencies may pay the registration fees for employees only if they meet the criteria under Section 2629. ~~Agencies with activities associated with State economic development or tourism marketing, which have a legislatively approved host fund, may incur actual costs such as transportation, lodging, food/refreshments for hosted dignitaries and/or client attendees of agency functions. Host funds cannot be used to purchase alcoholic beverages. The person or persons hosting such dignitaries can be reimbursed for their actual cost of their meal associated with the hosted event. Normal and reasonable gratuities paid to service providers at agency directed, produced or hosted functions are acceptable expenditures. All claims must be approved by the Department head or authorized representative and any claim in excess of \$5.00 must be substantiated by receipts and accompanied by a detailed expense report. Host funds are not to be used for normal agency social functions or as adjuncts to an agency's normal course of business (e.g., board meetings or grant review panels).~~

~~In certain cases, the Legislature has authorized food expenditures without specifically authorizing a Host Fund. Any agency without legislative approval does not have authority to expend State funds on food.~~

2640 Sales and Use Tax

Sales and use tax is not paid on purchases made within the State or purchases shipped in from another state. Sales and use tax may be reimbursed to an employee when claimed as an out-of-pocket expense.

~~2642 Registration Fees~~

~~Conference registration costs will be paid if an employee participates in the program or gives a presentation, or must attend as part of his/her State duties. In addition, registration costs of attendees/participants for participation in events and other activities related to or sponsored by State economic development or tourism marketing or public relations will be paid. The name of the conference, the dates and the employee's name shall be listed on the registration receipt. (SAM 2636)~~

2644 Service Awards

The Governor or head of a State agency may present service awards to State employees if:

1. The cost of each award does not exceed \$50; and
2. The Office of the Governor or the agency has sufficient funds available for such awards.

As used in this section, **service award** means a suitable symbol, other than money, for faithful and exceptional public service.

State agencies are not allowed to include costs relating to the provision of service awards to employees in their requested budget. ~~(NRS 285.080)~~

2646 Awards/Gifts to Volunteers

Individuals performing a service for a particular State agency on a voluntary basis and for which they are not otherwise compensated may be presented with an award/gift from that agency if:

1. The service performed is on the individual's own time and is not in the normal course of his employment;
2. The cost of each award/gift does not exceed \$~~50~~25.00; and
3. The agency has sufficient funds available for such awards/gifts.

Members of a State board or commission are not eligible under the definition of a volunteer.

2648 Plaques

Plaques may be presented to new or expanded businesses ~~or to~~ and individuals ~~in to show~~ appreciation ~~of their~~ ~~for~~ contributions to the State.

The cost of each plaque may not exceed \$50, and the State agency presenting the plaque must have sufficient funds available for such costs. State agencies are not allowed to include costs relating to the provision of appreciation plaques in their requested budget.

2650 Purchase of Bottled Water

Generally, ~~T~~he purchase of bottled water is not an allowable ~~permitted State~~ expense.

If a State agency believes there are health related issues associated with either the source of domestic water or the inadequacy of the domestic water delivery system, the agency may submit unless justification of the as to why it is needed is approved by to the agency's assigned Executive Branch Budget Officer ~~Analyst. Any approved justification must be kept on file at the respective agency and attached to each biennial budget submission and kept on file at the respective agency. Justification will only be based on health related issues associated with either the source of domestic water or the inadequacy of the domestic water delivery system. Any such approved justification must be attached to each biennial budget submission by the agency.~~

The purchase of paper cups is only permitted when the public is the consumer.

2652 Break Room Supplies

The purchase of break room supplies is not an allowable~~permitted at State~~ expense. Break room supplies include, but are not limited to: ~~small~~ appliances; cleaning supplies; coffee; napkins; cups; plates; and utensils.

2656 Medical Malpractice Insurance

Medical professionals in State employment are not required to carry medical malpractice insurance as the State indemnifies those employees for acts or omissions carried out in their duty as State employees.

2700 Reserved ~~State Accounting System~~

~~2701 State Accounting System~~

~~The State of Nevada's accounting policies and procedures are issued by the State Controller and are available on-line through the Controller's Office website at the following internet address by clicking on the "Accounting Policies and Procedures" link:~~

~~<http://intra.ktl.nv.gov/>~~

~~Agencies can also access the current accounting policies and procedures directly by entering the following internet address:~~

~~http://intra.ktl.nv.gov/IFS_Files/Acctg_Policies_&_Procedures.pdf~~

~~Agencies should frequently refer to the Controller's Office website for up-to-date accounting policies and procedures issued by the State Controller.~~

~~2702 Keying of CR Documents into Advantage~~

~~All CR documents shall be keyed into Advantage on the same day the funds are deposited at the bank; but in no circumstance shall they be entered in Advantage more than two business days after the deposit has been made.~~

2800 Reserved Chart of Accounts

~~The State of Nevada's Standard Chart of Accounts is issued by the State Controller and a summary is available on line through the Controller's Office website at the following internet address by clicking on the policies and procedures link:~~

~~<http://washoe.state.nv.us:7778/>~~

~~Agencies can also access the Standard Chart of Accounts directly by entering the following internet address:~~

~~<http://controller.nv.gov>~~

~~For a complete chart of accounts listing, agencies should refer to the Data Warehouse of Nevada (DAWN) at the following internet address by clicking on the Reports—Chart of Accounts link:~~

~~<http://dawn12.state.nv.us:7777/dawn.html>~~

LEASES SUMMARY

| BOE # | LESSEE | LESSOR | AMOUNT |
|-------|---|---|----------------------|
| 1. | THE BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS | LGC 231, LLC | \$112,901 |
| | Lease Description: | This lease is to provide a second office to service Las Vegas customers and for southern Nevada board meetings. | |
| | Term of Lease: | 01/15/2018 – 01/31/2023 | Located in Las Vegas |
| 2. | DEPARTMENT OF EDUCATION | MARYLAND PARKWAY PROPERTIES, LLC | \$336,574 |
| | Lease Description: | This is a lease renewal to extend the existing lease. | |
| | Term of Lease: | 01/01/2018 – 12/31/2018 | Located in Las Vegas |
| 3. | DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF CHILD AND FAMILY SERVICES | PDMV1, LLC | \$415,030 |
| | Lease Description: | This is a lease renewal to extend the existing lease. | |
| | Term of Lease: | 07/01/2018 – 06/30/2023 | Located in Pahrump |

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GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

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

**REAL PROPERTY (FOR BOARDS AND COMMISSIONS)
OR STORAGE LEASE INFORMATION**

1. Agency (Lessee): Board of Professional Engineers and Land Surveyors
1755 East Plumb Lane, Suite 135
Reno, NV 89502
Contact: Patty Mamola, Phone: 775.688.1231, Email: pmamola@boe.state.nv.us

Purpose: To provide a Las Vegas office for the Board of Professional Engineers and Land Surveyors

Exceptions/Special Lease Terms: 2 months free rent
Tenant Improvement allowance of \$20,000 to be paid by the Landlord

2. Name of Landlord (Lessor): LGC 231, LLC

3. Address of Landlord: 4755 Dean Martin Drive
Las Vegas, NV 89103
ATTN: Gatski Commercial, Holsum Property Manager

4. Property Contact: LGC 231, LLC by: LaPour Partners, Inc
Jeffrey LaPour, Manager

5. Address of Lease Property: 241 West Charleston Blvd, Suite 130
Las Vegas, NV 89102

a. Square Footage or Unit Description: 1132 SF rentable space plus 997 SF useable space within the multi-tenant development, Holsum

b. Cost:

| Cost Per Month | # of Months in Time Frame | Cost Per Year | Time Frame | Cost/Square Foot |
|----------------------------|---------------------------|---------------|-----------------------------|------------------|
| 1811.20 | 9.5 | 17,206.40 | Jan 15, 2018 - Dec 31, 2018 | 1.80 |
| 1865.54 | 12 | 22,386.48 | Jan 1, 2019 - Dec 31, 2019 | 1.65 |
| 1921.50 | 12 | 23,058.00 | Jan 1, 2020 - Dec 31, 2020 | 1.70 |
| 1979.15 | 12 | 23,749.80 | Jan 1, 2021 - Dec 31, 2021 | 1.75 |
| 2038.52 | 13 | 26,500.76 | Jan 1, 2022 - Jan 31, 2023 | 1.80 |
| Total Lease Consideration: | | 60.5 | \$112,901.44 total lease | |

Increase %

c. Yes No Renewal Terms: subject to negotiation

d. Option to Renew: Yes No

e. Holdover Notice: # of Days Required 30 Holdover Terms: month-to-month at 150% of prior term's month

f. Term: Sixty and a half (60.5) months

g. Pass-thrus/CAM/Taxes: Landlord Tenant

h. Utilities: Landlord Tenant

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

j. Repairs: Major: Landlord Tenant Minor: Landlord Tenant

k. Comparable Market Rate: \$1.65 - \$2.69

l. Specific termination clause in lease: Breach/Default/Lack of Funding

m. Lease will be paid for by Agency Budget Account Number or BOC Number: B008

6. BOE Threshold: \$500,000

7. This lease constitutes:

- An extension of an existing lease
- An addition to current facilities (requires a remark)
- A relocation (requires a remark)
- A new location (requires a remark) Second office to service Las Vegas customers and for southern NV board meetings.
- Remodelling only

a. Estimated Moving Expenses: \$ 0 Furnishings: \$ 10,000 Data/Phones: \$ 1,000

PROPERTY OR STORAGE LEASE INFORMATION

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

Yes No Dec Unit _____

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

 _____
Authorized Agency Signature Date 12/04/2017

8. State of Nevada Business License Information:

| | | | |
|--|--|------|--|
| a. Nevada Business ID Number: | <u>NV20031158524</u> | Exp: | |
| b. The Contractor is registered with the Nevada Secretary of State's Office as a: | LLC <input checked="" type="checkbox"/> INC. <input type="checkbox"/> CORP. <input type="checkbox"/> LP <input type="checkbox"/> | | |
| c. Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section | <input type="checkbox"/> YES | | <input checked="" type="checkbox"/> NO |
| d. Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO |
| e. Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO |
| f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office? | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO |
| g. State of Nevada Vendor number: | <u>N/A</u> | | |

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

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

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

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

| For Budget Division Use Only | |
|---------------------------------|----------|
| Reviewed by: <i>K. Anderson</i> | 12/11/17 |
| Reviewed by: <i>SLB</i> | 12/15/17 |
| Reviewed by: | |

STATEWIDE LEASE INFORMATION

1. Agency: Department of Education
700 5th Street
Carson City, Nevada 89701
Andrea McCalla 775-687-9169 Fax: 775-687-9190 ammccalla@doe.nv.gov

Remarks: Leasing Services renegotiated the option to renew, creating a savings of \$6,802.20.

Exceptions/Special notes:

2. Name of Lessor: Maryland Parkway Properties, LLC

3. Address of Lessor: c/o MDL Group
3065 S. Jones, Suite 201
Las Vegas, Nevada 89146

4. Property contact: Robert Perkins
MDL Group
Phone: (702) 388-1800 Fax: (702) 388-1010 rperkins@mdlgroup.com

5. Address of Lease property: 9890 South Maryland Parkway
Las Vegas, Nevada 89117

a. Square Footage: Rentable
 Usable 15,161

b. Cost:

| cost per month | # of months in time frame | cost per year | time frame | Approximate cost per square foot |
|----------------------------|---------------------------|---------------|-------------------------------------|----------------------------------|
| \$28,047.85 | 12 | \$336,574.20 | January 1, 2018 - December 31, 2018 | \$1.85 |
| Total Lease Consideration: | | 12 | \$336,574.20 | |

1st Option to Renew 3% \$28,899.29 12 \$346,791.48 January 1, 2019 - December 31, 2019 \$1.91

2nd Option to Renew 3% \$29,755.97 12 \$357,071.64 January 1, 2020 - December 31, 2020 \$1.96

d. Option to renew: Yes No 90 Renewal terms: Two (2), One (1) year options

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

f. Term: One (1) year

g. Pass-thrus/CAM/Taxes Landlord Tenant

h. Utilities: Landlord Tenant

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

j. Repairs: Major: Landlord Tenant Minor: Landlord Tenant

k. Comparable Market Rate: \$2.05 - \$2.60 - Las Vegas / Henderson Area

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

m. Lease will be paid for by Agency Budget Account Number: 2720

6. Purpose of the lease: To house the Las Vegas Department of Education

7. This lease constitutes:

- An extension of an existing lease
- An addition to current facilities (requires a remark)
- A relocation (requires a remark)
- A new location (requires a remark)
- Remodeling only
- Other

a. Estimated Moving Expenses: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

RETROACTIVE

X BOE
 NON BOE
 ANALYST INITIALS

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GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

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

Yes _____ No _____ Dec Unit _____

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


Authorized Agency Signature
11.22.18
Date


For Public Works Information:

8. State of Nevada Business License Information:

| | | | | | |
|----|---|---|------------------------------|-------------------------------|--|
| a. | Nevada Business ID Number: | NV20111479961 | Exp: | 7/31/2018 | 47 |
| b. | The Contractor is registered with the Nevada Secretary of State's Office as a: | LLC <input checked="" type="checkbox"/> | INC <input type="checkbox"/> | CORP <input type="checkbox"/> | LP <input type="checkbox"/> |
| c. | Is the Contractor Exempt from obtaining a Business License: | <input type="checkbox"/> YES | | | <input checked="" type="checkbox"/> NO |
| | *If yes, please explain in exceptions section | | | | |
| d. | Is the Contractors Name the same as the Legal Entity Name? | <input checked="" type="checkbox"/> YES | | | <input type="checkbox"/> NO |
| | *If no, please explain in exceptions section | | | | |
| e. | Does the Contractor have a current Nevada State Business License (SBL)? | <input checked="" type="checkbox"/> YES | | | <input type="checkbox"/> NO |
| | *If no, please explain in exceptions section | | | | |
| f. | Is the Legal Entity active and in good standing with the Nevada Secretary of States | <input checked="" type="checkbox"/> YES | | | <input type="checkbox"/> NO |
| g. | State of Nevada Vendor number: | T27029677 | | | |

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

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


Authorized Signature
Public Works Division
11.28.17
Date

ps
For Board of Examiners YES NO

Brian Sandoval
Governor



Patrick Cates
Director

Gustavo "Gus" Nuñez
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Drive
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

MEMORANDUM

Date: November 28, 2017

To: Katrina Nielson

From: Patrick Smorra, Public Works Division, Leasing Services, 684-1818
psmorra@admin.nv.gov

Subject: For placement on January's BOE meeting

- 1) MARYLAND PARKWAY PROPERTIES, LLC - Department of Education, 9890 South Maryland Parkway, Las Vegas, Nevada 89117
- 2) This lease was slated for approval during the December 12, 2017 BOE meeting. Due to vacations and scheduling issues between the landlord/owner and the property manager the lease was returned to Leasing Services three weeks after initially sent for Lessor review and signatures.
- 3) Please note on Page 1 of 22, Paragraph 1.1, Lines 6 and 7, the language stating the lease is "retroactively commencing January 1, 2018, and terminating on December 31, 2018."

Thank you,

Patrick Smorra

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

| | |
|------------------------------|-------------|
| For Budget Division Use Only | |
| Reviewed by: | 12/18/17 YH |
| Reviewed by: | |
| Reviewed by: | |

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Child and Family Services
 4126 Technology Way, 3rd Floor
 Carson City, Nevada 89706
 Melaine Mason
 (775) 684-4462 Fax: (775) 684-4455 mmason@dcsf.nv.gov

Remarks: Leasing Services negotiated a five (5) year lease renewal with a rate reduction resulting in a savings of \$16,969.80 or 3.9% over the term.

Exceptions/Special notes:

2. Name of Lessor: PDMV1, LLC
 Doug Maughan, Managing Member
 (775) 727-5900 Fax (775) 727-6010

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3. Address of Lessor: 2281 East Postal Drive, Suite 1
 Pahrump, Nevada 89048
 Mailing Address: PO Box 38
 Pahrump, Nevada 89041

DEC 14 2017

GOVERNOR'S FINANCE OFFICE
 BUDGET DIVISION

4. Property contact: Steve Wulfenstein (775) 209-4003
 LoaDel Fisher (775) 727-5900
 Russ Meads (775) 209-6036

5. Address of Lease property: 1780 East Basin Avenue, Units 2,3,4
 Pahrump, Nevada 89060

a. Square Footage: Rentable
 Usable 4,480

| b. Cost: | cost per month | # of months in time frame | cost per year | time frame | Approximate cost per square foot |
|------------|----------------|---------------------------|---------------|------------------------------|----------------------------------|
| Increase % | \$6,800.00 | 12 | \$81,600.00 | July 1, 2018 - June 30, 2019 | \$1.52 |
| 0.5% | \$6,832.55 | 12 | \$81,990.60 | July 1, 2019 - June 30, 2020 | \$1.53 |
| 0% | \$6,832.55 | 12 | \$81,990.60 | July 1, 2020 - June 30, 2021 | \$1.53 |
| 2% | \$6,991.50 | 12 | \$83,898.00 | July 1, 2021 - June 30, 2022 | \$1.56 |
| 2% | \$7,129.25 | 12 | \$85,551.00 | July 1, 2022 - June 30, 2023 | \$1.59 |

c. Total Lease Consideration: 60 \$415,030.20

d. Option to renew: Yes No 90 Renewal terms: One (1) identical term

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

f. Term: Five (5) years

g. Pass-thrus/CAM/Taxes Landlord Tenant

h. Utilities: Landlord Tenant

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

j. Repairs: Major: Landlord Tenant Minor: Landlord Tenant

k. Comparable Market Rate: Not Available - Rural Area

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

m. Lease will be paid for by Agency Budget Account Number: 3229

6. Purpose of the lease: To house the Division of Child and Family Services

7. This lease constitutes:
- An extension of an existing lease
 - An addition to current facilities (requires a remark)
 - A relocation (requires a remark)
 - A new location (requires a remark)
 - Remodeling only
 - Other

a. Estimated Moving Expenses: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

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

Yes _____ No _____ Dec Unit _____

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

Doreen Kummer 11/28/17
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

| | | | | |
|--|--|------|--|----|
| a. Nevada Business ID Number: | NV20061628597 | Exp: | 4/30/2018 | 19 |
| b. The Contractor is registered with the Nevada Secretary of State's Office as a: | LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/> | | | |
| c. Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section | <input type="checkbox"/> YES | | <input checked="" type="checkbox"/> NO | |
| d. Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO | |
| e. Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO | |
| f. Is the Legal Entity active and in good standing with the Nevada Secretary of States | <input checked="" type="checkbox"/> YES | | <input type="checkbox"/> NO | |
| g. State of Nevada Vendor number: | T29010290 | | | |

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

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

[Signature] 12.13.17
Authorized Signature Date
Public Works Division

u PS
BM For Board of Examiners YES NO

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|-------------------------------|----------|---|
| 1. | 015 | GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION | JFA ASSOCIATES DBA THE JFA INSTITUTE | GENERAL | \$94,668 | |
| | Contract Description: | This is a new contract to provide projections of inmate and offender populations at specific intervals to coordinate with the various phases of the state's budget process. | | | | |
| | | Term of Contract: | 02/15/2018 - 02/28/2020 | Contract # 19504 | | |
| 2. | 030 | ATTORNEY GENERAL'S OFFICE - TORT CLAIM FUND | ASHCRAFT & BARR, LLP | OTHER: TORT CLAIM FUND | \$50,000 | Professional Service |
| | Contract Description: | This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services. | | | | |
| | | Term of Contract: | 01/05/2016 - 12/31/2019 | Contract # 17414 | | |
| 3. | 030 | ATTORNEY GENERAL'S OFFICE - TORT CLAIM FUND | LEWIS BRISBOIS BISGAARD & SMITH, LLP | OTHER: TORT CLAIM FUND | \$50,000 | Professional Service |
| | Contract Description: | This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections, since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services. | | | | |
| | | Term of Contract: | 01/05/2016 - 12/31/2019 | Contract # 17444 | | |
| 4. | 030 | ATTORNEY GENERAL'S OFFICE - TORT CLAIM FUND | MARQUIS AURBACH COFFING PC | OTHER: TORT CLAIM FUND | \$50,000 | Professional Service |
| | Contract Description: | This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections, since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services. | | | | |
| | | Term of Contract: | 01/05/2016 - 12/31/2019 | Contract # 17383 | | |
| 5. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | BRUCE KANE DBA BRUCE'S CARPET CLEANING | OTHER: BUILDING RENTAL INCOME | \$25,000 | |
| | Contract Description: | This is the third amendment to the original contract which provides ongoing carpet cleaning service for state-owned buildings in the Carson City and Reno areas. This amendment increases the maximum amount from \$105,000 to \$130,000 due to higher than anticipated need for special services. | | | | |
| | | Term of Contract: | 11/01/2014 - 10/31/2018 | Contract # 15942 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|-------------------------------|----------|---|
| 6. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | ROSEVILLE TERMITE AND PEST CONTROL DBA ADVANCE INTEGRATED PEST MANAGEMENT | OTHER: BUILDING RENTAL INCOME | \$27,400 | |
| | Contract Description: | This is the first amendment to the original contract which provides ongoing pest control services for state buildings in the Carson City and Reno areas. This amendment increases the maximum amount from \$47,000 to \$74,400 due to the need for higher than projected services which can be related to the unusually wet spring conditions experienced in the region. | | | | |
| | | Term of Contract: | 08/01/2016 - 06/30/2020 | Contract # 18003 | | |
| 7. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | WOW CLEANING CORPORATION | OTHER: BUILDING RENTAL INCOME | \$25,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides flooring/window cleaning and maintenance services for state-owned buildings in northern Nevada. This amendment increases the maximum amount from \$45,000 to \$70,000 due to increased demand for services. | | | | |
| | | Term of Contract: | 05/15/2017 - 04/30/2021 | Contract # 18746 | | |
| 8. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - HEALTH AND HUMAN SERVICES CIP PROJECTS - NON-EXEC | PETTY & ASSOCIATES, INC. | BONDS | \$68,900 | Professional Service |
| | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Lake's Crossing - Air Handling Unit No. 2 (AH2) Replacement CIP project to include complete schematic, design, construction and bid documents as well as construction administration services for the replacement of the existing multi-zone air handler AH-2: CIP Project No. 17-M52; SPWD Contract No. 111652. | | | | |
| | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19502 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES | | | | | | |
|-------|--------|--|---|----------------|-----------|---|-----------------------|---|------------------|--|--|--|
| 9. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC | FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING | BONDS | \$135,957 | Professional Service | | | | | | |
| | | | | | | | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP project to include complete design and construction services for the installation of up to a 1.4 million gallon water tank, new tank layout, connection to Well #6 and the reconditioning of two existing water storage tanks: CIP Project No. 17-M29; SPWD Contract No. 111597. | | | | |
| | | | | | | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19488 | | | |
| 10. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC | VERUS ASSOCIATES NEVADA, LLC | BONDS | \$502,501 | Professional Service | | | | | | |
| | | | | | | | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Florence McClure Women's Correctional Center - Upgrade Door Controls and Security Camera Systems CIP project to include design, construction administration/programming services and associated documents to replace the current obsolete intercom system and control center for the facility with upgraded door controls, software, firmware and programmable logic controllers: CIP Project No. 17-M15; SPWD Contract No. 111656. | | | | |
| | | | | | | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19526 | | | |
| 11. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC | FRAME ARCHITECTURE, INC. | BONDS | \$74,500 | Professional Service | | | | | | |
| | | | | | | | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Laxalt Building - Roof Replacement CIP project to include design and construction documents, as well as construction administration services to remove and replace the existing roof system with a new metal roofing system: CIP Project No. 17-S01-8; SPWD Contract No. 111641. | | | | |
| | | | | | | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19507 | | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES | |
|-------|--------|--|---|------------------|----------|---|--|
| 12. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS – NON-EXEC | RAYMOND P. CROOK DBA RPC ROOF CONSULTING | BONDS | \$68,550 | Professional Service | |
| | | Contract Description: This is a new contract to provide professional architectural/engineering services for the Lovelock Correctional Center Roof Replacement CIP project to include design, construction administration, development of bid documents, roof inspection services and a final roof inspection report for buildings 2 and 3: CIP Project No. 17-S01-2; SPWD Contract No. 111657. | | | | | |
| | | Term of Contract: | Upon Approval - 06/30/2021 | Contract # 19512 | | | |
| 13. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS – DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES AND AGRICULTURE CIP PROJECTS – NON-EXEC | MELROY ENGINEERING, INC. DBA MSA ENGINEERING CONSULTANT | BONDS | \$61,500 | | |
| | | Contract Description: This is a new contract to provide professional mechanical/electrical design and construction administration services for the Elko Interagency Dispatch Center - HVAC System Renovation CIP project to include design and construction documents to replace the central plant equipment, coil units and temperature control system: CIP Project No. 17-M54; SPWD Contract No. 111504. | | | | | |
| | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19515 | | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES | | | | | | |
|-------|--------|--|----------------------------------|---|----------|---|-----------------------|--|------------------|--|--|--|
| 14. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES AND AGRICULTURE CIP PROJECTS – NON-EXEC | SAAREM CONSULTING ENGINEERS, LLC | BONDS | \$59,500 | Professional Service | | | | | | |
| | | | | | | | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Division of Forestry's Sierra Front Interagency Dispatch Center - HVAC System Renovation CIP project to include mechanical and electrical documents/specifications as well as construction administration, bid support and inspection services to replace the central plant equipment, coil units and temperature control system: CIP Project No. 17-M37; SPWD Contract No. 111663. | | | | |
| | | | | | | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19514 | | | |
| 15. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES AND AGRICULTURE CIP PROJECTS – NON-EXEC | SHAW ENGINEERING, LTD | BONDS 25% OTHER: AGENCY FUNDS - FEDERAL GRANT 75% | \$70,990 | Professional Service | | | | | | |
| | | | | | | | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Mason Valley Wildlife Management Area Headquarters - Domestic Water Well CIP project to include schematic, design, construction and bid documents, as well as construction administration services, for the construction of an additional domestic water well and the reconstruction of the existing site water system to provide distinct potable and non-potable water delivery systems: CIP Project No. 17-M75; SPWD Contract No. 111661. | | | | |
| | | | | | | | Term of Contract: | 01/09/2018 - 06/30/2021 | Contract # 19516 | | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|------------------|-------------|---|
| 16. | 180 | DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - COMPUTER FACILITY | EMC CORPORATION | FEE: USER | \$2,000,000 | Sole Source |
| | Contract Description: | This is a new contract to provide ongoing implementation and installation services for the Dell and EMC storage hardware and systems that house customers' databases and applications. | | | | |
| | | Term of Contract: | 01/09/2018 - 07/31/2022 | Contract # 19540 | | |
| 17. | 300 | DEPARTMENT OF EDUCATION - EDUCATOR EFFECTIVENESS | ACS VENTURES, LLC DBA PMB 433 | GENERAL | \$420,000 | |
| | Contract Description: | This is a new contract to continue to provide ongoing outcome-based evaluations for the Zoom, Victory School, Read by Grade Three, Underperforming Schools Turnaround, Social Worker Grants to Schools and Nevada Ready 21 Technology programs and the Great Teaching and Leading fund. | | | | |
| | | Term of Contract: | 07/01/2017 - 06/30/2019 | Contract # 19478 | | |
| 18. | 300 | DEPARTMENT OF EDUCATION - OFFICE OF THE SUPERINTENDENT | AUGENBLICK, PALAICH AND ASSOCIATES, INC. | GENERAL | \$195,000 | |
| | Contract Description: | This is a new contract to provide school funding consultant services for the Department pursuant to SB 178, Sections 13-14, of the 2017 Legislative Session. The vendor will review existing studies and reports relevant to the topic, engage in study and make recommendations necessary and appropriate on issues related to the funding of public education in Nevada. | | | | |
| | | Term of Contract: | 01/09/2018 - 01/31/2019 | Contract # 19487 | | |
| 19. | 331 | DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - MUSEUMS AND HISTORY - NEVADA STATE RAILROAD MUSEUMS | RAIL EXPLORERS, INC. | OTHER: REVENUE | \$143,100 | |
| | Contract Description: | This is a new revenue contract to collect train ride fees for special event, third party rental of the Nevada State Railroad Museum facilities. | | | | |
| | | Term of Contract: | 01/09/2018 - 04/30/2020 | Contract # 19523 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|----------------------------|-------------|---|
| 20. | 402 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - RURAL REGIONAL CENTER | PALCO, INC. | GENERAL 82% FEDERAL 18% | \$2,750,000 | |
| | Contract Description: | This is a new contract to provide ongoing fiscal management services for children whose families/guardians choose to direct their own services and support through the state-funded, self-directed program and to veterans who qualify for the veteran-directed home and community based services offered through the Aging and Disability Resource Center program. | | | | |
| | | Term of Contract: | 04/01/2018 - 03/31/2019 | Contract # 19470 | | |
| 21. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTERGOVERNMENTAL TRANSFER PROGRAM | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO SCHOOL OF MEDICINE | OTHER: REVENUE | \$3,548,688 | Exempt |
| | Contract Description: | This is a new revenue interlocal agreement to receive funds to support and fund the non-federal share of the supplemental Graduate Medical Education program for non-state government owned or operated teaching hospitals. | | | | |
| | | Term of Contract: | 07/01/2017 - 06/30/2022 | Contract # 19171 | | |
| 22. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTERGOVERNMENTAL TRANSFER PROGRAM | BOARD OF TRUSTEES FOR FUND FOR HOSPITAL CARE TO INDIGENT PERSONS | OTHER: REVENUE | \$3,100,000 | Exempt |
| | Contract Description: | This is the first amendment to the original revenue interlocal agreement which provides ongoing access to inpatient hospital services for needy individuals. The Contractor agrees to voluntarily transfer an amount equal to the reduction in state savings received in the inpatient, non-state governmental-owned hospital upper payment limit supplemental payment due to any increase in the Indigent Accident Fund state share. This amendment extends the termination date from June 30, 2019 to June 30, 2022 and increases the maximum amount from \$3,100,000 to \$6,200,000 due to the continued need for these services. | | | | |
| | | Term of Contract: | 07/01/2016 - 06/30/2022 | Contract # 17569 | | |

CONTRACT SUMMARY

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|-------|-----------------------|--|-----------------------------|----------------------------|--------------|---|
| 23. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - ADMINISTRATION | COGNOSANTE CONSULTING, LLC | GENERAL 10% FEDERAL 90% | \$3,288,617 | |
| | Contract Description: | This is the first amendment to the original contract which provides ongoing independent verification and validation services for the design, development and implementation phase of the Medicaid Management Information Systems Modernization Project. This amendment extends the termination date from March 31, 2019 to September 13, 2020 and increases the maximum amount from \$2,993,806 to \$6,282,423 due to revisions to the request for proposal and additions to the scope of work. | | | | |
| | | Term of Contract: | 09/13/2016 - 09/13/2020 | Contract # 18051 | | |
| 24. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING & POLICY - ADMINISTRATION | PUBLIC KNOWLEDGE, LLC | GENERAL 10% FEDERAL 90% | \$4,637,580 | |
| | Contract Description: | This is the fourth amendment to the original contract which provides Medicaid Management Information System (MMIS) Replacement Planning to improve the administration of the Medicaid program by: adopting data and industry standards; promoting reusable components through standard interfaces and modularity; supporting interoperability and integration using open architecture and data standards; and supporting the integration of clinical and administrative data to enable better decision making. This amendment adds attachment FF-Nevada MMIS Modernization Amendment Task Plan-v1.0 and GG-Nevada Electronic Visit Verification Amendment Task Plan-v3.0, extends the termination date from August 31, 2018 to August 31, 2020 and increases the maximum amount from \$5,449,640 to \$10,087,220 due to increased scope of work. | | | | |
| | | Term of Contract: | 10/08/2013 - 08/31/2020 | Contract # 14866 | | |
| 25. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING & POLICY - NEVADA MEDICAID, TITLE XIX | HP ENTERPRISE SERVICES, LLC | GENERAL 10% FEDERAL 90% | \$26,419,369 | |
| | Contract Description: | This is the 18th amendment to the original contract which provides operations of the Medicaid Management Information System and fiscal agent services. This amendment increases the maximum amount from \$396,454,321.23 to \$422,873,689.86 due to changing in the Operations Pre Go Live period, integrating policy changes to align with existing Nevada Policy, incorporating Stage III statement of work, making changes to the maintenance and enhancement hours, adjusting the warranty period and increasing funding for an additional position. | | | | |
| | | Term of Contract: | 01/11/2011 - 06/30/2020 | Contract # 11760 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|------------------|-----------|---|
| 26. | 403 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID | LANDER COUNTY SOCIAL SERVICES | OTHER: REVENUE | \$332,280 | |
| | Contract Description: | This is a new revenue interlocal agreement that continues ongoing administrative services necessary to operate the Medicaid County Match Program. The counties provide the non-federal share for medical and Medicaid administrative services. Pursuant to NRS 428.010, counties are required to provide medical care to indigent persons who reside in the county. The County Match Program provides federal matching funds for indigent long term care costs when the indigent is Medicaid eligible. | | | | |
| | | Term of Contract: | 07/01/2017 - 06/30/2019 | Contract # 19417 | | |
| 27. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY | SRA INTERNATIONAL, INC. | FEDERAL | \$50,000 | |
| | Contract Description: | This is the sixth amendment to the original contract which provides upgrades to Nevada's communicable disease National Electronic Disease Surveillance System in order to implement electronic laboratory reporting capabilities. This amendment increases the maximum amount from \$175,000 to \$225,000 for the maintenance of the system. | | | | |
| | | Term of Contract: | 01/08/2015 - 07/31/2018 | Contract # 16262 | | |
| 28. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNITY HEALTH SERVICES | HUMBOLDT COUNTY DBA HUMBOLDT COUNTY TREASURER | OTHER: REVENUE | \$148,924 | |
| | Contract Description: | This is the second amendment to the original contract which provides ongoing individual and family health services utilizing the State's community health nurses. The areas of emphasis are rural epidemiology, public health emergency preparedness and community health nursing, including the treatment and prevention of infectious tuberculosis and sexually transmitted diseases. This amendment revises services to the county in the scope of work and increases the maximum amount from \$78,855.15 to \$227,779.15 due to the continued need for these services in the county. | | | | |
| | | Term of Contract: | 07/01/2016 - 06/30/2019 | Contract # 17598 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|-------------------------|--------------|---|
| 29. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNITY HEALTH SERVICES | MINERAL COUNTY DBA MINERAL CO CLERK & TREASURER | OTHER: REVENUE | \$95,592 | |
| | Contract Description: | This is the second amendment to the original contract which provides ongoing individual and family health services utilizing the State's community health nurses. The areas of emphasis are rural epidemiology, public health emergency preparedness and community health nursing, including the treatment and prevention of infectious tuberculosis and sexually transmitted diseases. This amendment revises services to the county in the scope of work and increases the maximum amount from \$30,355.93 to \$125,947.93 due to the continued need for these services in the county. | | | | |
| | | Term of Contract: | 07/01/2016 - 06/30/2019 | Contract # 17798 | | |
| 30. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - FACILITY FOR THE MENTAL OFFENDER | WASHOE COUNTY DBA WASHOE COUNTY MANAGER'S OFFICE | OTHER: REVENUE | \$1,884,800 | |
| | Contract Description: | This is a new revenue interlocal agreement to provide ongoing on-site mental health services to defendants at the Washoe County Detention Center. | | | | |
| | | Term of Contract: | 07/01/2017 - 06/30/2021 | Contract # 19381 | | |
| 31. | 407 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM | MAXIMUS HUMAN SERVICES, INC. | GENERAL 34% FEDERAL 66% | \$14,335,378 | |
| | Contract Description: | This is a new contract to provide quality assurance services for the automated system replacement project to develop a quality management plan, monitor project tasks and activities and report on deviations from the approved project management plan. | | | | |
| | | Term of Contract: | 02/01/2018 - 11/30/2022 | Contract # 19159 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|------------------|-------------|---|
| 32. | 440 | DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO | FEDERAL | \$200,000 | |
| | Contract Description: | This is a new interlocal agreement to evaluate the effectiveness of the Second Chance Act Reentry Initiative - Nevada Strategic Recidivism Reduction Plan grant goals. | | | | |
| | | Term of Contract: | 10/01/2017 - 09/30/2018 | Contract # 19373 | | |
| 33. | 440 | DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS | UNIVERSITY OF CINCINNATI DBA CORRECTIONS INSTITUTE | FEDERAL | \$121,250 | |
| | Contract Description: | This is a new interlocal agreement to provide the Department's re-entry program with training as identified by the Second Chance Act Reentry Initiative - Nevada Strategic Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance. | | | | |
| | | Term of Contract: | 10/01/2017 - 11/30/2017 | Contract # 19369 | | |
| 34. | 440 | DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS | UNIVERSITY OF CINCINNATI DBA CORRECTIONS INSTITUTE | FEDERAL | \$109,000 | |
| | Contract Description: | This is a new interlocal agreement to provide the Department's re-entry program with training as identified by the Second Chance Act Reentry Initiative - Nevada Strategic Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance. | | | | |
| | | Term of Contract: | 10/01/2017 - 09/30/2018 | Contract # 19372 | | |
| 35. | 550 | DEPARTMENT OF AGRICULTURE - COMMODITY FOOD PROGRAM | JENNIE-O TURKEY STORE SALES, LLC | FEDERAL | \$1,175,000 | |
| | Contract Description: | This is the third amendment to the original contract which provides for school districts to purchase food for the National School Lunch and Breakfast Programs. School districts have been encouraged to utilize their federal entitlement resulting in an increase in requests to purchase food products from this vendor. This amendment increases maximum amount from \$325,000 to \$1,500,000 due to the increased need for these services. | | | | |
| | | Term of Contract: | 10/01/2016 - 09/30/2018 | Contract # 18004 | | |

CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|------------------------------------|-------------|---|
| 36. | 550 | DEPARTMENT OF AGRICULTURE - PLANT INDUSTRY | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO DESERT RESEARCH INSTITUTE RESEARCH FOUNDATION | GENERAL | \$243,400 | |
| | Contract Description: | This is a new interlocal agreement to provide drought and water use monitoring in support of the State Drought Initiative. | | | | |
| | | Term of Contract: | 01/09/2018 - 06/30/2019 | Contract # 19413 | | |
| 37. | 656 | DEPARTMENT OF PUBLIC SAFETY – FIRE MARSHAL | FIRETREX, INC. | OTHER: TRANSFER FROM SERC AND NDEP | \$81,000 | |
| | Contract Description: | This is a new contract to provide for the implementation and support of a web-based Training and Credential Management System to manage and track the credentials and training records of individual fire department members in Nevada. Services include the purchase of the system, initialization of the system including historical data transfer, hosting services and ongoing system maintenance/support services. This contract is contingent upon approval of work program C39415. | | | | |
| | | Term of Contract: | 01/09/2018 - 02/07/2022 | Contract # 18869 | | |
| 38. | 702 | DEPARTMENT OF WILDLIFE | DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY | FEE: SPORTSMEN 25% FEDERAL 75% | \$1,500,000 | |
| | Contract Description: | This is the second amendment to the original interlocal agreement for prescribed burns and other services in an effort to preserve and maintain habitat and enhance conservation efforts. This amendment increases the maximum amount from \$500,000 to \$2,000,000 due to the increased need for these services. | | | | |
| | | Term of Contract: | 03/13/2015 - 03/31/2019 | Contract # 16494 | | |
| 39. | 901 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION | BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, LAS VEGAS SCHOOL OF MEDICINE | GENERAL 21.3% FEDERAL 78.7% | \$100,000 | |
| | Contract Description: | This is a new interlocal contract to provide applicant, or eligible client, services that include, but are not limited to: examination, consultation, diagnosis, treatment, therapy, anesthesia, medical facility fees and hospital or surgeon fees, with the intent of getting the applicant able to return to work activities. | | | | |
| | | Term of Contract: | 01/09/2018 - 09/30/2022 | Contract # 19490 | | |

CONTRACT SUMMARY

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|-------|-----------------------|---|---|--------------------------------|-----------|---|
| 40. | 901 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION | MARKET DECISIONS, LLC DBA MARKET DECISIONS RESEARCH | GENERAL 21.3% FEDERAL 78.7% | \$279,096 | |
| | Contract Description: | This is a new contract to provide consumer experience surveys, longitudinal analysis and proposed project innovation to determine customer satisfaction with services provided by the Division, and to assess basic needs of individuals with disabilities who seek employment. | | | | |
| | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19471 | | | |
| 41. | B008 | LICENSING BOARDS AND COMMISSIONS - PROFESSIONAL ENGINEERS AND LAND SURVEYORS | ALLISON MACKENZIE, LTD | FEES: LICENSING | \$465,000 | |
| | Contract Description: | This is a new contract to provide legal services to the Board. | | | | |
| | Term of Contract: | 01/09/2018 - 12/31/2020 | Contract # 19489 | | | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19504**

| | |
|---|---|
| Agency Name: GOVERNOR'S FINANCE OFFICE | Legal Entity Name: JFA ASSOCIATES DBA THE JFA INSTITUTE |
| Agency Code: 015 | Contractor Name: JFA ASSOCIATES DBA THE JFA INSTITUTE |
| Appropriation Unit: 1340-10 | Address: THE JFA INSTITUTE 720 KEARNEY ST DENVER , CO 80220-5326 |
| Is budget authority available?: Yes | City/State/Zip: DENVER , CO 80220-5326 |
| If "No" please explain: Not Applicable | Contact/Phone: Wendy Ware 303-399-3218 |
| | Vendor No.: T27021400 |
| | NV Business ID: NV20121464306 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

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

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

Agency Reference #: **015**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/15/2018**

Anticipated BOE meeting date **02/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/28/2020**

Contract term: **2 years and 13 days**

4. Type of contract: **Contract**

Contract description: **Prison Population**

5. Purpose of contract:

This is a new contract to provide projections of inmate and offender populations at specific intervals to coordinate with the various phases of the state's budget process.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$94,668.00**

Other basis for payment: \$30,231.00 per report x 3 = \$90,693.00 and \$1,325.00 to be paid at current GSA rate per report travel x 3 = \$3,975.00. Total = \$94,668.00 current term.

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 176.0129 the State of Nevada is required to contract for services to review sentences imposed in this State and the practices of the State Board of Parole Commissioners. The JFA Institute will project annually the number of persons who will be in a facility of the Department of Corrections, on probation, on parole and serving a term of residential confinement. Projections will be performed on April 5, October 5 and February 5, of each year of the contract to correspond to the State's budgetary time frames.

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

NRS 176.0129 stipulates that this work be performed by an independent contractor.

9. Were quotes or proposals solicited? **Yes**

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3508, and in accordance with NRS 333, the selected vendor was the only vendor to submit a proposal and the using agency did an internal review.

d. Last bid date: 10/24/2017 Anticipated re-bid date: 10/01/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

Nevada Dept. of Administration, Budget Division, 1994-2017
Nevada Dept. of Public Safety, Parole Division, 2017
Nevada Attorney General's Office, 2008,
They have been verified as 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 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 | bmacke1 | 11/30/2017 12:58:05 PM |
| Division Approval | pnicks | 12/04/2017 09:16:50 AM |
| Department Approval | pnicks | 12/04/2017 09:16:54 AM |
| Contract Manager Approval | bmacke1 | 12/04/2017 09:21:03 AM |
| Budget Analyst Approval | tgreenam | 12/06/2017 11:16:23 AM |
| BOE Agenda Approval | sbrown | 12/15/2017 10:05:37 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: 17414 | Amendment Number: 1 |
| Agency Name: ATTORNEY GENERAL'S OFFICE | Legal Entity Name: ASHCRAFT & BARR, LLP |
| Agency Code: 030 | Contractor Name: ASHCRAFT & BARR, LLP |
| Appropriation Unit: 1348-15 | Address: 2300 W. SAHARA AVE, STE 900 |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89102 |
| If "No" please explain: Not Applicable | Contact/Phone: JEFFREY F. BARR 702-631-7555 |
| | Vendor No.: |
| | NV Business ID: NV20131625877 |

To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % TORT CLAIM FUND |

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2016**
 Anticipated BOE meeting date: 01/2018
 Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2019**
 Contract term: **3 years and 361 days**

4. Type of contract: **Contract**
 Contract description: **Professional Service**

5. Purpose of contract:
This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00 | \$45,000.00 | Yes - Info |
| 2. Amount of current amendment (#1): | \$50,000.00 | \$50,000.00 | \$95,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$95,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?
The Attorney General has decided that it would be impracticable and uneconomical for attorneys in the office of the Attorney General litigating these cases alone to fully protect the State's interests. Therefore outside counsel is needed in this litigation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
Because of heavy workload on other important matters and specialized subject matter expertise required.

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | cschon1 | 11/30/2017 10:56:26 AM |
| Division Approval | cschon1 | 11/30/2017 10:56:28 AM |
| Department Approval | cschon1 | 11/30/2017 10:56:30 AM |
| Contract Manager Approval | cschon1 | 11/30/2017 10:56:33 AM |
| Budget Analyst Approval | myoun3 | 12/01/2017 11:07:35 AM |
| BOE Agenda Approval | myoun3 | 12/01/2017 11:08:32 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: 17444 | Amendment Number: 1 |
| Agency Name: ATTORNEY GENERAL'S OFFICE | Legal Entity Name: LEWIS BRISBOIS BISGAARD & SMITH, LLP |
| Agency Code: 030 | Contractor Name: LEWIS BRISBOIS BISGAARD & SMITH, LLP |
| Appropriation Unit: 1348-15 | Address: SMITH LLP |
| Is budget authority available?: Yes | 6385 S. RAINBOW BLVD STE 600 |
| If "No" please explain: Not Applicable | City/State/Zip: LAS VEGAS, NV 89118 |
| | Contact/Phone: ROBERT FREEMAN 702-693-1712 |
| | Vendor No.: T29037220 |
| | NV Business ID: NV20041000755 |

To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % TORT CLAIM FUND |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2016**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **12/31/2019**

Termination Date:

Contract term: **3 years and 361 days**

4. Type of contract: **Contract**

Contract description: **PROFESSIONAL SERVICE**

5. Purpose of contract:

This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections, since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00 | \$45,000.00 | Yes - Info |
| 2. Amount of current amendment (#1): | \$50,000.00 | \$50,000.00 | \$95,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$95,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Attorney General has decided that it would be impracticable and uneconomical for attorneys in the office of the Attorney General litigating these cases alone to fully protect the State's interests. Therefore outside counsel is needed in this litigation.

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

Because of heavy workload on other important matters and specialized subject matter expertise required

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | cschon1 | 11/27/2017 09:06:19 AM |
| Division Approval | cschon1 | 11/27/2017 09:06:22 AM |
| Department Approval | cschon1 | 11/27/2017 09:06:24 AM |
| Contract Manager Approval | cschon1 | 11/30/2017 15:46:44 PM |
| Budget Analyst Approval | myoun3 | 12/01/2017 10:46:26 AM |
| BOE Agenda Approval | myoun3 | 12/01/2017 10:46:32 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: **17383** Amendment Number: **1**

Agency Name: **ATTORNEY GENERAL'S OFFICE** Legal Entity Name: **MARQUIS AURBACH COFFING PC**

Agency Code: **030** Contractor Name: **MARQUIS AURBACH COFFING PC**

Appropriation Unit: **1348-15** Address: **10001 PARK RUN DR**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89145-8857**

If "No" please explain: **Not Applicable** Contact/Phone: **702/382-0711**

Vendor No.: **T81035998**

NV Business ID: **NV19721001853**

To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % TORT CLAIM FUND |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/05/2016**

Anticipated BOE meeting date: **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2019**

Contract term: **3 years and 361 days**

4. Type of contract: **Contract**

Contract description: **PROFESSIONAL SERVICE**

5. Purpose of contract:

This is the first amendment to the original contract which provides outside special counsel for the defense of legal proceedings filed against the State of Nevada, Department of Corrections, since a conflict of interest has arisen in the representation of the defendants. This amendment increases the maximum amount from \$45,000 to \$95,000 due to the ongoing need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00 | \$45,000.00 | Yes - Info |
| 2. Amount of current amendment (#1): | \$50,000.00 | \$50,000.00 | \$95,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$95,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Attorney General has decided that it would be impracticable and uneconomical for attorneys in the office of the Attorney General litigating these cases alone to fully protect the State's interests. Therefore outside counsel is needed in this litigation.

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

Because of heavy workload on other important matters and specialized subject matter expertise required

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | cschon1 | 11/29/2017 09:16:16 AM |
| Division Approval | cschon1 | 11/29/2017 09:16:18 AM |
| Department Approval | cschon1 | 11/29/2017 09:16:20 AM |
| Contract Manager Approval | cschon1 | 11/30/2017 15:46:35 PM |
| Budget Analyst Approval | myoun3 | 12/01/2017 10:57:10 AM |
| BOE Agenda Approval | myoun3 | 12/01/2017 10:57:13 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **15942** Amendment Number: **3**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **BRUCE KANE DBA BRUCES CARPET CLEANING**

Agency Code: **082** Contractor Name: **BRUCE KANE DBA BRUCES CARPET CLEANING**

Appropriation Unit: **1349-12** Address: **BRUCE'S CARPET CLEANING
769 MARSH RD**

Is budget authority available?: **Yes** City/State/Zip: **CARSON CITY, NV 89701-8634**

If "No" please explain: **Not Applicable** Contact/Phone: **775/882-1115**

Vendor No.: **T80923724**

NV Business ID: **NV20101688781**

To what State Fiscal Year(s) will the contract be charged? **2015-2019**

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

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building Rental Income |

Agency Reference #: **ASD #1669828**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2014**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **10/31/2018**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Carpet Cleaning Svc**

5. Purpose of contract:

This is the third amendment to the original contract which provides ongoing carpet cleaning service for state-owned buildings in the Carson City and Reno areas. This amendment increases the maximum amount from \$105,000 to \$130,000 due to higher than anticipated need for special services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00 | \$45,000.00 | Yes - Info |
| a. Amendment 1: | \$25,000.00 | \$25,000.00 | \$70,000.00 | Yes - Action |
| b. Amendment 2: | \$35,000.00 | \$35,000.00 | \$35,000.00 | Yes - Info |
| 2. Amount of current amendment (#3): | \$25,000.00 | \$25,000.00 | \$60,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$130,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Carpet in state buildings need to be kept clean and sanitary.

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

Lack of manpower

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

This is one of multiple carpet cleaning contractors on file with Buildings and Grounds. Per SAM 0338.0 each contractor will be contacted to submit bids for available jobs.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 12/05/2017 12:42:10 PM |
| Division Approval | ssands | 12/05/2017 12:42:14 PM |
| Department Approval | ssands | 12/05/2017 12:42:20 PM |
| Contract Manager Approval | ssands | 12/11/2017 08:13:18 AM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 09:26:37 AM |
| BOE Agenda Approval | myoun3 | 12/12/2017 08:03:34 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18003** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Contractor Name: **ROSEVILLE TERMITE AND PEST CONTROL DBA ADVANCE INTEGRATED PEST M**

Agency Code: **082** Address: **ADVANCE INTEGRATED PEST MNGNT**

Appropriation Unit: **1349-12** City/State/Zip: **418 La Costa Circle**

Is budget authority available?: **Yes** Contact/Phone: **Scott Conner 800-655-3993**

If "No" please explain: **Not Applicable** Vendor No.: **T32001814**

NV Business ID: **NV20101149905**

To what State Fiscal Year(s) will the contract be charged? **2017-2020**

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

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2016**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2020**

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

4. Type of contract: **Contract**

Contract description: **PEST CONTROL**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing pest control services for state buildings in the Carson City and Reno area. This amendment increases the maximum amount from \$47,000 to \$74,400 due to the need for higher than projected services which can be related to the unusually wet spring conditions experienced in the region.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$47,000.00 | \$47,000.00 | \$47,000.00 | Yes - Info |
| 2. Amount of current amendment (#1): | \$27,400.00 | \$27,400.00 | \$74,400.00 | Yes - Action |
| 3. New maximum contract amount: | \$74,400.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

This service is necessary in order to eliminate pests and insects for the health and safety of employees and visitors. Properties would be overrun by pests.

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

Beyond the expertise of Buildings and Grounds.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

This is one of multiple contracts for pest control services on file. Per SAM 0338.0 each contractor will be contacted to submit bids for available jobs.

d. Last bid date: 05/15/2016 Anticipated re-bid date: 05/15/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

PREVIOUS CONTRACTS WITH BUILDINGS AND GROUNDS AND THE WORK IS SATISFACTORY

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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 | ssands | 12/05/2017 12:39:48 PM |
| Division Approval | ssands | 12/05/2017 12:39:51 PM |
| Department Approval | ssands | 12/05/2017 12:39:55 PM |
| Contract Manager Approval | ssands | 12/05/2017 12:39:59 PM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 16:55:24 PM |
| BOE Agenda Approval | myoun3 | 12/12/2017 08:30:23 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18746** Amendment Number: **1**
 Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **WOW CLEANING CORPORATION**
 Agency Code: **082** Contractor Name: **WOW CLEANING CORPORATION**
 Appropriation Unit: **1349-12** Address: **2720 WRONDEL WAY SUITE A**
 Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89502**
 If "No" please explain: **Not Applicable** Contact/Phone: **775-322-4787**
 Vendor No.: **T27041430**
 NV Business ID: **NV2014128535**

To what State Fiscal Year(s) will the contract be charged? **2017-2021**

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

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building Rental Income |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/15/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **04/30/2021**

Contract term: **3 years and 351 days**

4. Type of contract: **Contract**

Contract description: **Flooring maintenance**

5. Purpose of contract:

This is the first amendment to the original contract which provides flooring/window cleaning and maintenance services for state-owned buildings in northern Nevada. This amendment increases the maximum amount from \$45,000 to \$70,000 due to increased demand for services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$45,000.00 | \$45,000.00 | \$45,000.00 | Yes - Info |
| 2. Amount of current amendment (#1): | \$25,000.00 | \$25,000.00 | \$70,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$70,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

This vendor will provide floor and window services needed for Buildings & Grounds.

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

B&G personnel does not have the expertise, equipment for services noted.

9. Were quotes or proposals solicited? **Yes**

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

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

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

This is one of multiple vendors for floor cleaning. Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 03/01/2017 Anticipated re-bid date: 03/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | amarangi | 12/05/2017 17:58:07 PM |
| Division Approval | amarangi | 12/05/2017 17:58:10 PM |
| Department Approval | amarangi | 12/05/2017 17:58:13 PM |
| Contract Manager Approval | amarangi | 12/05/2017 17:58:16 PM |
| Budget Analyst Approval | jrodrig9 | 12/07/2017 22:07:15 PM |
| BOE Agenda Approval | myoun3 | 12/08/2017 13:57:31 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19502**

| | |
|--|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1535-41 Is budget authority available?: Yes If "No" please explain: Not Applicable | Legal Entity Name: PETTY & ASSOCIATES, INC. Contractor Name: PETTY & ASSOCIATES, INC. Address: 1375 GREG ST SUITE 106 City/State/Zip: SPARKS, NV 89431-6077 Contact/Phone: 775-359-5777 Vendor No.: T80580350 NV Business ID: NV19841014622 |
|--|--|

To what State Fiscal Year(s) will the contract be charged? **2018-2021**
 What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111652

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
 Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**
 Contract term: **3 years and 172 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 Lake's Crossing - Air Handling Unit No. 2 (AH2) Replacement CIP project to include complete schematic, design, construction and bid documents as well as construction administration services for the replacement of the existing multi-zone air handler AH-2: CIP Project No. 17-M52; SPWD Contract No. 111652.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,900.00**
 Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Bassi, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/30/2017 10:19:34 AM |
| Division Approval | Imars1 | 11/30/2017 10:19:37 AM |
| Department Approval | Imars1 | 11/30/2017 10:19:40 AM |
| Contract Manager Approval | Imars1 | 11/30/2017 10:19:42 AM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 11:07:54 AM |
| BOE Agenda Approval | myoun3 | 12/04/2017 14:59:26 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19488**

| | | | |
|---------------------------------|--|--------------------|--|
| Agency Name: | ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: | FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING |
| Agency Code: | 082 | Contractor Name: | FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING |
| Appropriation Unit: | 1550-63 | Address: | dba FARR WEST ENGINEERING 5510 Longley Lane |
| Is budget authority available?: | Yes | City/State/Zip: | Reno, NV 89511 |
| If "No" please explain: | Not Applicable | Contact/Phone: | 775-851-4788 |
| | | Vendor No.: | T81102795A |
| | | NV Business ID: | NV20011242988 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111597

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 172 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract which provides professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP project, to include complete design and construction services for the installation of up to a 1.4 million gallon water tank, new tank layout, connection to Well #6 and the reconditioning of two existing water storage tanks: CIP Project No. 17-M29; SPWD Contract No. 111597.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$135,957.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

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

Not Applicable

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

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

Demonstrated the required expertise for work on this project.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Wacker, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:
Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 11/17/2017 12:18:58 PM |
| Division Approval | lmars1 | 11/17/2017 12:19:01 PM |
| Department Approval | lmars1 | 11/17/2017 12:19:04 PM |
| Contract Manager Approval | lmars1 | 11/17/2017 12:19:06 PM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 17:22:01 PM |
| BOE Agenda Approval | sbrown | 11/21/2017 15:40:44 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19526**

| | |
|--|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1550-56 Is budget authority available?: Yes If "No" please explain: Not Applicable | Legal Entity Name: VERUS ASSOCIATES NEVADA, LLC Contractor Name: VERUS ASSOCIATES NEVADA, LLC Address: 9210 Prototype Dr. Suite 101 City/State/Zip: Reno, NV 89521 Contact/Phone: 775-870-1004 Vendor No.: T29038999A NV Business ID: NV20161620968 |
|--|--|

To what State Fiscal Year(s) will the contract be charged? **2018-2021**
 What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111656

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
 Anticipated BOE meeting date 01/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**
 Contract term: **3 years and 172 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 Florence McClure Women's Correctional Center - Upgrade Door Controls and Security Camera Systems CIP project to include design, construction administration/programming services and associated documents to replace the current obsolete intercom system and control center for the facility with upgraded door controls, software, firmware and programmable logic controllers: CIP Project No. 17-M15: SPWD Contract No. 111656.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$502,501.00**
 Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

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:

Davidow, Cliff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 12/05/2017 12:09:31 PM |
| Division Approval | lmars1 | 12/05/2017 12:09:35 PM |
| Department Approval | lmars1 | 12/05/2017 12:09:38 PM |
| Contract Manager Approval | lmars1 | 12/05/2017 12:09:41 PM |
| Budget Analyst Approval | jrodrig9 | 12/07/2017 14:38:23 PM |
| BOE Agenda Approval | myoun3 | 12/08/2017 14:10:51 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: **19507**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: FRAME ARCHITECTURE, INC. |
| Agency Code: 082 | Contractor Name: FRAME ARCHITECTURE, INC. |
| Appropriation Unit: 1585-43 | Address: 4090 S MCCARRAN BLVD SUITE E |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89502-7529 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-827-9977 |
| | Vendor No.: T29014981 |
| | NV Business ID: NV20031302154 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: **111641**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 172 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 Laxalt Building - Roof Replacement CIP project to include design and construction documents, as well as construction administration services to remove and replace the existing roof system with a new metal roofing system: CIP Project No. 17-S01-8; SPWD Contract No. 111641.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$74,500.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

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

Not Applicable

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

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

Demonstrated the required expertise for work on this project.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | Imars1 | 11/30/2017 10:13:45 AM |
| Division Approval | Imars1 | 11/30/2017 10:13:48 AM |
| Department Approval | Imars1 | 11/30/2017 10:13:51 AM |
| Contract Manager Approval | Imars1 | 11/30/2017 10:13:53 AM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 23:05:38 PM |
| BOE Agenda Approval | myoun3 | 12/06/2017 11:12:40 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: **19512**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: RAYMOND P. CROOK DBA RPC ROOF CONSULTING |
| Agency Code: 082 | Contractor Name: RAYMOND P. CROOK DBA RPC ROOF CONSULTING |
| Appropriation Unit: 1585-43 | Address: dba RPC ROOF CONSULTING 14370 MOUNT SNOW DR. RENO, NV 89511-9185 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-9185 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-336-9396 |
| | Vendor No.: T29013770 |
| | NV Business ID: NV20101198067 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 % |

2. Contract start date:

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

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 180 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Lovelock Correctional Center roof replacement CIP project to include design, construction administration, development of bid documents, roof inspection services and a final roof inspection report for buildings 2 and 3: CIP Project No. 17-S01-2; SPWD Contract No. 111657.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$68,550.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

Lutz, Andrew, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 11/30/2017 15:15:45 PM |
| Division Approval | lmars1 | 11/30/2017 15:15:48 PM |
| Department Approval | lmars1 | 11/30/2017 15:15:50 PM |
| Contract Manager Approval | lmars1 | 11/30/2017 15:15:53 PM |
| Budget Analyst Approval | jrodrig9 | 12/07/2017 17:02:46 PM |
| BOE Agenda Approval | myoun3 | 12/08/2017 14:03:47 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19515**

| | |
|--|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1591-28 Is budget authority available?: Yes If "No" please explain: Not Applicable | Legal Entity Name: MELROY ENGINEERING, INC. DBA MSA ENGINEERING CONSULT Contractor Name: MELROY ENGINEERING, INC. DBA MSA ENGINEERING CONSULT Address: DBA MSA ENGINEERING CONSULTANT 4599 LONGLEY LANE RENO, NV 89502 Contact/Phone: TONY PRICE 775-828-4889 Vendor No.: NV Business ID: NV19971093631 |
|--|---|

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111707

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
 Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**
 Contract term: **3 years and 172 days**

4. Type of contract: **Contract**
 Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional mechanical/electrical design and construction administration services for the Elko Interagency Dispatch Center - HVAC System Renovation CIP project to include design and construction documents to replace the central plant equipment, coil units and temperature control system: CIP Project No. 17-M54; SPWD Contract No. 111504.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$61,500.00**
 Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

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

Professional mechanical and electrical services are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Brian Bassi, Project Manager Ph: 775-684-4109

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | amarangi | 11/30/2017 16:30:58 PM |
| Division Approval | amarangi | 11/30/2017 16:31:00 PM |
| Department Approval | amarangi | 11/30/2017 16:31:21 PM |
| Contract Manager Approval | amarangi | 11/30/2017 16:31:24 PM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 23:17:34 PM |
| BOE Agenda Approval | myoun3 | 12/05/2017 13:43:47 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19514**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: SAAREM CONSULTING ENGINEERS, LLC |
| Agency Code: 082 | Contractor Name: SAAREM CONSULTING ENGINEERS, LLC |
| Appropriation Unit: 1591-27 | Address: 2188 ALFRED WAY |
| Is budget authority available?: Yes | City/State/Zip: CARSON CITY, NV 89703-7128 |
| 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? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111663

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 172 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 Division of Forestry's Sierra Front Interagency Dispatch Center - HVAC System Renovation CIP project to include mechanical and electrical documents/specifications as well as construction administration, bid support and inspection services to replace the central plant equipment, coil units and temperature control system: CIP Project No. 17-M37; SPWD Contract No. 111663.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$59,500.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 CIP.

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

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Bassi, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/30/2017 13:42:16 PM |
| Division Approval | Imars1 | 11/30/2017 13:42:19 PM |
| Department Approval | Imars1 | 11/30/2017 13:42:21 PM |
| Contract Manager Approval | Imars1 | 11/30/2017 13:42:23 PM |
| Budget Analyst Approval | jrodrig9 | 12/07/2017 17:32:48 PM |
| BOE Agenda Approval | myoun3 | 12/08/2017 14:00:09 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19516**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: SHAW ENGINEERING, LTD |
| Agency Code: 082 | Contractor Name: SHAW ENGINEERING, LTD |
| Appropriation Unit: 1591-29 | Address: 20 VINE ST. |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89503-5520 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-329-5559 |
| | Vendor No.: T29002238 |
| | NV Business ID: NV19951060977 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 | 25.00 % |
| Highway Funds | 0.00 % | X Other funding | 75.00 % Agency Funds - Federal Grant |

Agency Reference #: 111661

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 172 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 Mason Valley Wildlife Management Area Headquarters - Domestic Water Well CIP project to include schematic, design, construction and bid documents, as well as construction administration services, for the construction of an additional domestic water well and the reconstruction of the existing site water system to provide distinct potable and non-potable water delivery systems: CIP Project No. 17-M75; SPWD Contract No. 111661.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$70,990.00**

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

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 CIP.

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

Professional Architectural/Engineering provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

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

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

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

Not Applicable

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

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Wacker, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 11/30/2017 14:35:30 PM |
| Division Approval | lmars1 | 11/30/2017 14:35:32 PM |
| Department Approval | lmars1 | 11/30/2017 14:35:34 PM |
| Contract Manager Approval | lmars1 | 11/30/2017 14:35:38 PM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 21:38:43 PM |
| BOE Agenda Approval | myoun3 | 12/06/2017 11:15:08 AM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19540**

| | |
|--|--|
| Agency Name: ADMIN - ENTERPRISE IT SERVICES | Legal Entity Name: EMC Corporation |
| Agency Code: 180 | Contractor Name: EMC Corporation |
| Appropriation Unit: 1385-26 | Address: 176 South Street |
| Is budget authority available?: Yes | City/State/Zip: Hopkinton, MA 01748 |
| If "No" please explain: Not Applicable | Contact/Phone: Kendall Holback 775-622-7429 |
| | Vendor No.: |
| | NV Business ID: NV20001201518 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2023 |

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2022**

Contract term: **4 years and 203 days**

4. Type of contract: **Contract**

Contract description: **Storage Equip. Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing implementation and installation services for the Dell and EMC storage hardware and systems that house customers' databases and applications.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Failure to acquire these services timely would expose the State of Nevada to failures of the servers that house customers' databases and applications. In the event of system failure, Enterprise IT Services would have to restore email, databases, and applications therefore causing unexpected downtime. The unexpected down time could prevent the Dept of Public Safety, as well as others, from readily accessing their data, including warrant and criminal history information; thus, putting all law enforcement personnel in danger.

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

Lack the expertise.

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

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

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 171202

Approval Date: 12/13/2017

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

State IT experts have determined that for technical reasons, only Dell/EMC can install their equipment to maintain warranty, lease agreements, and all other subsequent legal agreements.

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

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Shannon Rahming, CIO Ph: 775-684-5899

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | amarangi | 12/13/2017 15:19:20 PM |
| Division Approval | amarangi | 12/13/2017 15:19:22 PM |
| Department Approval | amarangi | 12/13/2017 15:19:25 PM |
| Contract Manager Approval | amarangi | 12/13/2017 15:19:28 PM |
| EITS Approval | lolso3 | 12/13/2017 16:14:32 PM |
| Budget Analyst Approval | cmurph3 | 12/18/2017 09:16:25 AM |
| BOE Agenda Approval | cmurph3 | 12/18/2017 09:16:27 AM |
| BOE Final Approval | Pending | |

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

| | |
|-----------------------------|--------|
| Purchasing Use Only: | |
| Approval#: | 171202 |

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

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

| | | | |
|---|--|-------------------------------|--------------------------------|
| Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below: | | | |
| State Agency: | | <i>Enterprise IT Services</i> | |
| 1a | <i>Contact Name and Title</i> | <i>Phone Number</i> | <i>Email Address</i> |
| | <i>Sean Montierth, IT Manager II</i> | <i>775-684-4313</i> | <i>smontierth@admin.nv.gov</i> |
| | <i>Alexa Marangi, Management Analyst I</i> | <i>775-684-0241</i> | <i>aemarangi@admin.nv.gov</i> |

| | |
|----------------------------|--|
| Vendor Information: | |
| Identify Vendor: | <i>EMC Corporation/DELL</i> |
| Contact Name: | <i>Kendall Holback</i> |
| Address: | <i>176 South Street, Hopkinton, MA 01748</i> |
| Telephone Number: | <i>(775) 622-7429</i> |
| Email Address: | <i>Kendall.holback@dell.com</i> |

| | |
|---|--|
| Type of Waiver Requested – Check the appropriate type: | |
| 1c | Sole or Single Source: <input checked="" type="checkbox"/> X |
| | Professional Service Exemption: <input type="checkbox"/> |

| | | | | |
|------------------------------|-------------------------|-----|---------------------------------------|----|
| Contract Information: | | | | |
| 1d | Is this a new Contract? | Yes | <input checked="" type="checkbox"/> X | No |
| | Amendment: | | | |
| | CETS: | | | |

| | |
|--------------|--|
| Term: | |
| 1e | One (1) Time Purchase: <input type="checkbox"/> |
| | Contract: Start Date: <i>01/01/2018</i> End Date: <i>7/31/2022</i> |

| | | |
|-----------------|---------------------|-------------|
| Funding: | | |
| 1f | State Appropriated: | <i>100%</i> |
| | Federal Funds: | |
| | Grant Funds: | |
| | Other (Explain): | |

| | |
|-----------|---|
| 1g | Total Estimated Value of this Service Contract, Amendment or Purchase: |
| | <i>Not to exceed \$2,000,000.00</i> |

| | |
|---|---|
| 2 | Provide a description of work/services to be performed or commodity/good to be purchased: |
| | <i>This is for the services to complete implementation of EITS new operating lease of Dell/EMC VXRail Hyper converge Open System Storage & Compute Equipment.</i> |

| | |
|---|---|
| 3 | What are the unique features/qualifications required for this service or good that are not available from any other vendor: |
| | <i>For technical reasons, only Dell/EMC is allowed to install their equipment to maintain warranty, lease agreements, and all other subsequent legal agreements; therefore, only Dell/EMC services can assist EITS in getting these new systems up and running.</i> |

| | |
|---|---|
| 4 | Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source: |
| | <i>Enterprise IT Services has made a significant investment (\$2.9MIL to date) in the leasing of Dell/EMC Equipment. Both the existing legacy system and pilot hyper converged system components are comprised of all Dell/EMC hardware. State IT experts have determined that only Dell/EMC equipment and services will work in the existing system. To not allow the services to go through would be fiscally irresponsible with the investment in the new equipment.</i> |

| | |
|---|---|
| 5 | Were alternative services or commodities evaluated? Check One. Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> |
| | a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i> |
| | b. <i>If not, why were alternatives not evaluated?</i> |
| | <i>Dell/EMC is the only service provider available to facilitate the equipment purchases completed by the State of Nevada. The services were previously provided directly by Dell; however, now that Dell has merged with EMC a separate contract is required to retain these services by Dell/EMC.</i> |

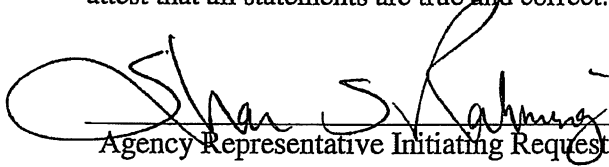
| | | | | | | |
|----------|---|--------------|--------------------------------|--|---|--|
| 6 | Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request. | | | Yes: <input checked="" type="checkbox"/> | No: <input type="checkbox"/> | |
| | a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i> | | | | | |
| | <i>Term</i> | | <i>Value</i> | <i>Short Description</i> | <i>Type of Procurement (RFP#, RFQ#, Waiver #)</i> | |
| | <i>Start and End Dates</i> | | | | | |
| | 01/01/18 | 01/01/22 | \$1.24MIL | VXRail System (hardware) | Waiver #130710F | |
| | 08/15/14 | 03/31/18 | \$1,933,256 | Switches and Server Hardware | Waiver #130710A-E | |
| 08/01/13 | 07/31/17 | \$968,496.51 | Initial storage hardware lease | Waiver #130710 | | |
| | | | | | | |
| | | | | | | |

| | |
|---|---|
| 7 | What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid? |
| | <i>Failure to acquire these services timely would expose the State of Nevada to failures of the servers that house customer's databases and applications. In the event of a system failure, Enterprise IT Services would have to restore the email, databases and applications, causing unexpected downtime which could prevent the Dept of Public Safety, as well as others, from readily accessing their data, including warrant and criminal history information; thus, putting all law enforcement personnel in danger.</i> |

| | |
|---|---|
| 8 | What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable? |
| | <i>For technical reasons, only Dell/EMC is allowed to install their equipment to maintain warranty, lease agreements, and all other subsequent legal agreements; therefore, only Dell/EMC services can assist EITS in getting these new systems up and running.</i> |

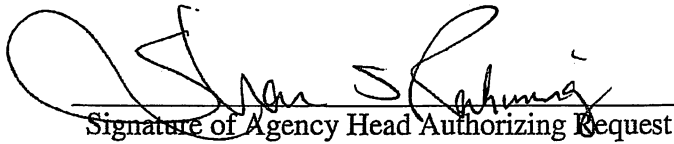
| | | | | | |
|---|---|------|---|-----|--|
| 9 | Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u> | Yes: | X | No: | |
| | a. <i>If yes, please provide details regarding future obligations or needs.</i> | | | | |
| | <i>Equipment end-of-life, end of support, and potential expansion requirements will indeed obligate the State for future services.</i> | | | | |

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


Agency Representative Initiating Request

Shannon Rahming
Print Name of Agency Representative Initiating Request

12/12/17
Date


Signature of Agency Head Authorizing Request

Shannon Rahming
Print Name of Agency Head Authorizing Request

12/12/17
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. **This signature does not exempt your agency from any other processes that may be required.**

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

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

Signed.

Administrator, Purchasing Division or Designee

12-13-2017
Date

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19478**

| | | | |
|---------------------------------|--------------------------------------|--------------------|--|
| Agency Name: | NDE - DEPARTMENT OF EDUCATION | Legal Entity Name: | ACS Ventures, LLC DBA PMB 433 |
| Agency Code: | 300 | Contractor Name: | ACS Ventures, LLC DBA PMB 433 |
| Appropriation Unit: | 2612-31 | Address: | 11035 Lavender Hill Dr. Suite 160-433 |
| Is budget authority available?: | Yes | City/State/Zip: | Las Vegas, NV 89135 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Chad W. Buckendahl, Ph.D. 702-770-0085 |
| | | Vendor No.: | T27038916 |
| | | NV Business ID: | NV20151757910 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

This vendor was selected through RFP2098 to conduct external evaluations for various education programs implemented in the 2015 Legislative Session. The funding to extend this contract work was added in the 2017 Legislative Session. The department missed the deadline to amend the contract to extend for two more years and add the new funding. We are requesting retroactive approval on the new contract, so the department will be in compliance with conducting external evaluations for the biennium.

3. Termination Date: **06/30/2019**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **External Evaluation**

5. Purpose of contract:

This is a new contract to continue to provide ongoing outcome-based evaluations for the Zoom, Victory School, Read by Grade Three, Underperforming Schools Turnaround, Social Worker Grants to Schools and Nevada Ready 21 Technology programs and the Great Teaching and Leading fund.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$420,000.00**

Payment for services will be made at the rate of \$210,000.00 per fiscal year

Other basis for payment: upon receipt of detailed invoices

II. JUSTIFICATION

7. What conditions require that this work be done?

The 2017 Legislature approved funding for these seven programs to have external evaluations.

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

The 2017 Legislature approved funding for these seven programs to have external evaluations.

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):

Thomas P Miller & Associates
Prismatic Services Inc
American Institutes for Research

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #2098, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 12/28/2015 Anticipated re-bid date: 11/30/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Department of Education #17536 4/12/16-6/30/17 - work has been satisfactory

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Steve Canavero, Superintendent Ph: 775-687-9224

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | amccalla | 12/04/2017 07:56:40 AM |
| Division Approval | amccalla | 12/04/2017 07:56:42 AM |
| Department Approval | amccalla | 12/04/2017 07:56:45 AM |
| Contract Manager Approval | ablackwe | 12/05/2017 07:33:53 AM |
| Budget Analyst Approval | knielsen | 12/07/2017 11:19:15 AM |
| BOE Agenda Approval | sbrown | 12/15/2017 10:07:38 AM |
| BOE Final Approval | Pending | |

BRIAN SANDOVAL
Governor

STATE OF NEVADA

SOUTHERN NEVADA OFFICE
9890 S. Maryland Parkway, Suite 221
Las Vegas, Nevada 89183
(702) 486-6458
Fax: (702)486-6450
www.doe.nv.gov/Educator_Licensure

STEVE CANAVERO, Ph.D.
Superintendent of Public Instruction



DEPARTMENT OF EDUCATION
700 E. Fifth Street
Carson City, Nevada 89701-5096
(775) 687 - 9200 · Fax: (775) 687 - 9101
<http://www.doe.nv.gov>

October 13, 2017

MEMORANDUM

TO: James Wells
Clerk of the Board of Examiners
Governor's Finance Office – Budget Division

THROUGH: Susan Brown
Budget Analyst, Governor's Finance Office – Budget Division

FROM: Andrea McCalla *AM*
Administrative Services Officer 3, Business and Support Services Division

SUBJECT: Request for Retroactive Contract with ACS Ventures, LLC

This memorandum serves as a request for retroactive approval to July 1, 2017 on a contract with ACS Ventures, LLC. This vendor was selected through RFP 2098 to conduct external evaluations for various education programs implemented in the 2015 Legislative Session. The funding to extend this contract work was added in the 2017 Legislative Session. The department missed the deadline to amend the contract to extend for two more years and add the new funding. We are hereby requesting retroactive approval on the new contract, so the department will be in compliance with conducting external evaluations for the current biennium.

We appreciate your consideration in this matter.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19487**

| | | | |
|---------------------------------|--------------------------------------|--------------------|---|
| Agency Name: | NDE - DEPARTMENT OF EDUCATION | Legal Entity Name: | Augenblick, Palaich and Associates, Inc. |
| Agency Code: | 300 | Contractor Name: | Augenblick, Palaich and Associates, Inc. |
| Appropriation Unit: | 2673-45 | Address: | 1547 Gaylord Street |
| Is budget authority available?: | Yes | City/State/Zip: | Denver, CO 80206 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Justin Silverstein 720.227.0075 |
| | | Vendor No.: | T27041969 |
| | | NV Business ID: | NV20171752082 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
 Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2019**
 Contract term: **1 year and 22 days**

4. Type of contract: **Contract**
 Contract description: **School Fund Consult**

5. Purpose of contract:

This is a new contract to provide school funding consultant services for the Department pursuant to SB 178, Sections 13-14, of the 2017 Legislative Session. The vendor will review existing studies and reports relevant to the topic, engage in study and make recommendations necessary and appropriate on issues related to the funding of public education in Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$195,000.00**
 Other basis for payment: upon receipt of detailed invoices

II. JUSTIFICATION

7. What conditions require that this work be done?

The Department of Education requires a vendor to provide School Funding Consultant Services per SB 178 of the 2017 Legislative Session.

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

This is a specialized project.

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):

American Institute for Research
Ed Build
Cross and Joftus

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP # 3489, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 09/05/2017 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

Steve Canavero, Superintendent Ph: 775-687-9200

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | amccalla | 11/17/2017 12:07:47 PM |
| Division Approval | amccalla | 11/17/2017 12:07:50 PM |
| Department Approval | amccalla | 11/17/2017 12:07:52 PM |
| Contract Manager Approval | ablackwe | 11/29/2017 10:39:16 AM |
| Budget Analyst Approval | knielsen | 12/05/2017 16:55:34 PM |
| BOE Agenda Approval | myoun3 | 12/08/2017 12:14:58 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19523**

| | | | |
|---------------------------------|--|--------------------|-----------------------------|
| Agency Name: | DTCA - MUSEUMS AND HISTORY DIVISION | Legal Entity Name: | Rail Explorers, INC. |
| Agency Code: | 331 | Contractor Name: | Rail Explorers, INC. |
| Appropriation Unit: | 4216-00 | Address: | 1 Alexander Rd |
| Is budget authority available?: | Yes | City/State/Zip: | Portsmouth, RI 02871 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Mary Joy Lu 9179223934 |
| | | Vendor No.: | |
| | | NV Business ID: | NV20171769241 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2020**Contract term: **2 years and 111 days**4. Type of contract: **Revenue Contract**Contract description: **Rail Explorers-BC**

5. Purpose of contract:

This is a new revenue contract to collect train ride fees for special event, third party rental of the Nevada State Railroad Museum facilities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$143,100.00**

Payment for services will be made at the rate of \$135.00 per Each Train Excursion

II. JUSTIFICATION

7. What conditions require that this work be done?

Collaboration between the Nevada State Railroad Museum Boulder City and Rail Explorers will provide considerable benefit to both entities. By permitting rail Explorers to operate alongside the NSRMBC the museum will experience increased revenue anticipated to cover the costs of train operation, increased foot traffic and general visitation to the museum, massive media exposure for the museum, and will elevate the public awareness of and interest in the museum, leading to more volunteers and greater involvement in museum events and increased visitor numbers throughout the year.

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

State employees and State resources do not exist to provide the experience Rail Explorers wants to provide through the use of the NSRMBC railway and train equipment.

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Randall Hees, Museum Director Ph: 702-486-5952

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | cedlefse | 12/05/2017 07:39:57 AM |
| Division Approval | cedlefse | 12/05/2017 07:40:00 AM |
| Department Approval | amathies | 12/05/2017 11:00:28 AM |
| Contract Manager Approval | cedlefse | 12/05/2017 11:01:44 AM |
| Budget Analyst Approval | laaron | 12/14/2017 13:35:58 PM |
| BOE Agenda Approval | lfree1 | 12/14/2017 16:54:42 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19470**

| | | | |
|---------------------------------|--|--------------------|---------------------------------------|
| Agency Name: | DHHS - AGING AND DISABILITY SERVICES DIVISION | Legal Entity Name: | PALCO, INC. |
| Agency Code: | 402 | Contractor Name: | PALCO, INC. |
| Appropriation Unit: | 3167-11 | Address: | 17300 Chenal Parkway, Ste. 300 |
| Is budget authority available?: | Yes | City/State/Zip: | Little Rock, AR 72223 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Alicia Paladino 501-604-9936 |
| | | Vendor No.: | T320026897 |
| | | NV Business ID: | NV20131682265 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

| | | | | |
|-------------------------------------|---------------|----------------|---------------|--------|
| <input checked="" type="checkbox"/> | General Funds | 82.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> | Federal Funds | 18.00 % | Bonds | 0.00 % |
| | Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: RFP #3459

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2018**

Anticipated BOE meeting date 02/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **03/31/2019**

Contract term: **364 days**

4. Type of contract: **Contract**

Contract description: **Fiscal Intermediary**

5. Purpose of contract:

This is a new contract which provides ongoing fiscal management services for children whose families/guardians choose to direct their own services and support through the state-funded, self-directed program and to veterans who qualify for the veteran-directed home and community based services offered through the Aging and Disability Resource Center program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,750,000.00**

Other basis for payment: \$42.00 per member per month. Within 45-60 days of receipt and upon review and acceptance by the agency.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State requires a fiscal intermediary service to manage the State-Funded, Self-Directed program.

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

The State does not have the personnel or expertise to provide this service.

9. Were quotes or proposals solicited? **Yes**

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

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

Consumer Direct Care Network Nevada
Palco, Inc.
GT Independence

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3459, 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: 07/10/2017 Anticipated re-bid date: 07/09/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

ADSD, 4/1/14 - current, Satisfactory

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dbowma1 | 11/14/2017 11:24:42 AM |
| Division Approval | dbowma1 | 11/14/2017 11:24:45 AM |
| Department Approval | vmilazz1 | 12/01/2017 08:28:56 AM |
| Contract Manager Approval | ltuttl1 | 12/01/2017 14:14:05 PM |
| Budget Analyst Approval | bwooldri | 12/08/2017 11:25:56 AM |
| BOE Agenda Approval | nhovden | 12/11/2017 15:03:03 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: **19171**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | DHHS - HEALTH CARE FINANCING & POLICY | Legal Entity Name: | Board of Regents, University of Nevada Reno School of Medicine |
| Agency Code: | 403 | Contractor Name: | Board of Regents, University of Nevada Reno School of Medicine |
| Appropriation Unit: | 3157-00 | Address: | Pennington Medical Education Bldg. 332 |
| Is budget authority available?: | Yes | City/State/Zip: | Reno, NV 89557 |
| If "No" please explain: | Not Applicable | Contact/Phone: | 775-784-6001 |
| | | Vendor No.: | |
| | | NV Business ID: | Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

This contract requires a retroactive start date due to negotiations between the University and the State.

3. Termination Date: **06/30/2022**

Contract term: **5 years**

4. Type of contract: **Revenue Contract**

Contract description: **UNSOM GME**

5. Purpose of contract:

This is a new revenue interlocal agreement to receive funds to support and fund the non-federal share of the supplemental Graduate Medical Education program for non-state government owned or operated teaching hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,548,688.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmentally owned or operated hospitals. This agreement provides for receipt of 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:

State employees are doing this work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 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. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Several contracts with satisfactory performance.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: 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 | aree2 | 08/29/2017 14:51:53 PM |
| Division Approval | ecreceli | 11/17/2017 09:29:14 AM |
| Department Approval | vmilazz1 | 12/01/2017 10:32:32 AM |
| Contract Manager Approval | jkolenut | 12/06/2017 15:26:37 PM |
| Budget Analyst Approval | bwooldri | 12/06/2017 15:34:21 PM |
| BOE Agenda Approval | nhovden | 12/11/2017 13:12:58 PM |
| BOE Final Approval | Pending | |

BRIAN SANDOVAL
Governor




RICHARD WHITLEY, MS
Director

MARTA JENSEN
Acting Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY
1100 East William Street, Suite 101
Carson City, Nevada 89701
Telephone (775) 684-3676 • Fax (775) 687-3893
<http://dhcfp.nv.gov>

MEMORANDUM

Date: December 1, 2017
TO: Nikki Hovden, Executive Branch Budget Officer 2
FROM: Jason Kolenut, ASO 3 
RE: University of Nevada School of Medicine

This memorandum requests that the above subject contract be approved for a retroactive start date effective July 1, 2017. The contract was delayed due to negotiations between the University of Nevada of Medicine and the State.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17569** Amendment Number: **1**

Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Legal Entity Name: **Board of Trustees for Fund for Hospital Care to Indigent Persons**

Agency Code: **403** Contractor Name: **Board of Trustees for Fund for Hospital Care to Indigent Persons**

Appropriation Unit: **3157-00** Address: **304 S. Minnesota Street**

Is budget authority available?: **Yes** City/State/Zip: **Carson City , NV 89701**

If "No" please explain: **Not Applicable** Contact/Phone: **775-883-7863**

Vendor No.:
NV Business ID: **Governmental Entity**

To what State Fiscal Year(s) will the contract be charged? **2017-2022**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2016**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **6 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **IAF sup payments**

5. Purpose of contract:

This is the first amendment to the original revenue interlocal agreement which provides ongoing access to inpatient hospital services for needy individuals. The Contractor agrees to voluntarily transfer an amount equal to the reduction in state savings received in the inpatient, non-state governmental-owned hospital upper payment limit supplemental payment due to any increase in the Indigent Accident Fund state share. This amendment extends the termination date from June 30, 2019 to June 30, 2022 and increases the maximum amount from \$3,100,000 to \$6,200,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$3,100,000.00 | \$3,100,000.00 | \$3,100,000.00 | Yes - Action |
| 2. Amount of current amendment (#1): | \$3,100,000.00 | \$3,100,000.00 | \$3,100,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$6,200,000.00 | | | |
| and/or the termination date of the original contract has changed to: | 06/30/2022 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 428.206 the Fund for Hospital Care to Indigent Persons, Board of Trustees and the Department of Health and Human Services, Division of Health Care Financing and Policy are entering into this agreement to provide supplemental payments to hospitals for inpatient hospital care provided to Medicaid recipients.

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

This is a revenue contract.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 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. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 engaged under contract with DHCFP 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 | cmoriart | 10/10/2017 13:15:35 PM |
| Division Approval | jkolenut | 10/19/2017 15:56:44 PM |
| Department Approval | vmilazz1 | 11/17/2017 08:40:01 AM |
| Contract Manager Approval | cmoriart | 11/21/2017 08:21:13 AM |
| Budget Analyst Approval | bwooldri | 12/08/2017 09:54:33 AM |
| BOE Agenda Approval | nhovden | 12/11/2017 13:04:35 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18051** Amendment Number: **1**
 Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Legal Entity Name: **Cognosante Consulting, LLC**
 Agency Code: **403** Contractor Name: **Cognosante Consulting, LLC**
 Appropriation Unit: **3158-61** Address: **8200 Greensboro Drive Suite 1200**
 Is budget authority available?: **Yes** City/State/Zip: **McLean, VA 22102**
 If "No" please explain: **Not Applicable** Contact/Phone: **Tom Matason 703-206-6051**
 Vendor No.:
 NV Business ID: **NV20161464503**

To what State Fiscal Year(s) will the contract be charged? **2017-2021**

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

| | | | | |
|-------------------------------------|---------------|----------------|---------------|--------|
| <input checked="" type="checkbox"/> | General Funds | 10.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> | Federal Funds | 90.00 % | Bonds | 0.00 % |
| | Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/13/2016**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **03/31/2019**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **IV&V for MMIS Proj**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing independent verification and validation services for the design, development and implementation phase of the Medicaid Management Information Systems Modernization Project. This amendment extends the termination date from March 31, 2019 to September 13, 2020 and increases the maximum amount from \$2,993,806 to \$6,282,423 due to revisions to the request for proposal and additions to the scope of work.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$2,993,806.00 | \$2,993,806.00 | \$2,993,806.00 | Yes - Action |
| 2. Amount of current amendment (#1): | \$3,288,617.00 | \$3,288,617.00 | \$3,288,617.00 | Yes - Action |
| 3. New maximum contract amount: | \$6,282,423.00 | | | |
| and/or the termination date of the original contract has changed to: | 09/13/2020 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Centers for Medicare and Medicaid Services (CMS) is requiring that the Division of Health Care Financing and Policy (DHCFP) contract with an Independent Verification and Validation service contractor for the Medicaid Management Information System (MMIS) modernization/core replacement project.

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

There are no state employees with the expertise to perform the services required by CMS.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3235, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently-appointed evaluation committee.

d. Last bid date: 04/25/2016 Anticipated re-bid date: 03/31/2019

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

June 2008 - March 2009 with the DHCFP 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 | cmoriart | 11/21/2017 14:13:02 PM |
| Division Approval | ecreceli | 11/27/2017 11:17:02 AM |
| Department Approval | vmilazz1 | 11/30/2017 15:17:50 PM |
| Contract Manager Approval | jkolenut | 12/06/2017 15:30:59 PM |

EITS Approval
Budget Analyst Approval
BOE Agenda Approval

lolso3
bwooldri
nhovden

12/13/2017 13:47:14 PM
12/18/2017 07:31:06 AM
12/18/2017 10:33:51 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | |
|---|---|
| 1. Contract Number: 14866 | Amendment Number: 4 |
| Agency Name: DHHS - HEALTH CARE FINANCING & POLICY | Legal Entity Name: PUBLIC KNOWLEDGE, LLC |
| Agency Code: 403 | Contractor Name: PUBLIC KNOWLEDGE, LLC |
| Appropriation Unit: 3158-60 | Address: 1911 SW CAMPUS DR STE 457 |
| Is budget authority available?: Yes | City/State/Zip: FEDERAL WAY, WA 98023-6473 |
| If "No" please explain: Not Applicable | Contact/Phone: 208/890-0433 |
| | Vendor No.: T27022922 |
| | NV Business ID: NV20091086529 |

To what State Fiscal Year(s) will the contract be charged? **2014-2021**

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

| | | | | |
|-------------------------------------|---------------|---------|---------------|--------|
| <input checked="" type="checkbox"/> | General Funds | 10.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> | Federal Funds | 90.00 % | Bonds | 0.00 % |
| | Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: **RFP #2049 - LD**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/08/2013**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/31/2018**

Contract term: **6 years and 329 days**

4. Type of contract: **Contract**

Contract description: **MMIS Replacement**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides Medicaid Management Information System (MMIS) Replacement Planning to improve the administration of the Medicaid program by: adopting data and industry standards; promoting reusable components through standard interfaces and modularity; supporting interoperability and integration using open architecture and data standards; and supporting the integration of clinical and administrative data to enable better decision making. This amendment adds attachment FF-Nevada MMIS Modernization Amendment Task Plan-v1.0 and GG-Nevada Electronic Visit Verification Amendment Task Plan-v3.0, extends the termination date from August 31, 2018 to August 31, 2020 and increases the maximum amount from \$5,449,640 to \$10,087,220 due to increased scope of work.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | |
|---|-----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$5,449,640.00 | \$5,449,640.00 | \$5,449,640.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| b. Amendment 2: | \$0.00 | \$0.00 | \$0.00 | No |
| c. Amendment 3: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#4): | \$4,637,580.00 | \$4,637,580.00 | \$4,637,580.00 | Yes - Action |
| 3. New maximum contract amount: | \$10,087,220.00 | | | |

and/or the termination date of
the original contract has
changed to:

08/31/2020

II. JUSTIFICATION

7. What conditions require that this work be done?

The services provided by this contractor will assist the State in the Medicaid Management Information System (MMIS) Replacement Planning process and if approved, with the Project Management Activities for Phase III.

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

State employees do not have the resources or expertise to provide this service.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Division of Health Care Financing and Policy. Vendor's services were satisfactory.

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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 | cmoriart | 11/21/2017 13:50:37 PM |
| Division Approval | ecreceli | 11/27/2017 11:45:53 AM |
| Department Approval | vmilazz1 | 11/30/2017 15:08:10 PM |
| Contract Manager Approval | jkolenut | 12/08/2017 16:11:57 PM |
| EITS Approval | lolso3 | 12/13/2017 13:46:08 PM |
| Budget Analyst Approval | bwooldri | 12/18/2017 07:27:18 AM |
| BOE Agenda Approval | nhovden | 12/18/2017 10:35:48 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **11760** Amendment Number: **18**
 Agency Name: **HEALTH CARE FINANCING & POLICY** Legal Entity Name: **HP Enterprise Services, LLC**
 Agency Code: **403** Contractor Name: **HP Enterprise Services, LLC**
 Appropriation Unit: **3243-28** Address: **5400 Legacy Drive**
 Is budget authority available?: **Yes** City/State/Zip: **Plano, TX 75024**
 If "No" please explain: **Not Applicable** Contact/Phone: **Pamela Swiz Pascal 208-371-3229**
 Vendor No.:
 NV Business ID: **NV19971239775**

To what State Fiscal Year(s) will the contract be charged? **2011-2020**

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

| | | | | |
|-------------------------------------|---------------|----------------|---------------|--------|
| <input checked="" type="checkbox"/> | General Funds | 10.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> | Federal Funds | 90.00 % | Bonds | 0.00 % |
| | Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: **RFP #1824**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/11/2011**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2020**

Contract term: **9 years and 172 days**

4. Type of contract: **Contract**

Contract description: **MMIS Fiscal Agent**

5. Purpose of contract:

This is the 18th amendment to the original contract which provides operations of the Medicaid Management Information System and fiscal agent services. This amendment increases the maximum amount from \$396,454,321.23 to \$422,873,689.86 due to changing in the Operations Pre Go Live period, integrating policy changes to align with existing Nevada Policy, incorporating Stage III statement of work, making changes to the maintenance and enhancement hours, adjusting the warranty period and increasing funding for an additional position.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|------------------|------------------|------------------|--------------|
| 1. The max amount of the original contract: | \$176,945,854.17 | \$176,945,854.17 | \$176,945,854.17 | Yes - Action |
| a. Amendment 1: | \$11,001,222.00 | \$11,001,222.00 | \$11,001,222.00 | Yes - Action |
| b. Amendment 2: | \$0.00 | \$0.00 | \$0.00 | No |
| c. Amendment 3: | \$0.00 | \$0.00 | \$0.00 | No |
| d. Amendment 4: | \$0.00 | \$0.00 | \$0.00 | No |
| e. Amendment 5: | \$0.00 | \$0.00 | \$0.00 | No |
| f. Amendment 6: | \$0.00 | \$0.00 | \$0.00 | No |
| g. Amendment 7: | \$0.00 | \$0.00 | \$0.00 | No |
| h. Amendment 8: | \$0.00 | \$0.00 | \$0.00 | No |

| | | | | |
|---------------------------------------|------------------|------------------|------------------|--------------|
| i. Amendment 9: | \$0.00 | \$0.00 | \$0.00 | No |
| j. Amendment 10: | \$0.00 | \$0.00 | \$0.00 | No |
| k. Amendment 11: | \$0.00 | \$0.00 | \$0.00 | No |
| l. Amendment 12: | \$0.00 | \$0.00 | \$0.00 | No |
| m. Amendment 13: | \$0.00 | \$0.00 | \$0.00 | No |
| n. Amendment 14: | \$0.00 | \$0.00 | \$0.00 | No |
| o. Amendment 15: | \$45,000,000.00 | \$45,000,000.00 | \$45,000,000.00 | Yes - Action |
| p. Amendment 16: | \$158,940,788.06 | \$158,940,788.06 | \$158,940,788.06 | Yes - Action |
| q. Amendment 17: | \$4,566,457.00 | \$4,566,457.06 | \$4,566,457.06 | Yes - Action |
| 2. Amount of current amendment (#18): | \$26,419,368.63 | \$26,419,368.63 | \$26,419,368.63 | Yes - Action |
| 3. New maximum contract amount: | \$422,873,689.86 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal mandates.

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

The State lacks resources and State employees do not possess expertise and specialized knowledge required to takeover the MMIS system and carry out fiscal agent operations.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

This vendor received the highest score in the State approved competitive procurement process.

d. Last bid date: 02/09/2010 Anticipated re-bid date: 07/01/2013

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

HP Enterprises has been contracted with DHCFP for several years and work 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:
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 | cmoriart | 11/20/2017 08:18:58 AM |
| Division Approval | ecreceli | 11/28/2017 13:36:17 PM |
| Department Approval | vmilazz1 | 12/01/2017 10:10:04 AM |
| Contract Manager Approval | jkolenut | 12/06/2017 15:32:32 PM |
| EITS Approval | lolso3 | 12/13/2017 13:45:09 PM |
| Budget Analyst Approval | bwooldri | 12/18/2017 07:23:46 AM |
| BOE Agenda Approval | nhovden | 12/18/2017 15:17:47 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19417**

| | | | |
|---------------------------------|--|--------------------|--------------------------------------|
| Agency Name: | DHHS - HEALTH CARE FINANCING & POLICY | Legal Entity Name: | Lander County Social Services |
| Agency Code: | 403 | Contractor Name: | Lander County Social Services |
| Appropriation Unit: | 3243-00 | Address: | 50 State Route 305 |
| Is budget authority available?: | Yes | City/State/Zip: | Battle Mountain, NV 89820 |
| If "No" please explain: | Not Applicable | Contact/Phone: | 7756355311 |
| | | Vendor No.: | |
| | | NV Business ID: | Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

This agreement requires a retroactive start date due to negotiations between the Counties and the State.3. Termination Date: **06/30/2019**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **County Match**

5. Purpose of contract:

This is a new revenue interlocal agreement that continues ongoing administrative services necessary to operate the Medicaid County Match Program. The counties provide the non-federal share for medical and Medicaid administrative services. Pursuant to NRS 428.010, counties are required to provide medical care to indigent persons who reside in the county. The County Match Program provides federal matching funds for indigent long term care costs when the indigent is Medicaid eligible.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$332,280.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Pursuant to NRS 428.010 counties are required to provide care, support, and relief to the poor, indigent, incompetent and incapacitated persons who lawfully reside in the county and are not supported by other means. The county match program provides fiscal relief to the counties for indigent long term care costs for these individuals.

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

State employees operate the county match program. DHCFF pays providers and the counties reimburse the State for the non federal share.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Lander County has been under contract with DHCFFP for several years and work has been satisfactory.

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

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

Not Applicable

15. The contractor is 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 | cmoriart | 10/24/2017 14:48:42 PM |
| Division Approval | ecreceli | 11/08/2017 11:33:30 AM |
| Department Approval | vmilazz1 | 11/17/2017 08:55:04 AM |
| Contract Manager Approval | jkolenut | 11/17/2017 15:21:58 PM |
| Budget Analyst Approval | bwooldri | 11/27/2017 14:57:21 PM |
| BOE Agenda Approval | nhovden | 11/30/2017 09:47:58 AM |
| BOE Final Approval | Pending | |

BRIAN SANDOVAL
Governor



RICHARD WHITLEY, MS
Director

MARTA JENSEN
Acting Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY
1100 East William Street, Suite 101
Carson City, Nevada 89701
Telephone (775) 684-3676 • Fax (775) 687-3893
<http://dhcfp.nv.gov>

MEMORANDUM

DATE: June 14, 2017
TO: Debi Reynolds, Budget Analyst IV
FROM: Ambra Reed, Certified Contract Manager DHCFP
RE: Lander County Match

This memorandum requests that the above subject contract be approved for a retroactive start date effective July 1, 2017. 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. This contract was delayed due to negotiations between the Counties and the State.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | | |
|---|---|--|
| 1. Contract Number: 16262 | Amendment Number: 6 | |
| | Legal Entity Name: SRA INTERNATIONAL, INC. | |
| Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH | Contractor Name: SRA INTERNATIONAL, INC. | |
| Agency Code: 406 | Address: 4300 FAIR LAKES COURT | |
| Appropriation Unit: 3219-16 | City/State/Zip: FAIRFAX, VA 22033 | |
| Is budget authority available?: Yes | Contact/Phone: 703/633-2593 | |
| If "No" please explain: Not Applicable | Vendor No.: T29013491 | |
| | NV Business ID: NV20051645519 | |

To what State Fiscal Year(s) will the contract be charged? **2015-2019**

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

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

Agency Reference #: **C 14769**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/08/2015**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **07/31/2018**

Contract term: **3 years and 204 days**

4. Type of contract: **Contract**

Contract description: **NBS System Upgrade**

5. Purpose of contract:

This is the sixth amendment to the original contract which provides upgrades to Nevada's communicable disease National Electronic Disease Surveillance System in order to implement electronic laboratory reporting capabilities. This amendment increases the maximum amount from \$175,000 to \$225,000 for the maintenance of the system.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$35,000.00 | \$35,000.00 | \$35,000.00 | Yes - Info |
| a. Amendment 1: | \$0.00 | \$0.00 | \$35,000.00 | No |
| b. Amendment 2: | \$14,000.00 | \$14,000.00 | \$49,000.00 | Yes - Info |
| c. Amendment 3: | \$65,000.00 | \$65,000.00 | \$114,000.00 | Yes - Action |
| d. Amendment 4: | \$20,000.00 | \$20,000.00 | \$20,000.00 | Yes - Info |
| e. Amendment 5: | \$41,000.00 | \$41,000.00 | \$61,000.00 | Yes - Action |
| 2. Amount of current amendment (#6): | \$50,000.00 | \$50,000.00 | \$50,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$225,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

This work must be performed to provide support for the CDC data system to track Nevada's communicable diseases.

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

State personnel do not possess training or knowledge pertaining to the Rhapsody or NBS System.

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):

Inductive Health Informatics
SRA International, Inc.
Orion Health

b. Solicitation Waiver: **Not Applicable**

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

This vendor was recommended by the Centers for Disease Control and possess the greatest knowledge of the product.

d. Last bid date: 12/01/2016 Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided services to DPBH since January 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 registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|-------------------------|----------|------------------------|
| Budget Account Approval | chadwic1 | 11/20/2017 13:33:40 PM |
| Division Approval | chadwic1 | 11/20/2017 13:33:44 PM |
| Department Approval | vmilazz1 | 11/21/2017 11:20:49 AM |

| | | |
|---------------------------|----------|------------------------|
| Contract Manager Approval | rmorse | 11/21/2017 15:40:58 PM |
| EITS Approval | lolso3 | 11/27/2017 08:07:15 AM |
| Budget Analyst Approval | bwooldri | 12/01/2017 15:12:57 PM |
| BOE Agenda Approval | nhovden | 12/01/2017 15:14:03 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | | |
|---|---|--|
| 1. Contract Number: 17598 | Amendment Number: 2 | |
| Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH | Legal Entity Name: HUMBOLDT COUNTY DBA HUMBOLDT COUNTY TREASURER | |
| Agency Code: 406 | Contractor Name: HUMBOLDT COUNTY DBA HUMBOLDT COUNTY TREASURER | |
| Appropriation Unit: 3224-00 | Address: 50 West Fifth Street | |
| Is budget authority available?: Yes | City/State/Zip: WINNEMUCCA, NV 89445 | |
| If "No" please explain: Not Applicable | Contact/Phone: 775-623-6300 | |
| | Vendor No.: T40139500 | |
| | NV Business ID: Governmental Entity | |

To what State Fiscal Year(s) will the contract be charged? **2017-2019**

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

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

Agency Reference #: **C 15255**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2016**
Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **2 years and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Family Services**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing individual and family health services utilizing the State's community health nurses. The areas of emphasis are rural epidemiology, public health emergency preparedness and community health nursing, including the treatment and prevention of infectious tuberculosis and sexually transmitted diseases. This amendment revises services to the county in the scope of work and increases the maximum amount from \$78,855.15 to \$227,779.15 due to the continued need for these services in the county.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$78,855.15 | \$78,855.15 | \$78,855.15 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#2): | \$148,924.00 | \$148,924.00 | \$148,924.00 | Yes - Action |
| 3. New maximum contract amount: | \$227,779.15 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Public and Behavioral Health, Clinical Services Program, receives funding from the county to provide direct preventative health care, as well as referrals for medical services, to county residents.

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

State employees are providing these services to the county.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 state and counties provide services to each other on a continuous basis - 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 | chadwic1 | 11/15/2017 14:58:31 PM |
| Division Approval | chadwic1 | 11/15/2017 14:58:35 PM |
| Department Approval | vmilazz1 | 11/17/2017 14:52:39 PM |
| Contract Manager Approval | rmorse | 11/20/2017 09:50:51 AM |
| Budget Analyst Approval | bwooldri | 12/06/2017 15:45:37 PM |
| BOE Agenda Approval | nhovden | 12/11/2017 14:13:42 PM |

STATE OF NEVADA

BRIAN SANDOVAL
Governor

RICHARD WHITLEY, MS
Director, DHHS



AMY ROUKIE, MBA
Administrator, DPBH

VACANT
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Ste. 300
Carson City, NV 89706

December 4, 2017

MEMORANDUM

TO: Bessie Wooldridge, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Administrative Services Officer IV *OK for*
Division of Public and Behavioral Health

FROM: Tina Gerber-Winn, Agency Manager, Community Health Services
Division of Public and Behavioral Health

RE: REQUEST OF RETROACTIVE START DATE OF CONTRACT -- (CETS #17598)

The purpose of this Interlocal Contract is to provide public health services to meet the health needs of rural and frontier communities. Due to unforeseen delays in the negotiation and revision process regarding deliverables and reimbursement rates charged to the County, this agreement was delayed. Therefore, it became necessary to extend the termination date to June 30, 2019. The current amendment (#2), adds additional funding to cover the extension period approved in amendment #1.

Unfortunately, the negotiation delays that occurred did not allow the request to add funding and the request to extend the contract period to occur at the same time. However, the agency understands that future contract amendments solely to extend the termination date will not be permissible without justification. The agency will take the necessary steps to ensure that this does not occur again.

This memo requests that this contract amendment (#2) be approved with a retroactive start date of July 1, 2017. If the contract amendment is denied, the ability of Community Health Services to manage infectious and sexually transmitted diseases, in collaboration with Humboldt County, pursuant to NRS 439.350, 439.360 and 441A will be seriously impacted and/or unable to continue.

Thank you for your consideration.

Cc: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | |
|---|---|
| 1. Contract Number: 17798 | Amendment Number: 2 |
| Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH | Legal Entity Name: Mineral County DBA MINERAL CO CLERK & TREASURER |
| Agency Code: 406 | Contractor Name: Mineral County DBA MINERAL CO CLERK & TREASURER |
| Appropriation Unit: 3224-00 | Address: P.O. Box 1450 |
| Is budget authority available?: Yes | City/State/Zip: Hawthorne, NV 89415 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-945-2446 |
| | Vendor No.: T40291300 |
| | NV Business ID: Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2017-2019**

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

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

Agency Reference #: **C 15260**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2016**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **2 years and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Family Health**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing individual and family health services utilizing the State's community health nurses. The areas of emphasis are rural epidemiology, public health emergency preparedness and community health nursing, including the treatment and prevention of infectious tuberculosis and sexually transmitted diseases. This amendment revises services to the county in the scope of work and increases the maximum amount from \$30,355.93 to \$125,947.93 due to the continued need for these services in the county.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$30,355.93 | \$30,355.93 | \$30,355.93 | Yes - Info |
| a. Amendment 1: | \$0.00 | \$0.00 | \$30,355.93 | No |
| 2. Amount of current amendment (#2): | \$95,592.00 | \$95,592.00 | \$125,947.93 | Yes - Action |
| 3. New maximum contract amount: | \$125,947.93 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Public and Behavioral Health, Clinical Services Program, receives funding from the county to provide direct preventative health care, as well as referrals for medical services, to county residents.

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

State employees are providing these services to the county.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to NRS 277.180 authorizes one or more public agency to contract with another public agency to perform governmental functions.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 state and counties provide services to each other on a continuous basis - 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 | chadwic1 | 11/20/2017 15:00:44 PM |
| Division Approval | chadwic1 | 11/20/2017 15:00:54 PM |
| Department Approval | vmilazz1 | 11/21/2017 11:37:05 AM |
| Contract Manager Approval | rmorse | 11/21/2017 15:46:00 PM |
| Budget Analyst Approval | bwooldri | 12/05/2017 15:25:47 PM |
| BOE Agenda Approval | nhovden | 12/11/2017 14:08:46 PM |

STATE OF NEVADA

BRIAN SANDOVAL
Governor

RICHARD WHITLEY, MS
Director, DHHS



AMY ROUKIE, MBA
Administrator, DPBH

VACANT
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Ste. 300
Carson City, NV 89706

December 4, 2017

MEMORANDUM

TO: Bessie Wooldridge, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Administrative Services Officer IV *OK for*
Division of Public and Behavioral Health

FROM: Tina Gerber-Winn, Agency Manager, Community Health Services
Division of Public and Behavioral Health

RE: REQUEST OF RETROACTIVE START DATE OF CONTRACT – (CETS #17798)

The purpose of this Interlocal Contract is to provide public health services to meet the health needs of rural and frontier communities. Due to unforeseen delays in the negotiation and revision process regarding deliverables and reimbursement rates charged to the County, this agreement was delayed. Therefore, it became necessary to extend the termination date to June 30, 2019. The current amendment (#2), adds additional funding to cover the extension period approved in amendment #1.

Unfortunately, the negotiation delays that occurred, did not allow the request to add funding and the request to extend the contract period to occur at the same time. However, the agency understands that future contract amendments solely to extend the termination date will not be permissible without justification. The agency will take the necessary steps to ensure that this does not occur again.

This memo requests that this contract amendment (#2) be approved with a retroactive start date of July 1, 2017. If the contract amendment is denied, the ability of Community Health Services to manage infectious and sexually transmitted diseases, in collaboration with Mineral County, pursuant to NRS 439.350, 439.360 and 441A will be seriously impacted and/or unable to continue.

Thank you for your consideration.

Cc: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19381**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | DHHS - PUBLIC AND BEHAVIORAL HEALTH | Legal Entity Name: | WASHOE COUNTY DBA WASHOE COUNTY MANAGER'S OFFICE |
| Agency Code: | 406 | Contractor Name: | WASHOE COUNTY DBA WASHOE COUNTY MANAGER'S OFFICE |
| Appropriation Unit: | 3645-00 | Address: | WASHOE COUNTY 1001 E 9TH ST, A201 |
| Is budget authority available?: | Yes | City/State/Zip: | RENO, NV 89520-0027 |
| If "No" please explain: | Not Applicable | Contact/Phone: | 775/328-2000 |
| | | Vendor No.: | T40283400AQ |
| | | NV Business ID: | Government Entity |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

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

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

Agency Reference #: C 15972

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

This is a new cooperative agreement for ongoing services that provides mental health professionals to perform mental health evaluations, including competency evaluation and risk assessments at Washoe County Detention Center. The sharing of the costs of mental health examination continues to create monetary efficiencies for both the state and county. The contract was delayed due to extensive negotiations and required changes to the proposed contract.

3. Termination Date: **06/30/2021**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Detention Services**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing on-site mental health services to defendants at the Washoe County Detention Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,884,800.00**

Payment for services will be made at the rate of \$471,200.00 per SFY

Other basis for payment: Per Attachment BB.

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 178.415, Washoe County Detention Center has defendants in need of mental health services. Lake's Crossing Center has the trained staff necessary to evaluate/service court ordered clients.

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.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Not applicable

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

November 2013 to present - Satisfactory

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

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

Not Applicable

15. The contractor is 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:

Tom Durante, Agency Manager Ph: 775-688-1900 ext 223

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | rmorse | 12/06/2017 11:39:02 AM |
| Division Approval | rmorse | 12/06/2017 11:39:05 AM |
| Department Approval | vmilazz1 | 12/06/2017 16:30:11 PM |
| Contract Manager Approval | rmorse | 12/08/2017 15:46:52 PM |
| Budget Analyst Approval | nhovden | 12/11/2017 12:50:09 PM |
| BOE Agenda Approval | nhovden | 12/11/2017 12:50:13 PM |
| BOE Final Approval | Pending | |

BRIAN SANDOVAL
Governor

RICHARD WHITLEY, MS
Director

STATE OF NEVADA



AMY ROUKIE, MBA
Administrator

VACANT
Chief Medical Officer

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH**

Lake's Crossing Center
500 Galletti Way
Sparks, NV 89431

Telephone: (775) 688-1900 · Fax: (775) 688-1909

December 6, 2017

MEMORANDUM

TO: **Nikki Hovden**
Budget Analyst
Budget Division

THROUGH: **Mark Winebarger**
Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: **Tom Durante, LCSW**
Agency Director
Lake's Crossing Center

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT –July 1, 2017 (CETS #19381)

This memorandum requests that the Intrastate Interlocal Contract between Lake's Crossing Center and Washoe County District Court required evaluations by mental health professionals, including competency evaluations and risk assessments at the Washoe County Detention Center be approved for a retroactive start date effective July 1, 2017. This contract provides revenue to Lake's Crossing Center for the performance of the evaluations.

There was a change in Washoe County management after the original agreed upon contract was submitted to the county for signature. The new management requested changes to the agreement on Attachment AA, Scope of Work for timelines when reports are to be completed and the cost of the reports were discussed. The County Deputy Attorney also requested changes to the terms of Intrastate Interlocal Contract. These items were negotiated between the attorneys for both the county and the state. The negotiations were finalized September 2017.

The future contract process will be started earlier to allow time for negotiations.

This is a revenue contract for Lake's Crossing Center and if not allowed to be retroactive, will prevent Lake's Crossing Center from providing needed services to Washoe County.

Thank you for your consideration in this matter.

CC: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19159**

| | |
|--|--|
| Agency Name: DHHS - WELFARE AND SUPPORTIVE SERVICES | Legal Entity Name: MAXIMUS HUMAN SERVICES, INC. |
| Agency Code: 407 | Contractor Name: MAXIMUS HUMAN SERVICES, INC. |
| Appropriation Unit: 3238-35 | Address: 1891 METRO CENTER DR |
| Is budget authority available?: Yes | City/State/Zip: RESTON, VA 20190-5287 |
| If "No" please explain: Not Applicable | Contact/Phone: 703/251-8500 |
| | Vendor No.: T32002765 |
| | NV Business ID: NV20091030881 |

To what State Fiscal Year(s) will the contract be charged? **2018-2023**

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

| | | | |
|---|----------------|---------------|--------|
| <input checked="" type="checkbox"/> General Funds | 34.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> Federal Funds | 66.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2018**
Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2022**
Contract term: **4 years and 303 days**

4. Type of contract: **Contract**
Contract description: **Quality Assurance**

5. Purpose of contract:

This is a new contract to provide quality assurance services for the automated system replacement project to develop a quality management plan, monitor project tasks and activities and report on deviations from the approved project management plan.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,335,378.00**

Other basis for payment: As outlined in Attachment AA: Deliverable Payment Schedule.

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency requires a QA vendor for the Nevada Child Support Enforcement Automated System project.

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 state employees do not have the expertise to provide.

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):

Cincom Systems Corp.
PCG
Deloitte Consulting
Maximus Human Services Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3433, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee. We only received the one (1) proposal.

d. Last bid date: 04/26/2017 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Previously under contract with DWSS and provided satisfactory services.

HDDS/DWSS 05-2015 � 07/2016
HDDS/DWSS 10-2010 � 10/2011
Dept. of Health & Welfare � 10-1996 � 09-2000
Dept. of Administration � 08-1998 � 09-1999
Department of Motor Vehicles � 11-1999 � 02-2000

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

No If "Yes", please provide details of the litigation 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:

Laura Jenkins, ITP IV Ph: 775-684-0561

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|-----------|------------------------|
| Budget Account Approval | dsorensen | 10/09/2017 08:51:52 AM |
| Division Approval | bberry | 10/24/2017 16:13:25 PM |
| Department Approval | vmilazz1 | 10/24/2017 17:46:44 PM |
| Contract Manager Approval | sjon23 | 11/09/2017 12:16:58 PM |
| Budget Analyst Approval | nhovden | 12/12/2017 09:52:05 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19373**

| | |
|---|--|
| Agency Name: DEPARTMENT OF CORRECTIONS | Legal Entity Name: Board of Regents, University of Nevada, Reno DBA UNR CONTROLLERS |
| Agency Code: 440 | Contractor Name: Board of Regents, University of Nevada, Reno DBA UNR CONTROLLERS |
| Appropriation Unit: 3711-22 | Address: 1664 Virginia St. MS 313 |
| Is budget authority available?: Yes | City/State/Zip: Reno, NV 89557 |
| If "No" please explain: Not Applicable | Contact/Phone: Dr. Veronica Dahir 775-784-6272 |
| | Vendor No.: D35000816 |
| | NV Business ID: Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

The Bureau of Justice approved funding an additional year for Nevada's Second Chance Act Strategic Recidivism Reduction (SRR) grant from October 1, 2017 to September 30, 2018. This contract will give the department additional time to meet the SRR grant deliverables.

3. Termination Date: **09/30/2018**

Contract term: **364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new interlocal agreement to evaluate the effectiveness of the Second Chance Act Reentry - Nevada Strategic Recidivism Reduction Plan grant goals.

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 Department was provided a grant through the Bureau of Justice Assistance Second Chance Act to provide re-entry services to reduce recidivism rates. The Department is contracting with UNR to evaluate the effectiveness of the grant goals.

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

An outside party is required for this service and therefore services cannot be provided by the Department.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

NRS 277.180 Any one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of its public agencies is authorized by law to perform.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Total indirect cost at 44%.

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | sewart | 12/05/2017 15:16:23 PM |
| Division Approval | sewart | 12/05/2017 15:16:27 PM |
| Department Approval | sewart | 12/05/2017 15:16:33 PM |
| Contract Manager Approval | ahailey | 12/05/2017 16:05:57 PM |
| Budget Analyst Approval | bmacke1 | 12/13/2017 10:51:30 AM |
| BOE Agenda Approval | myoun3 | 12/13/2017 16:13:02 PM |
| BOE Final Approval | Pending | |

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9938



**State of Nevada
Department of Corrections**

Brian Sandoval
Governor

James Dzurenda
Director

Sheila Lambert
Administrator

MEMORANDUM

Date: October 16, 2017
To: Bridgette Garrison, Governor's Finance Office
Through: Scott Ewart, Chief of Fiscal Services
From: Sheila Lambert, Administrator
SUBJECT: **Retroactive Contract: Board of Regents, University of Nevada Reno (UNR) – CETS # 19373**

The Bureau of Justice provided the notice of grant award (NOGA) on September 20, 2017 at 6:02 p.m. for Year 2 of the Second Chance Act Grant Award.

The Nevada Department of Corrections (NDOC) responded to the GMS Award 2016-CZ-BX-0015 on September 21, 2017, and immediately moved the processes forward for the completion of the grant awards and contracts as part of the Year 2 program activities.

The grant award required NDOC to continue the efforts underway, as part of the year one project period October 1, 2016, through September 30, 2017. NDOC is not able to utilize funds for Year 1 of the Second Chance Act Grant for Year 2. NDOC's contracts, based on the original Year 1 award, ended on September 30, 2017. However, all activities are continuous and on-going.

NDOC is requesting retroactivity of the contracts to October 1, 2017, in compliance with the United States Department of Justice Grants Financial Guide. Recipients and sub-recipients are prohibited from comingling funds on either a program-by-program or project-by-project basis, which requires the NDOC to consider this as a "new" award. Funds specifically budgeted and/or received for one project may not be used to support another. The request of retroactivity works to ensure NDOC is compliant with the activities of the federal award.

Please accept this information as justification for contract # 19373 to be effective October 1, 2017.

Thank you.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19369**

| | | | |
|---------------------------------|----------------------------------|--------------------|---|
| Agency Name: | DEPARTMENT OF CORRECTIONS | Legal Entity Name: | University of Cincinnati DBA CORRECTIONS INSTITUTE |
| Agency Code: | 440 | Contractor Name: | University of Cincinnati DBA CORRECTIONS INSTITUTE |
| Appropriation Unit: | 3711-22 | Address: | 51 Goodman Drive, Suite 530 |
| Is budget authority available?: | Yes | City/State/Zip: | Cincinnati, OH 45221-0222 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Amanda Wright 513-556-2868 |
| | | Vendor No.: | T29024907B |
| | | NV Business ID: | Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2018**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

The Bureau of Justice approved an extension of the grant period for Nevada's Second Chance Act Strategic Recidivism Reduction (SRR) grant from September 30, 2017 to November 30, 2017 to meet the grant deliverables. The department was unable to amend Contract 18238 to extend the original contract term. This contract will give the department the additional time to meet SRR grant deliverables.

3. Termination Date: **11/30/2017**Contract term: **60 days**4. Type of contract: **Interlocal Agreement**Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new interlocal agreement to provide the Department's re-entry program with training as identified by the Second Chance Act Reentry Initiative - Nevada Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$121,250.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Bureau of Justice federal award requires the assessment and evidence-based training activities for staff development with the goal of reducing recidivism. These activities were identified in the grant as required activities and funded entirely by the federal grant.

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

The evidence-based practices and curriculum on the Nevada Risk Assessment System (NRAS) and the cognitive approaches to the effective delivery of programs is specialized. The cost of maintaining this level of training capabilities would require the department to serve as a research institution and would be cost-prohibitive. The department has incorporated train-the-trainer as a required element to ensure sustainability with the training and programs. However, the department does not have the expertise to deliver this level of training without the technical and educational support from the University of Cincinnati. No other state agency provides this service.

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

The vendor was selected for the training based on the Ohio Risk Assessment System of which the state adopted in previous years with the copyright permission to be identified as the Nevada Risk Assessment System (NRAS). The University of Cincinnati is the only research and training facility that offers the required training and certification of the tool as part of an evidence-based system.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | dmartine | 11/29/2017 16:29:32 PM |
| Division Approval | amonro1 | 11/30/2017 08:19:58 AM |
| Department Approval | sewart | 11/30/2017 09:25:32 AM |
| Contract Manager Approval | ahailey | 11/30/2017 14:39:14 PM |
| Budget Analyst Approval | bmacke1 | 12/13/2017 14:26:28 PM |
| BOE Agenda Approval | myoun3 | 12/27/2017 09:06:28 AM |
| BOE Final Approval | Pending | |

Fiscal Division
Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285



Brian Sandoval
Governor

James Dzurenda
Director

John Borrowman
*Deputy Director
Support Services*

**State of Nevada
Department of Corrections**

MEMORANDUM

TO: Bridgette Garrison, Budget

THROUGH: Scott Ewart, Chief of Fiscal Services

FROM: Venus Fajota, Chief of Purchasing & Inmate Services

DATE: October 11, 2017

SUBJECT: Retroactive Contract: University of Cincinnati – CETS # 19369

The Department requested a no-cost extension of the Bureau of Justice Assistance Second Chance Act Strategic Recidivism Reduction (SRR) grant which had an original end date of September 30, 2017. The Bureau of Justice approved a no-cost extension to November 30, 2017, and that information was communicated to NDOC Purchasing in mid-September. This impacted a couple NDOC contracts including contract # 18383; which was the original contract for these services that expired September 30, 2017.

Concurrently there were staffing challenges in NDOC Purchasing because of staff retirement and leave. As a result, the Department was unable to submit a contract extension for contract # 18383 prior to the September 30 expiration date.

Department of Corrections Program staff has authorized University of Cincinnati to continue providing services so grant deliverables could be met within the Bureau of Justice's approved program period extension.

Please accept this information as justification for contract # 19369 to be effective October 1, 2017.

Thank you.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19372**

| | | | |
|---------------------------------|----------------------------------|--------------------|---|
| Agency Name: | DEPARTMENT OF CORRECTIONS | Legal Entity Name: | University of Cincinnati DBA CORRECTIONS INSTITUTE |
| Agency Code: | 440 | Contractor Name: | University of Cincinnati DBA CORRECTIONS INSTITUTE |
| Appropriation Unit: | 3711-22 | Address: | 51 Goodman Drive, Suite 530 |
| Is budget authority available?: | Yes | City/State/Zip: | Cincinnati, OH 45221-0222 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Amanda Wright 513-556-2868 |
| | | Vendor No.: | T29024907 B |
| | | NV Business ID: | Governmental Entity |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

The Bureau of Justice approved funding for an additional year for Nevada's Second Chance Act Strategic Recidivism Reduction (SRR) grant from October 1, 2017. This contract will give the department the additional time to meet the SRR grant deliverables.

3. Termination Date: **09/30/2018**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new interlocal agreement which provides the Department's re-entry program with training as identified by the Second Chance Act Reentry Initiative - Nevada Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$109,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Bureau of Justice federal award requires the assessment and evidence-based training activities for staff development with the goal of reducing recidivism. These activities were identified in the grant as required activities and funded entirely by the federal grant.

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

The evidence-based practices and curriculum on the Nevada Risk Assessment System (NRAS) and the cognitive approaches to the effective delivery of programs is specialized. The cost of maintaining this level of training capabilities would require the department to serve as a research institution and would be cost-prohibitive. The department has incorporated train-the-trainer as a required element to ensure sustainability with the training and programs. However, the department does not have the expertise to deliver this level of training without the technical and educational support from the University of Cincinnati. No other state agency provides this service.

9. Were quotes or proposals solicited?

No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

The vendor was selected for the training based on the Ohio Risk Assessment System of which the state adopted in previous years with the copyright permission to be identified as the Nevada Risk Assessment System (NRAS). The University of Cincinnati is the only research and training facility that offers the required training and certification of the tool as part of an evidence-based system.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | vostin | 10/13/2017 13:14:27 PM |
| Division Approval | sewart | 10/17/2017 08:18:49 AM |
| Department Approval | sewart | 10/17/2017 08:18:52 AM |
| Contract Manager Approval | ahailey | 11/30/2017 14:39:38 PM |
| Budget Analyst Approval | bmacke1 | 12/13/2017 14:26:24 PM |
| BOE Agenda Approval | myoun3 | 12/14/2017 16:47:43 PM |
| BOE Final Approval | Pending | |

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9938



**State of Nevada
Department of Corrections**

Brian Sandoval
Governor

James Dzurenda
Director

Sheila Lambert
Administrator

MEMORANDUM

Date: October 16, 2017
To: Bridgette Garrison, Governor's Finance Office
Through: Scott Ewart, Chief of Fiscal Services
From: Sheila Lambert, Administrator
SUBJECT: **Retroactive Contract: Board of Regents, University of Cincinnati – CETS # 19372**

The Bureau of Justice provided the notice of grant award (NOGA) on September 20, 2017 at 6:02 p.m. for Year 2 of the Second Chance Act Grant Award.

The Nevada Department of Corrections (NDOC) responded to the GMS Award 2016-CZ-BX-0015 on September 21, 2017, and immediately moved the processes forward for the completion of the grant awards and contracts as part of the Year 2 program activities.

The grant award required NDOC to continue the efforts underway, as part of the year one project period October 1, 2016, through September 30, 2017. NDOC is not able to utilize funds for Year 1 of the Second Chance Act Grant for Year 2. NDOC's contracts, based on the original Year 1 award, ended on September 30, 2017. However, all activities are continuous and on-going.

NDOC is requesting retroactivity of the contracts to October 1, 2017, in compliance with the United States Department of Justice Grants Financial Guide. Recipients and sub-recipients are prohibited from comingling funds on either a program-by-program or project-by-project basis, which requires the NDOC to consider this as a "new" award. Funds specifically budgeted and/or received for one project may not be used to support another. The request of retroactivity works to ensure NDOC is compliant with the activities of the federal award.

Please accept this information as justification for contract # 19372 to be effective October 1, 2017.

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: **18004** Amendment Number: **3**

Agency Name: **DEPARTMENT OF AGRICULTURE** Legal Entity Name: **JENNIE-O TURKEY STORE SALES, LLC**

Agency Code: **550** Contractor Name: **JENNIE-O TURKEY STORE SALES, LLC**

Appropriation Unit: **1362-21** Address: **2505 Willmar Ave SW**

Is budget authority available?: **Yes** City/State/Zip: **Willmar, MN 56201**

If "No" please explain: **Not Applicable** Contact/Phone: **Tahlor Parkhurst, Wentern K12 Sales Manager 619-851-8623**

Vendor No.: **T27012910B**

NV Business ID: **NV27012910B**

To what State Fiscal Year(s) will the contract be charged? **2017-2019**

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

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

Agency Reference #: **RFP # 3237**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2016**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/30/2018**

Contract term: **1 year and 364 days**

4. Type of contract: **Contract**

Contract description: **USDA Food Processing**

5. Purpose of contract:

This is the third amendment to the original contract which provides for school districts to purchase food for the National School Lunch and Breakfast Programs. School districts have been encouraged to utilize their federal entitlement, resulting in an increase in requests to purchase food products from this vendor. This amendment increases maximum amount from \$325,000 to \$1,500,000 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: | \$249,700.00 | \$249,700.00 | \$249,700.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| b. Amendment 2: | \$75,300.00 | \$75,300.00 | \$75,300.00 | Yes - Action |
| 2. Amount of current amendment (#3): | \$1,175,000.00 | \$1,175,000.00 | \$1,175,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$1,500,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Revised projections from school districts for turkey products have increased. The increased projections are within the approved budget authority.

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

State agencies and employees do not have the ability to process USDA food. Only licensed manufacturers may do so.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3237, 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. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 contractor for Nevada Department of Agriculture and services have been satisfactory

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|-------------------------|--------|------------------------|
| Budget Account Approval | melli2 | 12/11/2017 12:59:40 PM |
| Division Approval | melli2 | 12/11/2017 13:02:57 PM |
| Department Approval | melli2 | 12/11/2017 13:03:04 PM |

Contract Manager Approval

melli2

12/11/2017 13:03:21 PM

Budget Analyst Approval

hfield

12/11/2017 15:56:39 PM

BOE Agenda Approval

cmurph3

12/13/2017 13:19:46 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19413**

| | |
|---|--|
| Agency Name: DEPARTMENT OF AGRICULTURE | Legal Entity Name: BOARD OF REGENTS, NSHE OBO DRI RESEARCH FOUNDATION |
| Agency Code: 550 | Contractor Name: BOARD OF REGENTS, NSHE OBO DRI RESEARCH FOUNDATION |
| Appropriation Unit: 4540-04 | Address: DESERT RESEARCH INSTITUTE 2215 RAGGIO PKWY |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89512-1095 |
| If "No" please explain: Not Applicable | Contact/Phone: 775/673-7379 |
| | Vendor No.: T29034539 |
| | NV Business ID: NV19831014800 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2019**

Contract term: **1 year and 171 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Drought Initiative**

5. Purpose of contract:

This is a new interlocal agreement to provide drought and water use monitoring in support of the State Drought Initiative.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$243,400.00**

Other basis for payment: Invoices to be paid monthly

II. JUSTIFICATION

7. What conditions require that this work be done?

The Governor's Office has set forth this initiative; the vendor (DRI) has been identified as a key party to the initiative.

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

The Desert Research Institute has been identified by the Governor's Office to have the tools and skill set necessary to complete the specific work required for this drought initiative.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

This vendor was selected by the Governor's Office has a participant in the Drought Initiative.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

10%

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

No

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

No

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

Yes If "Yes", please explain

Desert Research Institute is affiliated with the Board of Regents, NSHE.

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 | bbel1 | 10/24/2017 09:00:26 AM |
| Division Approval | bbel1 | 10/24/2017 12:43:13 PM |
| Department Approval | bbel1 | 11/06/2017 12:00:21 PM |
| Contract Manager Approval | bbel1 | 11/06/2017 12:00:24 PM |
| Budget Analyst Approval | hfield | 11/17/2017 15:33:05 PM |
| BOE Agenda Approval | cmurph3 | 11/20/2017 08:51:37 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: **18869**

| | |
|--|---|
| Agency Name: DPS-FIRE MARSHAL | Legal Entity Name: FIRETREX, INC. |
| Agency Code: 656 | Contractor Name: FIRETREX, INC. |
| Appropriation Unit: 3816-25 | Address: 10621 NE 194TH ST |
| Is budget authority available?: Yes | City/State/Zip: BOTHELL, WA 98011-3043 |
| If "No" please explain: Not Applicable | Contact/Phone: DAVE MONAHAN 206-501-4480 |
| | Vendor No.: T29039255 |
| | NV Business ID: N/A |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2022 |

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

| | | | |
|---------------|--------|------------------------|---|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Transfer from SERC and NDEP |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **02/07/2022**

Contract term: **4 years and 30 days**

4. Type of contract: **Contract**

Contract description: **Training Database**

5. Purpose of contract:

This is a new contract which provides for the implementation and support of a web-based Training and Credential Management System to manage and track the credentials and training records of individual fire department members in Nevada. Services include the purchase of the system, initialization of the system including historical data transfer, hosting services and ongoing system maintenance/support services. This contract is contingent upon approval of work program C39415.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$81,000.00**

Other basis for payment: \$57,000 System - 30% payable upon award; 40% payable after completion of Phase II; 30% payable after completion of Phase III. \$6,000 annual support payable per year after completion of system.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Fire Marshal Division records individual certifications by way of Excel spreadsheets and providing certification by way of publishing the certification and mailing it to the fire department administration. Prior to certifying a fire department member, it is required that all prerequisite training and certification is verified. The division must draft a letter requesting the department send copies of the individual's prerequisite training and certification for review. The Nevada fire department would then copy and send using the postal service. By implementing this database, most of the manual process will become automated provide efficiencies to the Division and fire agencies statewide.

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

State employees within DPS and other agencies do not have the necessary skills to develop a web-based system to provide the necessary functionality needed by the division.

9. Were quotes or proposals solicited? **Yes**

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

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

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

This vendor submitted the only response to RFP 17-SFM-02.

d. Last bid date: 05/19/2017 Anticipated re-bid date: 07/31/2021

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is NOT registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

NRS 80.015 clearly defines what a business entity is when considering if a business license is required. NRS 80.015(j) states that isolated transactions that are physically performed in Nevada less than 30 days and are not part of a series of transactions is not considered doing business in state. This contractor will not be physically doing work in the State of NV. Additionally, the vendor does not meet the requirement of NRS 76.100, paragraph 7(b). The vendor will perform all work remotely.

16. a. Is 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.

NRS 80.015 clearly defines what a business entity is when considering if a business license is required. NRS 80.015(j) states that isolated transactions that are physically performed in Nevada less than 30 days and are not part of a series of transactions is not a business entity. This contractor will not be physically doing work in the State of NV. Additionally, the vendor does not meet the requirement of NRS 76.100, paragraph 7(b). The vendor will perform all work remotely.

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

Yes

19. Agency Field Contract Monitor:

PINKERTON, DENNS, EMPLOYEE DEVELOPMENT MANAGER Ph: 775-684-7520

20. Contract Status:

Contract Approvals:

| | | |
|-------------------------|---------|------------------------|
| Approval Level | User | Signature Date |
| Budget Account Approval | pbowers | 06/08/2017 13:36:00 PM |

| | | |
|---------------------------|----------|------------------------|
| Division Approval | nkephart | 12/15/2017 14:54:58 PM |
| Department Approval | mcar2 | 12/15/2017 15:19:12 PM |
| Contract Manager Approval | mcar2 | 12/15/2017 15:19:16 PM |
| EITS Approval | rbennet2 | 12/18/2017 12:40:02 PM |
| Budget Analyst Approval | jrodrig9 | 12/18/2017 13:58:56 PM |
| BOE Agenda Approval | myoun3 | 12/18/2017 15:03:03 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: 16494 | Amendment Number: 2 | |
| Agency Name: DEPARTMENT OF WILDLIFE | Legal Entity Name: Department of Conservation and Natural Resources - Forestry | Contractor Name: Department of Conservation and Natural Resources - Forestry |
| Agency Code: 702 | Address: 2748 Fairveiw Drive | |
| Appropriation Unit: All Appropriations | City/State/Zip: Carson City , NV 89701 | |
| Is budget authority available?: Yes | Contact/Phone: Melissa Emerson 775-684-2500 | |
| If "No" please explain: Not Applicable | Vendor No.: | |
| | NV Business ID: Governmental Agency | |

To what State Fiscal Year(s) will the contract be charged? **2015-2019**

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

| | | | | | |
|------------------------|----------------|----------|---------------|---------|------------------|
| General Funds | 0.00 % | X | Fees | 25.00 % | Sportsmen |
| X Federal Funds | 75.00 % | | Bonds | 0.00 % | |
| Highway Funds | 0.00 % | | Other funding | 0.00 % | |

Agency Reference #: 15-32

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/13/2015**
Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **03/31/2019**

Contract term: **4 years and 19 days**

4. Type of contract: **Interlocal Agreement**
Contract description: **NDF Master Agreement**

5. Purpose of contract:

This is the second amendment to the original interlocal agreement for prescribed burns and other services in an effort to preserve and maintain habitat and enhance conservation efforts. This amendment increases the maximum amount from \$500,000 to \$2,000,000 due to the increased need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$250,000.00 | \$250,000.00 | \$250,000.00 | Yes - Action |
| a. Amendment 1: | \$250,000.00 | \$250,000.00 | \$250,000.00 | Yes - Action |
| 2. Amount of current amendment (#2): | \$1,500,000.00 | \$1,500,000.00 | \$1,500,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$2,000,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Work for habitat restoration and conservation to protect wildlife habitat is necessary. NDF has been able to work with NDOW for many years now in providing efforts collaboratively among the agencies to accomplish this work.

8. Explain why State employees in your agency or other State agencies are not able 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):
- b. Solicitation Waiver: **Not Applicable**
- c. Why was this contractor chosen in preference to other?
- d. Last bid date: _____ Anticipated re-bid date: _____
10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?
No
- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?
No
- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?
No If "Yes", please explain
13. Has the contractor ever been engaged under contract by any State agency?
 Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:
14. Is the contractor currently involved in litigation with the State of Nevada?
No If "Yes", please provide details of the litigation and facts supporting approval of the contract:
15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
 Governmental Entity
16. Not Applicable
17. Not Applicable
18. Not Applicable
19. Agency Field Contract Monitor:
20. Contract Status:
 Contract Approvals:
- | Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dwendell | 11/14/2017 08:10:36 AM |
| Division Approval | tdoucett | 11/30/2017 15:29:35 PM |
| Department Approval | eobrien | 12/01/2017 16:33:55 PM |
| Contract Manager Approval | tdoucett | 12/08/2017 11:06:02 AM |
| Budget Analyst Approval | hfield | 12/18/2017 09:36:14 AM |
| BOE Agenda Approval | cmurph3 | 12/18/2017 09:59:45 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: **19490**

| | |
|--|---|
| Agency Name: DETR - REHABILITATION DIVISION | Legal Entity Name: BOARD OF REGENTS OBO UNIVERSITY OF NEVADA. LAS VEGAS SCH Medicine |
| Agency Code: 901 | Contractor Name: BOARD OF REGENTS OBO UNIVERSITY OF NEVADA. LAS VEGAS SCH Medicine |
| Appropriation Unit: 3265-09 | Address: 2040 W, Charleston Blvd 3rd Floor |
| Is budget authority available?: Yes | City/State/Zip: Las Vegas, NV 89102 |
| If "No" please explain: Not Applicable | Contact/Phone: James Albertson 702-895-0497 |
| | Vendor No.: |
| | NV Business ID: Governmental Entity |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2023 |

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

| | | | |
|---|----------------|---------------|--------|
| <input checked="" type="checkbox"/> General Funds | 21.30 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> Federal Funds | 78.70 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: **3087-23-REHAB**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**
Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2022**

Contract term: **4 years and 264 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **UNLV Medicine**

5. Purpose of contract:

This is a new interlocal contract to provide applicant, or eligible client, services that include, but are not limited to: examination, consultation, diagnosis, treatment, therapy, anesthesia, medical facility fees and hospital or surgeon fees, with the intent of getting the applicant able to return to work activities.

6. NEW CONTRACT

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

Other basis for payment: in Attachment AA; all other fees will be paid at a cost not to exceed 200% of the 2017 Medicare pay scale. The total amount will not exceed \$100,000 for the term of the contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

This service will help disabled clients re-enter the work environment.

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

This is an interlocal agreement with the University of Nevada, Las Vegas School of Medicine.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Governmental Entity

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | bmartin7 | 11/22/2017 08:45:38 AM |
| Division Approval | jmcentee | 11/29/2017 15:16:03 PM |
| Department Approval | jmcentee | 11/29/2017 15:16:06 PM |
| Contract Manager Approval | jmcentee | 11/29/2017 15:16:08 PM |
| Budget Analyst Approval | tgreenam | 12/05/2017 10:49:21 AM |
| BOE Agenda Approval | nhovden | 12/19/2017 09:21:15 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: **19471**

| | |
|--|---|
| Agency Name: DETR - REHABILITATION DIVISION | Legal Entity Name: Market Decisions LLC |
| Agency Code: 901 | Contractor Name: Market Decisions, LLC |
| Appropriation Unit: 3265-09 | Address: dba Market Decisions Research |
| Is budget authority available?: Yes | 75 Washington Ave, Suite 2C |
| If "No" please explain: Not Applicable | City/State/Zip: Portland, ME 04101 |
| | Contact/Phone: Curtis Mildner 207-767-6440 |
| | Vendor No.: |
| | NV Business ID: NV20171743897 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2022 |

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

| | | | |
|------------------------|----------------|---------------|--------|
| X General Funds | 21.30 % | Fees | 0.00 % |
| X Federal Funds | 78.70 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: **RFP#3471/3146-22-REHAB**

2. Contract start date:

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

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2022**

Contract term: **4 years and 8 days**

4. Type of contract: **Contract**

Contract description: **Consumer Experience**

5. Purpose of contract:

This is a new contract to provide consumer experience surveys, longitudinal analysis and proposed project innovation to determine customer satisfaction with services provided by the Division, and to assess basic needs of individuals with disabilities who seek employment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$279,095.84**

Other basis for payment: Survey Development: \$8,700.00; Year 1 Survey & Survey Reporting: \$55,225.74; Year 2 Survey & Survey Reporting: \$76,923.37; Year 3 Survey & Survey Reporting: \$69,123.37; Year 4 Survey & Survey Reporting: \$69,123.37; the total contract amount shall not exceed \$279,095.84.

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to 34CFR 361.17 (h)(4), 361.16 (C)(v). the Rehabilitation Act of 1973, as Amended, Section 105 (c)(2)(B)(4) and the Nevada State Rehabilitation Council (NSRC).

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

State employees do not possess the expertise to perform these services.

9. Were quotes or proposals solicited? **Yes**

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

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

Discovery Nevada
UNR
ABT Associates
SDSU Research Foundation

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3471, 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. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

No b. If "No", please explain:

Vendor not in DAWN yet

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | bmartin7 | 11/28/2017 09:05:42 AM |
| Division Approval | jmcentee | 11/29/2017 11:17:14 AM |
| Department Approval | jmcentee | 11/29/2017 11:17:17 AM |
| Contract Manager Approval | jmcentee | 11/29/2017 11:17:20 AM |
| Budget Analyst Approval | tgreenam | 12/04/2017 08:39:07 AM |
| BOE Agenda Approval | sbrown | 12/15/2017 10:03:11 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: **19489**

| | |
|--|---|
| Agency Name: BDC LICENSING BOARDS & COMMISSIONS | Legal Entity Name: Allison Mackenzie, Ltd. |
| Agency Code: BDC | Contractor Name: Allison Mackenzie, Ltd. |
| Appropriation Unit: B008 - All Categories | Address: 402 N Division Street |
| Is budget authority available?: Yes | City/State/Zip: Carson City, NV 89703 |
| If "No" please explain: Not Applicable | Contact/Phone: Chris Mackenzie Esq. 7756870202 |
| | Vendor No.: |
| | NV Business ID: NV19781001597 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Licensing Fees |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2020**

Contract term: **2 years and 357 days**

4. Type of contract: **Contract**

Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide legal services to the Board.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$465,000.00**

Payment for services will be made at the rate of \$275.00 per Hour

Other basis for payment: \$275 Per Hour for 2018 & 2019 / \$290 Per Hour for 2020

II. JUSTIFICATION

7. What conditions require that this work be done?

Necessary engagement of Independent Contractor for purpose of accomplishing work of the Board under authority of NRS 284.173 and NRS Chapter 625 authorizes the hiring of independent legal counsel.

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

No legal expertise within the Board office. Legal services to be provided regarding specific knowledge of legal issues and continuity of services.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

The firm has provided the Board's legal services and possesses the necessary expertise resulting in a continuing of services and reduction of cost.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 providing services for over 35 years to the Nevada State Board of Accountancy

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|---------|------------------------|
| Budget Account Approval | vwind1 | 11/17/2017 14:50:17 PM |
| Division Approval | vwind1 | 11/17/2017 14:50:22 PM |
| Department Approval | vwind1 | 11/17/2017 14:50:26 PM |
| Contract Manager Approval | vwind1 | 11/17/2017 14:50:32 PM |
| Budget Analyst Approval | lfree1 | 12/06/2017 15:57:46 PM |
| BOE Agenda Approval | lfree1 | 12/06/2017 15:57:49 PM |
| BOE Final Approval | Pending | |

MASTER SERVICE AGREEMENT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|------------------------------|------------------|--------------|---|
| 1. | | VARIOUS STATE AGENCIES | AMERIGAS PROPANE, LP | OTHER: VARIOUS | \$400,000 | |
| | Contract Description: | This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$5,400,000 due to continued need for these services. | | | | |
| | | Term of Contract: | 11/12/2014 - 01/31/2020 | Contract # 16120 | | |
| 2. | | VARIOUS STATE AGENCIES | ARONSON SECURITY GROUP, INC. | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is a new contract to provide statewide security and fire protection services. | | | | |
| | | Term of Contract: | 12/12/2017 - 07/31/2019 | Contract # 19407 | | |
| 3. | | VARIOUS STATE AGENCIES | CAPITOL REPORTERS | OTHER: VARIOUS | \$500,000 | |
| | Contract Description: | This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis. | | | | |
| | | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19472 | | |
| 4. | | VARIOUS STATE AGENCIES | DALE E. NICHOLS | OTHER: VARIOUS | \$625,000 | |
| | Contract Description: | This is a new contract to reduce fire fuels and vegetation in various locations throughout the State. This contract is awarded for: Scope of Work 4.5 Seed Drills/Application. | | | | |
| | | Term of Contract: | 01/09/2018 - 01/08/2020 | Contract # 19496 | | |
| 5. | | VARIOUS STATE AGENCIES | FLYERS ENERGY, LLC | OTHER: VARIOUS | \$10,000,000 | |
| | Contract Description: | This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$15,000,000 due to continued need for these services. | | | | |
| | | Term of Contract: | 02/01/2014 - 01/31/2020 | Contract # 15225 | | |
| 6. | | VARIOUS STATE AGENCIES | INTER-STATE OIL COMPANY | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$8,000,000 due to continued need for these services. | | | | |
| | | Term of Contract: | 05/13/2014 - 01/31/2020 | Contract # 15520 | | |
| 7. | | VARIOUS STATE AGENCIES | INTRAWORKS, INC. | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements. | | | | |
| | | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19172 | | |

MASTER SERVICE AGREEMENT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|------------------|--------------|---|
| 8. | | VARIOUS STATE AGENCIES | JUSTICE SYSTEMS CORPORATION | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements. | | | | |
| | | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19173 | | |
| 9. | | VARIOUS STATE AGENCIES | LITIGATION SERVICES & TECHNOLOGIES OF NEVADA, LLC | OTHER: VARIOUS | \$500,000 | |
| | Contract Description: | This is a new contract for court reporting services statewide from certified court reporters on an as needed basis. | | | | |
| | | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19479 | | |
| 10. | | VARIOUS STATE AGENCIES | POWERCOMM SOLUTIONS, INC. | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment adds \$3,000,000 in total statewide contract authority and stipulates travel requirements. | | | | |
| | | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19174 | | |
| 11. | | VARIOUS STATE AGENCIES | RFI ENTERPRISES, INC. DBA RFI COMMUNICATIONS & SECURITY SYSTEMS | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements. | | | | |
| | | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19176 | | |
| 12. | | VARIOUS STATE AGENCIES | REBEL OIL COMPANY, INC. | OTHER: VARIOUS | \$15,000,000 | |
| | Contract Description: | This is the second amendment to the original contract which provides bulk fuel purchases and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$20,000,000 due to continued need for these services. | | | | |
| | | Term of Contract: | 02/01/2014 - 01/31/2020 | Contract # 15226 | | |
| 13. | | VARIOUS STATE AGENCIES | SHANNON L. TAYLOR, CCR | OTHER: VARIOUS | \$500,000 | |
| | Contract Description: | This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis. | | | | |
| | | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19475 | | |

MASTER SERVICE AGREEMENT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|---|----------------|-------------|---|
| 14. | | VARIOUS STATE AGENCIES | SILVER STATE COURT REPORTERS, LLC | OTHER: VARIOUS | \$500,000 | |
| | Contract Description: | This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis. | | | | |
| | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19473 | | | |
| 15. | | VARIOUS STATE AGENCIES | SIMPLEX GRINNELL, LP | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements. | | | | |
| | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19180 | | | |
| 16. | | VARIOUS STATE AGENCIES | STANLEY CONVERGENT SECURITY SOLUTIONS, INC. | OTHER: VARIOUS | \$3,000,000 | |
| | Contract Description: | This is the first amendment to the original contract, which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment adds \$3,000,000 in total statewide contract authority and stipulates travel requirements. | | | | |
| | Term of Contract: | 11/01/2017 - 07/31/2019 | Contract # 19181 | | | |
| 17. | | VARIOUS STATE AGENCIES | SUNSHINE REPORTING & LITIGATION SERVICES, LLC | OTHER: VARIOUS | \$500,000 | |
| | Contract Description: | This is a new contract for court reporting services statewide from certified court reporters on an as needed basis. | | | | |
| | Term of Contract: | 01/09/2018 - 01/08/2022 | Contract # 19477 | | | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | |
|---|---|
| 1. Contract Number: 16120 | Amendment Number: 2 |
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Amerigas Propane, L.P. |
| Agency Code: MSA | Contractor Name: Amerigas Propane, L.P. |
| Appropriation Unit: 9999 - All Categories | Address: 460 N. Gulph Road |
| Is budget authority available?: Yes | City/State/Zip: King of Prussia, PA 19406 |
| If "No" please explain: Not Applicable | Contact/Phone: Dawn Stevenson 610-768-3601 |
| | Vendor No.: |
| | NV Business ID: NV19951066993 |

To what State Fiscal Year(s) will the contract be charged? **2015-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

Agency Reference #: **RFQ 3064**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/12/2014**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2018**

Contract term: **5 years and 81 days**

4. Type of contract: **MSA**

Contract description: **Bulk Fuel Purchase**

5. Purpose of contract:

This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$5,400,000 due to continued need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$5,000,000.00 | \$5,000,000.00 | \$5,000,000.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#2): | \$400,000.00 | \$400,000.00 | \$400,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$5,400,000.00 | | | |
| and/or the termination date of the original contract has changed to: | 01/31/2020 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for bulk fuel and delivery 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 bulk fuel and delivery services for the State.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 3064 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 19 vendors selected by the appointed eval. committee.

d. Last bid date: Anticipated re-bid date: 10/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 12/14/2017 08:36:01 AM |
| Division Approval | mstewa10 | 12/14/2017 08:36:21 AM |
| Department Approval | mstewa10 | 12/14/2017 08:36:24 AM |
| Contract Manager Approval | nfese1 | 12/14/2017 08:47:54 AM |
| Budget Analyst Approval | aurruty | 12/14/2017 15:39:48 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19407**

| | |
|---|--|
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Aronson Security Group, Inc. |
| Agency Code: MSA | Contractor Name: Aronson Security Group, Inc. |
| Appropriation Unit: 9999 - All Categories | Address: 600 Oakesdale Avenue Southwest Ste 100 |
| Is budget authority available?: Yes | City/State/Zip: Renton, WA 98057 |
| If "No" please explain: Not Applicable | Contact/Phone: Mark Barak 206-245-1433 |
| | Vendor No.: T29039668 |
| | NV Business ID: NV20171647958 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2019**

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

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is a new contract to provide statewide security and fire protection services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

All State agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in State facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

9. Were quotes or proposals solicited? Yes

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

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

PowerComm Solutions
Simplex Grinnell
Stanley Convergent

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/22/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 10/23/2017 09:28:12 AM |
| Division Approval | mstewa10 | 10/23/2017 09:28:16 AM |
| Department Approval | mstewa10 | 10/23/2017 09:28:19 AM |
| Contract Manager Approval | rmille8 | 11/13/2017 09:09:57 AM |
| Budget Analyst Approval | aurruty | 11/15/2017 13:21:15 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 15:26:20 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: **19472**

| | |
|---|--|
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Capitol Reporters |
| Agency Code: MSA | Contractor Name: Capitol Reporters |
| Appropriation Unit: 9999 - All Categories | Address: 123 West Nye Lane, Suite 107 |
| Is budget authority available?: Yes | City/State/Zip: Carson City, NV 89706 |
| If "No" please explain: Not Applicable | Contact/Phone: Michel Loomis 775-722-4479 |
| | Vendor No.: |
| | NV Business ID: NV19901014790 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

Agency Reference #: **RFQ 3429 - NF**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2022**

Contract term: **4 years**

4. Type of contract: **MSA**

Contract description: **Court Reporting**

5. Purpose of contract:

This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have occasional needs for court reporting 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 court reporters.

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):

**Shannon Taylor, CCR
Silver State Court Reporters
Litigation Services**

b. Solicitation Waiver: **Not Applicable**

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

This is a multiple award to various vendors who met the qualifications of the RFQ.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 previously provided court reporting services to State 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 registered with the Nevada Secretary of State's Office as a: Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/16/2017 13:11:41 PM |
| Division Approval | mstewa10 | 11/16/2017 13:11:43 PM |
| Department Approval | mstewa10 | 11/16/2017 13:11:46 PM |
| Contract Manager Approval | nfese1 | 11/17/2017 08:07:21 AM |
| Budget Analyst Approval | aurruty | 11/21/2017 14:40:14 PM |
| BOE Agenda Approval | lfree1 | 12/06/2017 11:26:46 AM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19496**

| | |
|---|---|
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Dale E. Nichols |
| Agency Code: MSA | Contractor Name: Dale E. Nichols |
| Appropriation Unit: 9999 - All Categories | Address: 41907 Bobbit Bench Road |
| Is budget authority available?: Yes | City/State/Zip: Peck, ID 83545 |
| If "No" please explain: Not Applicable | Contact/Phone: 208-486-6209 |
| | Vendor No.: |
| | NV Business ID: NV20101839436 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

Agency Reference #: RFQ 3282 - NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2020**

Contract term: **1 year and 364 days**

4. Type of contract: **MSA**

Contract description: **Fire Fuels Reduction**

5. Purpose of contract:

**This is a new contract to reduce fire fuels and vegetation in various locations throughout the State. This contract is awarded for:
Scope of Work 4.5 Seed Drills/Application.**

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$625,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

To reduce the risk of wildfires, fuels reduction must be completed in various locations.

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

This contract provides fuels services for agencies that do not have capability to do the work, and to assist when the volume of reduction services is such that staff cannot accomplish all work in a timely manner.

9. Were quotes or proposals solicited? Yes

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

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

Healthy Trees, Inc.
Summitt Forests, Inc.
Bordges Timer, Inc.

b. Solicitation Waiver: **Not Applicable**

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

This RFQ was awarded to 21 Vendors that qualified in the various scopes of work.

d. Last bid date: 05/10/2010 Anticipated re-bid date: 03/04/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 12/06/2017 10:19:38 AM |
| Division Approval | mstewa10 | 12/06/2017 10:19:41 AM |
| Department Approval | mstewa10 | 12/06/2017 10:19:44 AM |
| Contract Manager Approval | nfese1 | 12/06/2017 10:34:07 AM |
| Budget Analyst Approval | aurnuty | 12/08/2017 16:31:16 PM |
| BOE Agenda Approval | lfree1 | 12/11/2017 11:36:35 AM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **15225** Amendment Number: **2**
 Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Flyers Energy, LLC**
 Agency Code: **MSA** Contractor Name: **Flyers Energy, LLC**
 Appropriation Unit: **9999 - All Categories** Address: **655 S. Stanford Way**
 Is budget authority available?: **Yes** City/State/Zip: **Sparks, NV 89431**
 If "No" please explain: **Not Applicable** Contact/Phone: **Bob Prary 775-689-1234**
 Vendor No.:
 NV Business ID: **NV20111608326**

To what State Fiscal Year(s) will the contract be charged? **2014-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

Agency Reference #: **RFQ 3064**

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2014**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2018**
 Contract term: **6 years**

4. Type of contract: **MSA**
 Contract description: **Bulk Fuel Purchase**

5. Purpose of contract:
This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$15,000,000 due to continued need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|-----------------|-----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$5,000,000.00 | \$5,000,000.00 | \$5,000,000.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#2): | \$10,000,000.00 | \$10,000,000.00 | \$10,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$15,000,000.00 | | | |
| and/or the termination date of the original contract has changed to: | | 01/31/2020 | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for bulk fuel and delivery 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 bulk fuel and delivery services for the State.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 3064 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 10 Vendors selected by the appointed eval. committee.

d. Last bid date: Anticipated re-bid date: 10/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 12/14/2017 08:32:32 AM |
| Division Approval | mstewa10 | 12/14/2017 08:32:38 AM |
| Department Approval | mstewa10 | 12/14/2017 08:32:41 AM |
| Contract Manager Approval | nfese1 | 12/14/2017 08:45:45 AM |
| Budget Analyst Approval | aurruty | 12/14/2017 16:12:50 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **15520** Amendment Number: **2**
 Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Inter-State Oil Company**
 Agency Code: **MSA** Contractor Name: **Inter-State Oil Company**
 Appropriation Unit: **9999 - All Categories** Address: **50 Lillard Dr.**
 Is budget authority available?: **Yes** City/State/Zip: **Sparks, NV 89434**
 If "No" please explain: **Not Applicable** Contact/Phone: **Jim Motsinger 775-359-1586**
 Vendor No.:
 NV Business ID: **NV 19781011589**

To what State Fiscal Year(s) will the contract be charged? **2014-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

Agency Reference #: **RFQ 3064**

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2014**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2018**
 Contract term: **5 years and 264 days**

4. Type of contract: **MSA**
 Contract description: **Bulk Fuel Purchase**

5. Purpose of contract:
This is the second amendment to the original contract which provides bulk fuel purchase and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$8,000,000 due to continued need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|----------------|----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$5,000,000.00 | \$5,000,000.00 | \$5,000,000.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#2): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$8,000,000.00 | | | |
| and/or the termination date of the original contract has changed to: | | 01/31/2020 | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for bulk fuel and delivery 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 bulk fuel and delivery for the State.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 3064 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 13 Vendors selected by the appointed eval. committee.

d. Last bid date: Anticipated re-bid date: 10/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 12/14/2017 08:34:39 AM |
| Division Approval | mstewa10 | 12/14/2017 08:34:48 AM |
| Department Approval | mstewa10 | 12/14/2017 08:34:53 AM |
| Contract Manager Approval | nfese1 | 12/14/2017 08:47:12 AM |
| Budget Analyst Approval | aurruty | 12/14/2017 15:36:40 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19172** Amendment Number: **1**

Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Intraworks, Inc.**

Agency Code: **MSA** Contractor Name: **Intraworks, Inc.**

Appropriation Unit: **9999 - All Categories** Address: **7910 Lorraine Ct NE**

Is budget authority available?: **Yes** City/State/Zip: **Albuquerque, NM 87113**

If "No" please explain: **Not Applicable** Contact/Phone: **Kevin Mayer 505-884-1970**

Vendor No.: **T27041884**

NV Business ID: **NV20171514763**

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **07/31/2019**

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All state agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in state facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

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):

PowerComm Solutions
Stanley Convergent
RFI

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | Ideloach | 11/21/2017 15:27:16 PM |
| Division Approval | Ideloach | 11/21/2017 15:27:20 PM |
| Department Approval | Ideloach | 11/21/2017 15:27:23 PM |
| Contract Manager Approval | rmille8 | 11/21/2017 15:59:05 PM |
| Budget Analyst Approval | aurruty | 11/22/2017 16:53:53 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 14:48:49 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19173** Amendment Number: **1**

Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Justice Systems Corporation**

Agency Code: **MSA** Contractor Name: **Justice Systems Corporation**

Appropriation Unit: **9999 - All Categories** Address: **19428 66th Ave S Suite Q-109**

Is budget authority available?: **Yes** City/State/Zip: **Kent, WA 98032**

If "No" please explain: **Not Applicable** Contact/Phone: **Paul Allyn 253-236-4817**

Vendor No.: **T29039689**

NV Business ID: **NV20071308625**

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **07/31/2019**

Termination Date:

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All State agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in State facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 11/17/2017 12:21:09 PM |
| Division Approval | mstewa10 | 11/17/2017 12:21:12 PM |
| Department Approval | mstewa10 | 11/17/2017 12:21:36 PM |
| Contract Manager Approval | rmille8 | 11/17/2017 12:30:28 PM |
| Budget Analyst Approval | aurruty | 11/20/2017 13:24:20 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 14:55:21 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19479**

| | | | |
|---------------------------------|--------------------------------------|--------------------|--|
| Agency Name: | MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: | Litigation Services & Technologies of Nevada, LLC |
| Agency Code: | MSA | Contractor Name: | Litigation Services & Technologies of Nevada, LLC |
| Appropriation Unit: | 9999 - All Categories | Address: | 3770 Howard Hughes Parkway Suite 300 |
| Is budget authority available?: | Yes | City/State/Zip: | Las Vegas, NV 89169 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Linda Shaw 702-417-7697 |
| | | Vendor No.: | |
| | | NV Business ID: | NV20101855785 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

Agency Reference #: RFQ 3429 - NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2022**

Contract term: **4 years**

4. Type of contract: **MSA**

Contract description: **Court Reporting**

5. Purpose of contract:

This is a new contract for court reporting services statewide from certified court reporters on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have occasional needs for court reporting 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 court reporters.

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):

Shannon Taylor, CCR
Capitol Reporters
Silver State Court Reporters

b. Solicitation Waiver: **Not Applicable**

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

[Empty box]

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 previously provided court reporting services to State 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 registered with the Nevada Secretary of State's Office as a: Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/16/2017 13:14:39 PM |
| Division Approval | mstewa10 | 11/16/2017 13:14:41 PM |
| Department Approval | mstewa10 | 11/16/2017 13:14:44 PM |
| Contract Manager Approval | nfese1 | 11/17/2017 08:04:04 AM |
| Budget Analyst Approval | aurnuty | 12/12/2017 15:53:03 PM |
| BOE Agenda Approval | lfree1 | 12/13/2017 14:13:41 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: **19174** Amendment Number: **1**

Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **PowerComm Solutions, Inc.**

Agency Code: **MSA** Contractor Name: **PowerComm Solutions, Inc.**

Appropriation Unit: **9999 - All Categories** Address: **450 Sunshine Lane**

Is budget authority available?: **Yes** City/State/Zip: **Reno, NV 89502**

If "No" please explain: **Not Applicable** Contact/Phone: **Jesse Blanco 775-772-3317**

Vendor No.: **PUR0005587**

NV Business ID: **NV20001383279**

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date: **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **07/31/2019**

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment adds \$3,000,000 in total statewide contract authority and stipulates travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All state agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in state facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

9. Were quotes or proposals solicited? Yes

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

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

Stanley Convergent
Aronson Security Group
RFI

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 security vendor. No issues.

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

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

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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 | mstewa10 | 12/13/2017 14:20:33 PM |
| Division Approval | mstewa10 | 12/13/2017 14:20:36 PM |
| Department Approval | mstewa10 | 12/13/2017 14:20:39 PM |
| Contract Manager Approval | rmille8 | 12/13/2017 14:25:46 PM |
| Budget Analyst Approval | aurruty | 12/15/2017 11:47:15 AM |
| BOE Agenda Approval | lfree1 | 12/15/2017 11:55:19 AM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | |
|---|---|
| 1. Contract Number: 19176 | Amendment Number: 1 |
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: RFI Enterprises, Inc. DBA RFI Communications & Security Systems |
| Agency Code: MSA | Contractor Name: RFI Enterprises, Inc. DBA RFI Communications & Security Systems |
| Appropriation Unit: 9999 - All Categories | Address: 360 Turtle Creek Rd. |
| Is budget authority available?: Yes | City/State/Zip: San Jose, CA 95125 |
| If "No" please explain: Not Applicable | Contact/Phone: Dave Gish 775-852-3555 |
| | Vendor No.: PUR0002572 |
| | NV Business ID: NV20021334287 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **07/31/2019**

Termination Date:

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All State agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in State facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Current vendor and their services have been satisfactory.

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

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

Not Applicable

15. The contractor is 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 | mstewa10 | 11/17/2017 12:22:40 PM |
| Division Approval | mstewa10 | 11/17/2017 12:22:44 PM |
| Department Approval | mstewa10 | 11/17/2017 12:22:47 PM |
| Contract Manager Approval | rmille8 | 11/17/2017 12:31:45 PM |
| Budget Analyst Approval | aurruty | 11/20/2017 14:22:24 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 15:01:06 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: **15226** Amendment Number: **2**
 Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Rebel Oil Company, Inc.**
 Agency Code: **MSA** Contractor Name: **Rebel Oil Company, Inc.**
 Appropriation Unit: **9999 - All Categories** Address: **2200 S. Highland Drive**
 Is budget authority available?: **Yes** City/State/Zip: **Las Vegas, NV 89102**
 If "No" please explain: **Not Applicable** Contact/Phone: **Gregg Benson 702-382-5866**
 Vendor No.:
 NV Business ID: **NV 19541000076**

To what State Fiscal Year(s) will the contract be charged? **2014-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

Agency Reference #: **RFQ 3064**

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2014**
 Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **01/31/2018**
 Contract term: **6 years**

4. Type of contract: **MSA**
 Contract description: **Bulk Fuel Purchases**

5. Purpose of contract:
This is the second amendment to the original contract which provides bulk fuel purchases and delivery service. This amendment extends the termination date from January 31, 2018 to January 31, 2020 and increases the maximum amount from \$5,000,000 to \$20,000,000 due to continued need for these services.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|--|-----------------|-----------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$5,000,000.00 | \$5,000,000.00 | \$5,000,000.00 | Yes - Action |
| a. Amendment 1: | \$0.00 | \$0.00 | \$0.00 | No |
| 2. Amount of current amendment (#2): | \$15,000,000.00 | \$15,000,000.00 | \$15,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$20,000,000.00 | | | |
| and/or the termination date of the original contract has changed to: | | 01/31/2020 | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for bulk fuel and delivery 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 bulk fuel and delivery services for the State.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFQ 3064 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 10 Vendors selected by the appointed eval. committee.

d. Last bid date: Anticipated re-bid date: 10/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | mstewa10 | 12/14/2017 08:33:34 AM |
| Division Approval | mstewa10 | 12/14/2017 08:33:43 AM |
| Department Approval | mstewa10 | 12/14/2017 08:33:46 AM |
| Contract Manager Approval | nfese1 | 12/14/2017 08:46:25 AM |
| Budget Analyst Approval | aurruty | 12/14/2017 15:56:39 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **19475**

| | | | |
|---------------------------------|--------------------------------------|--------------------|-------------------------------|
| Agency Name: | MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: | Shannon L. Taylor, CCR |
| Agency Code: | MSA | Contractor Name: | Shannon L. Taylor, CCR |
| Appropriation Unit: | 9999 - All Categories | Address: | 1381 Valley View Drive |
| Is budget authority available?: | Yes | City/State/Zip: | Carson City, NV 89701 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Shannon Taylor 775-887-0472 |
| | | Vendor No.: | T81032297 |
| | | NV Business ID: | NV20101268195 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

Agency Reference #: RFQ 3429 - NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retrospective? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/08/2022**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Court Reporting**

5. Purpose of contract:

This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

State agencies have occasional needs for court reporting 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 court reporters.

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):

Silver State Court Reporters
Litigation Services
Capitol Reportersb. Solicitation Waiver: **Not Applicable**

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

This was a multiple award to various vendors who met the qualifications of the RFQ.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 previously provided court reporting services to State 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: 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:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/16/2017 13:15:16 PM |
| Division Approval | mstewa10 | 11/16/2017 13:15:19 PM |
| Department Approval | mstewa10 | 11/16/2017 13:15:22 PM |
| Contract Manager Approval | nfese1 | 11/17/2017 08:05:36 AM |
| Budget Analyst Approval | aurruty | 11/21/2017 12:21:16 PM |
| BOE Agenda Approval | lfree1 | 12/06/2017 11:50:36 AM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19473**

| | |
|---|---|
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Silver State Court Reporters, LLC |
| Agency Code: MSA | Contractor Name: Silver State Court Reporters, LLC |
| Appropriation Unit: 9999 - All Categories | Address: PO Box 51055 |
| Is budget authority available?: Yes | City/State/Zip: Sparks, NV 89435 |
| If "No" please explain: Not Applicable | Contact/Phone: Debra Bartgis 775-329-6323 |
| | Vendor No.: T80371610 |
| | NV Business ID: NV20011090507 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

Agency Reference #: RFQ 3429 - NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2022**

Contract term: **4 years**

4. Type of contract: **MSA**

Contract description: **Court Reporting**

5. Purpose of contract:

This is a new contract that continues ongoing court reporting services statewide from certified court reporters on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have occasional needs for court reporters.

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

The state does not employ court reporters.

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):

Capitol Reporters
Litigation Services
Shannon Taylor, CCR

b. Solicitation Waiver: **Not Applicable**

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

This was a multiple award to various vendors who met the qualifications of the RFQ.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 previously provided court reporting services to State 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 registered with the Nevada Secretary of State's Office as a:

LLC

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/16/2017 13:15:50 PM |
| Division Approval | mstewa10 | 11/16/2017 13:15:53 PM |
| Department Approval | mstewa10 | 11/16/2017 13:15:56 PM |
| Contract Manager Approval | nfese1 | 11/17/2017 08:06:18 AM |
| Budget Analyst Approval | aurruty | 11/21/2017 12:10:18 PM |
| BOE Agenda Approval | lfree1 | 12/06/2017 15:50:34 PM |
| BOE Final Approval | Pending | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19180** Amendment Number: **1**

Agency Name: **MSA MASTER SERVICE AGREEMENTS** Legal Entity Name: **Simplex Grinnell, LP**

Agency Code: **MSA** Contractor Name: **Simplex Grinnell, LP**

Appropriation Unit: **9999 - All Categories** Address: **50 Technology Drive**

Is budget authority available?: **Yes** City/State/Zip: **Westminster, MA 01441**

If "No" please explain: **Not Applicable** Contact/Phone: **Tom Staves 443-676-8813**

Vendor No.: **PUR0003182**

NV Business ID: **NV20011155948**

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **07/31/2019**

Termination Date:

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment will add \$3,000,000 in statewide contract authority and stipulate travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All State agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in State facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2020

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 MSA vendor with satisfactory service.

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

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

Not Applicable

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

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

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

Yes

- 19. Agency Field Contract Monitor:

- 20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/17/2017 12:23:52 PM |
| Division Approval | mstewa10 | 11/17/2017 12:23:56 PM |
| Department Approval | mstewa10 | 11/17/2017 12:23:59 PM |
| Contract Manager Approval | rmille8 | 11/17/2017 12:35:30 PM |
| Budget Analyst Approval | aurruty | 11/20/2017 14:59:01 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 15:05:59 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

| | |
|---|---|
| 1. Contract Number: 19181 | Amendment Number: 1 |
| Agency Name: MSA MASTER SERVICE AGREEMENTS | Legal Entity Name: Stanley Convergent Security Solutions, Inc. |
| Agency Code: MSA | Contractor Name: Stanley Convergent Security Solutions, Inc. |
| Appropriation Unit: 9999 - All Categories | Address: 55 Shuman Blvd, Ste 900 |
| Is budget authority available?: Yes | City/State/Zip: Naperville, IL 60563 |
| If "No" please explain: Not Applicable | Contact/Phone: Scott Wulforst 775-287-8110 |
| | Vendor No.: PUR0004352 |
| | NV Business ID: NV20041497886 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **07/31/2019**

Termination Date:

Contract term: **1 year and 272 days**

4. Type of contract: **MSA**

Contract description: **Security & Fire**

5. Purpose of contract:

This is the first amendment to the original contract, which provides fire/security equipment, installs new systems and provides warranty/maintenance services to state agencies. This amendment adds \$3,000,000 in total statewide contract authority and stipulates travel requirements.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|----------------|----------------|-----------------|--------------------|
| 1. The max amount of the original contract: | \$0.01 | \$0.01 | \$0.01 | Exception - Action |
| 2. Amount of current amendment (#1): | \$3,000,000.00 | \$3,000,000.00 | \$3,000,000.00 | Yes - Action |
| 3. New maximum contract amount: | \$3,000,000.01 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

All state agencies have some sort of fire suppression equipment ranging from fire extinguishers to kitchen fire suppression systems. It is necessary to service all of this equipment routinely to insure proper working order. Also, many of the security and protection systems currently installed in state facilities are past their manufacturer/installer warranty periods and continue to need maintenance.

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 service and maintain the various types of equipment.

9. Were quotes or proposals solicited? Yes

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

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

Simplex Grinnell
PowerComm Solutions
Aronson Security Group

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #3407 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 03/22/2017 Anticipated re-bid date: 05/20/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 MSA vendor with satisfactory services.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ldeloach | 11/21/2017 15:28:55 PM |
| Division Approval | ldeloach | 11/21/2017 15:28:58 PM |
| Department Approval | ldeloach | 11/21/2017 15:29:01 PM |
| Contract Manager Approval | rmille8 | 11/21/2017 15:59:32 PM |
| Budget Analyst Approval | aurruty | 11/22/2017 16:55:50 PM |
| BOE Agenda Approval | lfree1 | 12/08/2017 15:19:19 PM |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19477**

| | |
|--|--|
| Agency Name: MSA MASTER SERVICE AGREEMENTS Agency Code: MSA Appropriation Unit: 9999 - All Categories Is budget authority available?: Yes If "No" please explain: Not Applicable | Legal Entity Name: Sunshine Reporting & Litigation Services, LLC Contractor Name: Sunshine Reporting & Litigation Services, LLC Address: 151 Country Estates Cr. City/State/Zip: Reno, NV 89511 Contact/Phone: Linda Shaw 775-323-3411 Vendor No.: NV Business ID: NV20051008738 |
|--|--|

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

Agency Reference #: **RFQ 3429 - NF**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/08/2022**

Contract term: **4 years**

4. Type of contract: **MSA**

Contract description: **Court Reporting**

5. Purpose of contract:

This is a new contract for court reporting services statewide from certified court reporters on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have occasional needs for court reporting 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 court reporters.

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):

Silver State Court Reporters
Shannon L. Taylor, CCR
Capitol Reporters

b. Solicitation Waiver: **Not Applicable**

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

This was a multiple award to various vendors who met the qualifications of the RFQ.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 previously provided court reporting services to state 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 registered with the Nevada Secretary of State's Office as a: Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | mstewa10 | 11/16/2017 13:16:56 PM |
| Division Approval | mstewa10 | 11/16/2017 13:16:59 PM |
| Department Approval | mstewa10 | 11/16/2017 13:17:02 PM |
| Contract Manager Approval | nfese1 | 11/17/2017 08:04:51 AM |
| Budget Analyst Approval | aurnuty | 12/12/2017 16:08:22 PM |
| BOE Agenda Approval | lfree1 | 12/13/2017 14:17:50 PM |
| BOE Final Approval | Pending | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--------------------------------------|-------------------------------|----------|---|
| 1. | 030 | ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT | LARY SIMMS | OTHER: AGCAP | \$15,000 | Professional Service |
| | Contract Description: | This is a new contract to provide expert witness testimony on behalf of the State of Nevada in a post-conviction matter. | | | | |
| | | Term of Contract: | 12/04/2017 - 09/30/2019 | Contract # 19521 | | |
| 2. | 030 | ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT | PARK DIETZ & ASSOCIATES, INC. | OTHER: AGCAP | \$24,500 | Professional Service |
| | Contract Description: | This is a new contract to provide expert witness testimony related to a meth-induced psychosis case McLaughlin V. Williams, being heard in the United States District Court, Nevada. | | | | |
| | | Term of Contract: | 11/30/2017 - 12/31/2018 | Contract # 19493 | | |
| 3. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | BRIGGS ELECTRIC, INC. | OTHER: BUILDING RENTAL INCOME | \$45,000 | |
| | Contract Description: | This is a new contract to provide ongoing electrical services to state-owned buildings northern Nevada. | | | | |
| | | Term of Contract: | 11/20/2017 - 08/31/2021 | Contract # 19247 | | |
| 4. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | BUILDING CONTROL SERVICES, INC. | OTHER: BUILDING RENTAL INCOME | \$48,995 | |
| | Contract Description: | This is a new contract to provide ongoing heating, ventilation and air conditioning repairs and maintenance services for the Reno Nevada Highway Patrol Headquarters building. | | | | |
| | | Term of Contract: | 12/11/2017 - 09/30/2019 | Contract # 19253 | | |
| 5. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | DEL SOL LANDSCAPE CONSTRUCTION, INC. | OTHER: BUILDING RENTAL INCOME | \$15,000 | |
| | Contract Description: | This is the second amendment to the original contract which provides landscape services at three state-owned facilities: the Flamingo and Sahara DMV offices and the Grant Sawyer Office Building. This amendment increases the maximum amount from \$533,316 to \$548,316 due to the need to provide extra services to state-owned buildings in southern Nevada that were not covered under the original contract. | | | | |
| | | Term of Contract: | 10/11/2016 - 08/31/2020 | Contract # 18052 | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|-------------------------------|----------|---|
| 6. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | EIKELBERGER AWNING & DRAPERY, INC. | OTHER: BUILDING RENTAL INCOME | \$25,000 | |
| | Contract Description: | This is the second amendment to the original contract which manufactures, installs and/or repairs window dressings in state buildings in northern Nevada. This amendment increases the maximum amount from \$65,000 to \$90,000 due to demand and cost of services being greater than projected. | | | | |
| | | Term of Contract: | 04/01/2016 - 03/30/2020 | Contract # 17401 | | |
| 7. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | JOHNSON CONTROLS, INC. | OTHER: BUILDING RENTAL INCOME | \$25,000 | |
| | Contract Description: | This is a new contract to provide ongoing heating, ventilation and air conditioning (HVAC) repairs and maintenance services for state-owned buildings in southern Nevada. | | | | |
| | | Term of Contract: | 11/20/2017 - 11/15/2021 | Contract # 19133 | | |
| 8. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | R A ANKAVA, INC. DBA A ONE RATED CARPET CLEANING | OTHER: BUILDING RENTAL INCOME | \$25,000 | |
| | Contract Description: | This is a new contract to provide ongoing carpet cleaning services for state-owned buildings in southern Nevada. | | | | |
| | | Term of Contract: | 11/20/2017 - 10/31/2021 | Contract # 19404 | | |
| 9. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | SAVAGE AND SON | OTHER: BUILDING RENTAL INCOME | \$45,000 | |
| | Contract Description: | This is a new contract to provide ongoing plumbing, heating, ventilation and air conditioning backflow certification services to state buildings in northern Nevada. | | | | |
| | | Term of Contract: | 12/04/2017 - 11/15/2021 | Contract # 19467 | | |
| 10. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS | WOW CLEANING CORPORATION | OTHER: BUILDING RENTAL INCOME | \$45,000 | |
| | Contract Description: | This is a new contract to provide ongoing floor and window cleaning services for state-owned buildings in southern Nevada. | | | | |
| | | Term of Contract: | 12/04/2017 - 11/01/2021 | Contract # 19430 | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|----------------------|----------|---|
| 11. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - ENGINEERING AND PLANNING | GLOBAL CONSTRUCTION CONSULTING, LLC | FEE: INSPECTION FEES | \$10,000 | |
| | Contract Description: | This is a new contract to provide professional construction contracting consulting services to include complete document review and update of the current Owner-Contractor Design-Build Agreements and General Conditions forms, consultations and presentation of recommendations for document changes. | | | | |
| | Term of Contract: | 12/11/2017 - 06/30/2018 | Contract # 19416 | | | |
| 12. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC | RAYMOND P. CROOK DBA RPC ROOF CONSULTING | BONDS | \$15,000 | Professional Service |
| | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Washoe Valley Forestry Headquarters - Roof Replacement CIP project to include the development of recommendations for the removal of existing roofing materials base flashings and installation of new roofing components, development of bid documents, inspections/quality assurance services and a final roof inspection report: CIP Project No. 17-S01-4; SPWD Contract No. 111655. | | | | |
| | Term of Contract: | 12/04/2017 - 06/30/2021 | Contract # 19510 | | | |
| 13. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC | RAYMOND P. CROOK DBA RPC ROOF CONSULTING | BONDS | \$35,000 | Professional Service |
| | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Nevada National Guard, Office of the Adjutant General Building - Roof Replacement CIP project to include the development of recommendations for the removal of existing roofing materials base flashings and installation of new roofing components, development of bid documents, inspections/quality assurance services and a final roof inspection report: CIP Project No. 17-S0G2; SPWD Contract No. 111654. | | | | |
| | Term of Contract: | 12/04/2017 - 06/30/2021 | Contract # 19511 | | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|--------------------------------|----------|---|
| 14. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - 2013 DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC | ROUNDS ENGINEERING, LTD DBA CR ENGINEERING | BONDS | \$28,000 | Professional Service |
| | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Carson City Supreme Court Building - Central Plant Renovation CIP project to include construction administration and bidding services for the complete renovation of the existing central plant heating and cooling equipment, piping, cooling tower, associated pumps and controls: CIP Project No. 17-M40; SPWD Contract No. 11662. | | | | |
| | | Term of Contract: | 12/11/2017 - 06/30/2021 | Contract # 19536 | | |
| 15. | 082 | DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - CULTURAL AFFAIRS CIP PROJECTS - NON-EXEC | MATTHEW MYRES DBA MMI ENGINEERING | BONDS | \$18,400 | Professional Service |
| | Contract Description: | This is a new contract to provide professional architectural/engineering services for the Nevada State Museum - Boiler plant Renovation CIP project to include mechanical and electrical design and construction administration services for the replacement of two exiting boilers, pumps controls and associated piping components: CIP Project No. 17-M59; SPWD Contract No. 111658. | | | | |
| | | Term of Contract: | 12/04/2017 - 06/30/2021 | Contract # 19517 | | |
| 16. | 089 | DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS | CARA L. BROWN, ESQ. | OTHER: CHARGES FOR SERVICES | \$40,000 | Professional Service |
| | Contract Description: | This is a new contract to provide ongoing services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment, Training and Rehabilitation, Department of Education and Medicaid provider matters. | | | | |
| | | Term of Contract: | 09/01/2017 - 08/31/2019 | Contract # 19259 | | |
| 17. | 089 | DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS | MARK L. GENTILE | OTHER: CHARGES FOR SERVICES | \$40,000 | Professional Service |
| | Contract Description: | This is a new contract to provide ongoing services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment, Training and Rehabilitation, Department of Education and Medicaid provider matters. | | | | |
| | | Term of Contract: | 09/01/2017 - 08/31/2019 | Contract # 19427 | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|------------------------------|----------|---|
| 18. | 089 | DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS | VICTORIA T. OLDENBURG DBA OLDENBURG LAW OFFICE | OTHER: CHARGES FOR SERVICES | \$40,000 | Professional Service |
| | Contract Description: | This is a new contract to provide ongoing services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment, Training and Rehabilitation, Department of Education and Medicaid provider matters. | | | | |
| | Term of Contract: | 09/01/2017 - 08/31/2019 | Contract # 19332 | | | |
| 19. | 180 | DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - COMPUTER FACILITY | ENTERPRISE JANITORIAL, INC. | FEE: USER | \$28,626 | |
| | Contract Description: | This is a new contract to provide ongoing janitorial services for the computer facility. | | | | |
| | Term of Contract: | 12/01/2017 - 12/31/2018 | Contract # 19450 | | | |
| 20. | 180 | DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - TELE-COMMUNICATIONS | CAROUSEL INDUSTRIES | FEE: USER | \$26,290 | Sole Source |
| | Contract Description: | This is a new contract to provide installation, labor and professional services to implement new Enhanced 911 services. | | | | |
| | Term of Contract: | 11/21/2017 - 09/30/2018 | Contract # 19141 | | | |
| 21. | 240 | DEPARTMENT OF VETERANS SERVICES - GENERAL VETERANS SERVICES-FEES - NON-EXEC | ARBORGLYPH, LTD | OTHER: LICENSE PLATE CHARGES | \$23,000 | |
| | Contract Description: | This is a new contract to develop a new website duplicating the current design of veterans.nv.gov on the open source WordPress content management system. This includes developing a custom WordPress theme, porting and formatting all content, setting up hosting, establishing all basic features and training staff on use and maintenance of the new platform. | | | | |
| | Term of Contract: | 12/18/2017 - 12/17/2018 | Contract # 19484 | | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|--|--|--------------------------------|----------|---|
| 22. | 402 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER | A 1 MECHANICAL, INC. DBA A-1 MECHANICAL & ELECTRIC | GENERAL 50.2% FEDERAL 49.8% | \$20,000 | |
| | Contract Description: | This is a new contract to provide ongoing lighting repair, both indoor and outdoor, and maintenance services. | | | | |
| | | Term of Contract: | 01/01/2018 - 12/31/2021 | Contract # 19469 | | |
| 23. | 402 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER | CASHMAN EQUIPMENT COMPANY | GENERAL 50.2% FEDERAL 49.8% | \$21,784 | |
| | Contract Description: | This is a new contract to provide ongoing generator inspection and maintenance services. | | | | |
| | | Term of Contract: | 01/01/2018 - 12/31/2021 | Contract # 19463 | | |
| 24. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES | DELTA FIRE SYSTEMS, INC. | GENERAL | \$14,290 | |
| | Contract Description: | This is a new contract to provide ongoing quarterly/annual fire alarm inspections of Buildings 25 and 26 on the agency campus pursuant to Nevada State Fire Marshal licensing and Joint Commission accreditation requirements. | | | | |
| | | Term of Contract: | 09/01/2017 - 06/30/2019 | Contract # 18872 | | |
| 25. | 406 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES | ENVIRONMENTAL RESOURCES, INC. DBA EASY ROOTER | GENERAL | \$24,000 | |
| | Contract Description: | This is a new contract to provide ongoing plumbing services on a 24/7 basis for Northern Nevada Adult Mental Health Services and Lake's Crossing Center. | | | | |
| | | Term of Contract: | 11/20/2017 - 06/30/2019 | Contract # 19262 | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|-------------------------------|----------|---|
| 26. | 409 | DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CALIENTE YOUTH CENTER | DONNA LYNN DBA CUT'Z BY DONNA | GENERAL | \$20,000 | |
| | Contract Description: | This is a new contract to provide ongoing barber services for the youth. | | | | |
| | | Term of Contract: | 12/12/2017 - 10/31/2019 | Contract # 19501 | | |
| 27. | 431 | OFFICE OF THE MILITARY | FLORENCE FENCE, INC. | FEDERAL | \$15,000 | |
| | Contract Description: | This is a new contract to provide for the installation of 560 linear feet of security fencing around a newly acquired parcel at the Fallon facility. | | | | |
| | | Term of Contract: | 11/20/2017 - 06/30/2018 | Contract # 19486 | | |
| 28. | 431 | OFFICE OF THE MILITARY | PRECISION CRANE & HOIST SERVICES, INC. | FEDERAL | \$49,996 | |
| | Contract Description: | This is a new contract to provide crane repair, maintenance and inspection services for cranes used at all Nevada Guard sites statewide. | | | | |
| | | Term of Contract: | 11/20/2017 - 11/14/2021 | Contract # 19485 | | |
| 29. | 440 | DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS | RIDGE HOUSE, INC. | FEDERAL | \$28,156 | |
| | Contract Description: | This is a new contract to provide ongoing offender assessments for a minimum of 48 inmates housed at Northern Nevada Transitional Housing. Provided services are part of Nevada's strategic recidivism reduction plan developed for targeted offenders with substance abuse issues convicted of property crimes to assist with the completion of a re-entry plan as they prepare for release from incarceration. Measures of success will follow the targeted population through the program as part of the Second Chance Act Re-Entry grant. | | | | |
| | | Term of Contract: | 10/01/2017 - 09/30/2018 | Contract # 19374 | | |
| 30. | 550 | DEPARTMENT OF AGRICULTURE - REGISTRATION & ENFORCEMENT | MIA CONSULTING, LLC | FEE: PESTICIDE REGISTRATION | \$33,475 | |
| | Contract Description: | This is a new contract to provide ongoing work on the expansion of the current mapping application to include rangeland monitoring in conjunction with invasive plant mapping. | | | | |
| | | Term of Contract: | 10/01/2017 - 12/31/2019 | Contract # 19518 | | |
| 31. | 702 | DEPARTMENT OF WILDLIFE - GAME MANAGEMENT | WALTER WEHTJE | FEE: PREDATOR 25% FEDERAL 75% | \$24,000 | |
| | Contract Description: | This is a new contract to provide common raven captures, banding and recording and maintenance of information. | | | | |
| | | Term of Contract: | 11/27/2017 - 12/31/2019 | Contract # 19436 | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|---|--------------------------------------|----------|---|
| 32. | 702 | DEPARTMENT OF WILDLIFE - HABITAT | JERRY L. WILSON, DBA THE RELOCATOR, LLC | FEE: UPLAND GAME STAMP | \$27,600 | |
| | Contract Description: | This is a new contract to provide for the capture and translocation of approximately 150 mountain quail and approximately six Ruffed grouse from Oregon to Nevada in order to further establish and expand populations in the Fish Creek Mountains. | | | | |
| | Term of Contract: | 11/21/2017 - 01/31/2019 | Contract # 19382 | | | |
| 33. | 705 | DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES | MCMILLEN JACOBS ASSOCIATES | GENERAL 50% FEDERAL 50% | \$13,475 | |
| | Contract Description: | This is the first amendment to the original contract which provides engineering services that will support the agency in completing proposed repairs and maintenance activities at South Fork Dam. This amendment extends the termination date from December 10, 2017 to June 30, 2018 and increases the maximum amount from \$63,580 to \$77,065 due to the addition of seepage consultation to the scope of services and the continued need for these services. | | | | |
| | Term of Contract: | 05/10/2017 - 06/30/2018 | Contract # 18563 | | | |
| 34. | 901 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM | BALANCED POWER DBA BURNEYS COMMERCIAL SERVICE OF NEVADA, INC. | OTHER: BUSINESS ENTERPRISE SET-ASIDE | \$19,000 | |
| | Contract Description: | This is a new contract to provide for repair and maintenance service of commercial kitchen equipment located in northern Nevada. | | | | |
| | Term of Contract: | 01/01/2018 - 12/31/2020 | Contract # 19361 | | | |
| 35. | 901 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM | DCR CORPORATION DBA DESERT CASH REGISTER CORPORATION | OTHER: BUSINESS ENTERPRISE SET-ASIDE | \$20,000 | |
| | Contract Description: | This is a new contract to provide for maintenance and programming of electronic cash registers, point-of-sale terminals, merchant services and program monitors for kitchen systems at all existing and new locations in southern Nevada, including the 3 sites at the Hoover Dam. | | | | |
| | Term of Contract: | 12/12/2017 - 12/31/2019 | Contract # 19428 | | | |

INFORMATION CONTRACT SUMMARY

| BOE # | DEPT # | STATE AGENCY | CONTRACTOR | FUNDING SOURCE | AMOUNT | EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES |
|-------|-----------------------|---|--|----------------------------|----------|---|
| 36. | 908 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION – ADMINISTRATIVE SERVICES - INFORMATION DEVELOPMENT AND PROCESSING | CONVERGEONE, INC. | GENERAL | \$10,000 | |
| | Contract Description: | This is a new contract to provide planning, design and execution services to support the installation of the Cisco Ace F5 4600 network equipment. | | | | |
| | | Term of Contract: | 11/28/2017 - 06/30/2018 | Contract # 19338 | | |
| 37. | 908 | DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - ADMINISTRATIVE SERVICES | C&W LOCK GLASS & SAFE DBA ABC LOCK, GLASS & SAFE | OTHER: ALL BUDGET ACCOUNTS | \$10,500 | |
| | Contract Description: | This is a new contract to provide locksmith services for various state and non-state owned buildings located in northern Nevada. | | | | |
| | | Term of Contract: | 12/04/2017 - 11/30/2019 | Contract # 19457 | | |
| 38. | B007 | LICENSING BOARDS AND COMMISSIONS - DENTAL EXAMINERS | EDULOKA LIMITED DBA INLUMON | FEE: LICENSING | \$25,200 | |
| | Contract Description: | This is a new contract to provide software support for licensing software previously approved and installed. | | | | |
| | | Term of Contract: | 01/01/2018 - 12/31/2018 | Contract # 19194 | | |

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19521**

| | |
|--|---|
| Agency Name: ATTORNEY GENERAL'S OFFICE | Legal Entity Name: Lary Simms |
| Agency Code: 030 | Contractor Name: Lary Simms |
| Appropriation Unit: 1030-04 | Address: 1704 Pinto Dr |
| Is budget authority available?: Yes | City/State/Zip: Las Vegas, NV 89106 |
| If "No" please explain: Not Applicable | Contact/Phone: Lary Simms 702-561-8793 |
| | Vendor No.: T29039982 |
| | NV Business ID: NV20171711137 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2020 |

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2019**

Contract term: **1 year and 299 days**

4. Type of contract: **Contract**

Contract description: **Expert Witness**

5. Purpose of contract:

This is a new contract to provide expert witness testimony on behalf of the State of Nevada in a post-conviction matter.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

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

Other basis for payment: as described in scope of work

II. JUSTIFICATION

7. What conditions require that this work be done?

A medical expert is needed in a shaken baby case.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No state employees have the expertise

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

[Empty box]

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|---------|------------------------|
| Budget Account Approval | cschon1 | 12/04/2017 12:17:10 PM |
| Division Approval | cschon1 | 12/04/2017 12:17:12 PM |
| Department Approval | cschon1 | 12/04/2017 12:17:13 PM |
| Contract Manager Approval | cschon1 | 12/04/2017 15:21:26 PM |
| Budget Analyst Approval | myoun3 | 12/04/2017 15:27:07 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: **19493**

| | |
|--|---|
| Agency Name: ATTORNEY GENERAL'S OFFICE | Legal Entity Name: PARK DIETZ & ASSOCIATES INC |
| Agency Code: 030 | Contractor Name: PARK DIETZ & ASSOCIATES INC |
| Appropriation Unit: 1030-04 | Address: 2906 LAFAYETTE |
| Is budget authority available?: Yes | City/State/Zip: NEWPORT BEACH, CA 92663 |
| If "No" please explain: Not Applicable | Contact/Phone: Heidi Keyes 949/723-2211 |
| | Vendor No.: T32005871 |
| | NV Business ID: NV20111401431 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2019 |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % AGCAP |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/30/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2018**

Contract term: **1 year and 31 days**

4. Type of contract: **Contract**

Contract description: **Expert Witness**

5. Purpose of contract:

This is a new contract to provide expert witness testimony related to a meth-induced psychosis case McLaughlin V. Williams, being heard in the United States District Court, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,500.00**

Other basis for payment: As described in section 3 (Scope of Work)

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is necessary to adequately represent the State of Nevada in a post-conviction case.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no experts on this matter employed by the State.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **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. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

10%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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 | cschon1 | 11/28/2017 11:22:16 AM |
| Division Approval | cschon1 | 11/28/2017 11:22:18 AM |
| Department Approval | cschon1 | 11/28/2017 11:22:20 AM |
| Contract Manager Approval | cschon1 | 11/28/2017 11:22:23 AM |
| Budget Analyst Approval | myoun3 | 11/30/2017 08:24:19 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19247**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: BRIGGS ELECTRIC INC |
| Agency Code: 082 | Contractor Name: BRIGGS ELECTRIC INC |
| Appropriation Unit: 1349-12 | Address: 5111 CONVAIR DR |
| Is budget authority available?: Yes | City/State/Zip: CARSON CITY, NV 89706-0426 |
| If "No" please explain: Not Applicable | Contact/Phone: 775/887-9901 |
| | Vendor No.: T81091747A |
| | NV Business ID: NV19961075756 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % B&G Building Rental Income Revenue |

Agency Reference #: **ASD 2610518**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**

Anticipated BOE meeting date **10/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2021**

Contract term: **3 years and 284 days**

4. Type of contract: **Contract**

Contract description: **Electrical Services**

5. Purpose of contract:

This is a new contract which provides continues ongoing electrical services to state-owned buildings Northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Other basis for payment: Mon-Fri (7:00 am to 3:30 pm) regular time \$80 for service technician, \$120 for overtime, \$160 double time for Sundays/Holidays; 2 hour minimum with no trip or truck charge. See Attachment AA for additional charges.

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings and equipment must be operational at all times.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Electrical needs beyond the equipment, manpower and/or expertise of B&G personnel.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

UNITED ELECTRIC
TIMBERLINE ELECTRIC
BRIGGS ELECTRIC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several vendors. Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 08/01/2017 Anticipated re-bid date: 08/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Since 2006 to current date B&G has used Briggs Electric and work is satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

null, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 11/20/2017 06:45:23 AM |
| Division Approval | ssands | 11/20/2017 06:45:26 AM |
| Department Approval | ssands | 11/20/2017 06:45:30 AM |
| Contract Manager Approval | ssands | 11/20/2017 06:45:33 AM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 17:01:32 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19253**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: BUILDING CONTROL SERVICES, INC. |
| Agency Code: 082 | Contractor Name: BUILDING CONTROL SERVICES, INC. |
| Appropriation Unit: 1349-12 | Address: 4750 LONGLEY LANE SUITE 102 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89502 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-826-8998 |
| | Vendor No.: T27001755 |
| | NV Business ID: NV20021383335 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|---|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % B&G Building Rental Income Revenues |

Agency Reference #: **ASD 2605705**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/11/2017**

Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2019**

Contract term: **1 year and 292 days**

4. Type of contract: **Contract**

Contract description: **HVAC Maintenance**

5. Purpose of contract:

This is a new contract that continues ongoing heating, ventilation and air conditioning maintenance and repair services for the Reno Nevada Highway Patrol Headquarters building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$48,995.00**

Other basis for payment: \$1,238.00 per month for Year Six, \$1,275.00 per month for Year Seven, for HVAC maintenance, and \$345.00 per month for Year Six, \$337.75 per month for Year Seven, for water chemical treatment

II. JUSTIFICATION

7. What conditions require that this work be done?

Preventive maintenance is paramount to maintain HVAC equipment in working condition for the safety of employees and the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Equipment and services are beyond the expertise or manpower of state employees.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several HVAC contractors and per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 08/01/2017 Anticipated re-bid date: 08/01/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

B&G has used this vendor since 2012 and service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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 | ssands | 12/05/2017 12:45:45 PM |
| Division Approval | ssands | 12/05/2017 12:45:48 PM |
| Department Approval | ssands | 12/05/2017 12:45:52 PM |
| Contract Manager Approval | ssands | 12/05/2017 12:46:00 PM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 21:15:37 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18052** Amendment Number: **2**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**

Agency Code: **082** Contractor Name: **DEL SOL LANDSCAPE CONSTRUCTION, INC.**

Appropriation Unit: **1349-12** Address: **2509 E. RENO AVE.**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89120**

If "No" please explain: **Not Applicable** Contact/Phone: **702-604-0928**

To what State Fiscal Year(s) will the contract be charged? **2017-2021** Vendor No.: **T32004270**

NV Business ID: **NV20051136561**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building Rent Income Revenue |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/11/2016**

Anticipated BOE meeting date: **12/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/31/2020**

Contract term: **3 years and 325 days**

4. Type of contract: **Contract**

Contract description: **Landscaping**

5. Purpose of contract:

This is the second amendment to the original ongoing contract which provides landscape services at three state-owned facilities Las Vegas: the Flamingo and Sahara DMV offices and the Grant Sawyer Office Building. This amendment increases the maximum amount from \$533,316.00 to \$548,316.00 due to the need to provide extra services to state-owned buildings in Southern Nevada that were not covered under the original contract.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|--------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$117,604.00 | \$117,604.00 | \$117,604.00 | Yes - Action |
| a. Amendment 1: | \$415,712.00 | \$415,712.00 | \$415,712.00 | Yes - Action |
| 2. Amount of current amendment (#2): | \$15,000.00 | \$15,000.00 | \$15,000.00 | Yes - Info |
| 3. New maximum contract amount: | \$548,316.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is to provide landscape services to the Grant Sawyer Buildings, DMV Flamingo, and DMV Sahara.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State of Nevada does not employ landscape services for this area.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3255, 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: 06/01/2016 Anticipated re-bid date: 06/01/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | ssands | 11/20/2017 06:41:04 AM |
| Division Approval | ssands | 11/20/2017 06:41:10 AM |
| Department Approval | ssands | 11/20/2017 06:41:18 AM |
| Contract Manager Approval | ssands | 11/20/2017 06:41:28 AM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 16:42:58 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17401** Amendment Number: **2**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **EIKELBERGER AWNING & DRAPERY, Inc.**

Agency Code: **082** Contractor Name: **EIKELBERGER AWNING & DRAPERY, Inc.**

Appropriation Unit: **1349-12** Address: **1903 HYMER AVE.**

Is budget authority available?: **Yes** City/State/Zip: **SPARKS, NV 89431-5539**

If "No" please explain: **Not Applicable** Contact/Phone: **775-358-1903**

Vendor No.: **T80112468**

NV Business ID: **NV20081356503**

To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building and Grounds Rent Income Revenue |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2016**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **03/30/2020**

Termination Date:

Contract term: **3 years and 364 days**

4. Type of contract: **Contract**

Contract description: **Window Dressings**

5. Purpose of contract:

This is the second amendment to the original contract which, manufactures, installs and/or repairs window dressings in state buildings in Northern Nevada. This amendment increases the maximum amount from \$65,000 to \$90,000, due to demand/cost of services being greater than projected.

6. CONTRACT AMENDMENT

| | Trans \$ | Info Accum \$ | Action Accum \$ | Agenda |
|---|-------------|---------------|-----------------|--------------|
| 1. The max amount of the original contract: | \$40,000.00 | \$40,000.00 | \$40,000.00 | Yes - Info |
| a. Amendment 1: | \$25,000.00 | \$25,000.00 | \$65,000.00 | Yes - Action |
| 2. Amount of current amendment (#2): | \$25,000.00 | \$25,000.00 | \$25,000.00 | Yes - Info |
| 3. New maximum contract amount: | \$90,000.00 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

Many state office building windows are not a standard size, so blinds and draperies need to be custom made.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The agency lacks sufficient manpower and training to perform these services.

9. Were quotes or proposals solicited? Yes
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of multiple contractors for window coverings services on file. Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 12/16/2015 Anticipated re-bid date: 12/16/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

01/15/1999 to present, for Buildings and Grounds, service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 12/05/2017 12:44:41 PM |
| Division Approval | ssands | 12/05/2017 12:44:45 PM |
| Department Approval | ssands | 12/05/2017 12:44:50 PM |
| Contract Manager Approval | ssands | 12/05/2017 12:44:54 PM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 20:27:33 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19133**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: JOHNSON CONTROLS, INC. |
| Agency Code: 082 | Contractor Name: JOHNSON CONTROLS, INC. |
| Appropriation Unit: 1349-12 | Address: 3645 W OQUENDO RD . SUITE 400 |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89118-3145 |
| If "No" please explain: Not Applicable | Contact/Phone: 702-598-3472 |
| | Vendor No.: |
| | NV Business ID: NV19571000769 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Buildings and Grounds Building Rental Income Revenue |

Agency Reference #: **ASD2590540**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**
Anticipated BOE meeting date **12/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/15/2021**

Contract term: **3 years and 361 days**

4. Type of contract: **Contract**

Contract description: **HAVC REPAIRS**

5. Purpose of contract:

This is a new contract that provides ongoing HVAC repairs and maintenance service for state-owned buildings in Southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,000.00**

Other basis for payment: Controls tech regular rate \$169 per hour, OT rate \$253.50 per hour, Sunday/Holidays rate \$338 per hour; Chiller tech regular rate \$150 per hour, OT rate \$225 per hour, Sunday/Holiday rate \$300 per hour; HVAC tech regular rate \$139 per hour, OT rate \$208.50 per hour, Sunday/Holiday rate \$278 per hour; materials will be provided at cost plus 10%.

II. JUSTIFICATION

7. What conditions require that this work be done?

The HVAC systems equipment must be services, maintained, and repaired to ensure peak performance for employees and public safety.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This contract will cover any emergencies that is beyond Buildings and Grounds capacity.

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):

EMCOR
CARRIER CORP
JOHNSON CONTROLS

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Per SAM 0338.0, each contractor will be contacted to submit bids on projects. Pursuant to NRS 338.13862, Buildings and Grounds is using a Public Works board pre-qualified bidder.

d. Last bid date: 08/15/2017 Anticipated re-bid date: 08/15/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Since 1999 Johnson Controls has worked with B&G and service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 11/20/2017 06:44:18 AM |
| Division Approval | ssands | 11/20/2017 06:44:21 AM |
| Department Approval | ssands | 11/20/2017 06:44:30 AM |
| Contract Manager Approval | ssands | 11/20/2017 06:44:33 AM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 16:52:35 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19404**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: dba A ONE RATED CARPET CLEANING |
| Agency Code: 082 | Contractor Name: R A ANKAVA, INC. |
| Appropriation Unit: 1349-12 | Address: 3111 S. VALLEY VIEW BLVD. Suite A 204 |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89102 |
| If "No" please explain: Not Applicable | Contact/Phone: 702-795-3333 |
| | Vendor No.: T29039725 |
| | NV Business ID: NV20121126960 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|---|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Buildings and Grounds Rental Income Revenue |

Agency Reference #: **ASD 2603392**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**
Anticipated BOE meeting date **12/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/31/2021**
Contract term: **3 years and 345 days**

4. Type of contract: **Contract**
Contract description: **Carpet Cleaning**

5. Purpose of contract:
This is a new contract which provides ongoing carpet cleaning services for state-owned buildings in Southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,000.00**
Payment for services will be made at the rate of \$0.00 per foot
Other basis for payment: carpet cleaing is 0.20 per square foot;ceramic floor cleaning is 0.25 per square foot.

II. JUSTIFICATION

7. What conditions require that this work be done?
State buildings carpets need to be kept clean and sanitary for the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
B&G does not have the personnel to maintain carpets and flooring in state buildings.

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):

TURBO CLEAN
ACCURATE BUILDING MAINTENANCE
A ONE CARPET

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several contractors and per SAM 0338.0, each contractor will be contacted to submit bids on projects

d. Last bid date: 08/01/2017 Anticipated re-bid date: 08/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

This is a corporation (dba) 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:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 11/20/2017 06:46:50 AM |
| Division Approval | ssands | 11/20/2017 06:46:53 AM |
| Department Approval | ssands | 11/20/2017 06:46:56 AM |
| Contract Manager Approval | ssands | 11/20/2017 06:47:00 AM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 17:05:58 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19467**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: SAVAGE AND SON |
| Agency Code: 082 | Contractor Name: SAVAGE AND SON |
| Appropriation Unit: 1349-12 | Address: 3101 YORI AVENUE |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89510 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-828-4190 |
| | Vendor No.: T10115600 |
| | NV Business ID: NV19341000063 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2022 |
| What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources. | |
| General Funds 0.00 % | Fees 0.00 % |
| Federal Funds 0.00 % | Bonds 0.00 % |
| Highway Funds 0.00 % | X Other funding 100.00 % Buildings and Grounds Rental Income Reveune |

Agency Reference #: **ASD 2662329**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**
Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/15/2021**
Contract term: **3 years and 347 days**

4. Type of contract: **Contract**
Contract description: **Plumbing Services**

5. Purpose of contract:
This is a new contract that continues ongoing plumbing, heating ventilation and air conditioning/backflow certification services to state buildings in Northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**
Payment for services will be made at the rate of \$0.00 per hourly rate
Other basis for payment: Business hours are M-F 7-3:30 or M-F 8-4:30; Rates are Foreman, \$110 Straight time, \$165 Premium time, and \$220 double time; Journeyman rate are \$98 Straight time, \$147 Premium time and \$196 Double time. Material at actual plus 15%; Rentals at cost plus 15%; Subcontractors Cost plus 5%, Equipment/tools Large, power, hand 10% labor and backflow certification is Flat fee \$150 plus hourly labor.

II. JUSTIFICATION

7. What conditions require that this work be done?
It is necessary for state-owned buildings to be in proper working condition for the safety of employees and visitors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
B&G does not have personnel that possesses the equipment or expertise to perform these tasks.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of the several vendors and per SAM 0338.0 will be asked to bid on upcoming jobs.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Since 1999 and work is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ssands | 11/29/2017 07:58:29 AM |
| Division Approval | ssands | 11/29/2017 07:58:34 AM |
| Department Approval | ssands | 11/29/2017 07:58:37 AM |
| Contract Manager Approval | ssands | 11/29/2017 07:58:41 AM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 10:53:43 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19430**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: WOW CLEANING CORPORATION |
| Agency Code: 082 | Contractor Name: WOW CLEANING CORPORATION |
| Appropriation Unit: 1349-12 | Address: 2720 WRONDEL WAY SUITE A |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89502-8343 |
| If "No" please explain: Not Applicable | Contact/Phone: Thad Peterson, Regional Director 775-322-4787 |
| | Vendor No.: T27041430 |
| | NV Business ID: NV20141289535 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|--|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Building Rental Income Revenue |

Agency Reference #: **ASD 2654692**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**
Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/01/2021**

Contract term: **3 years and 332 days**

4. Type of contract: **Contract**

Contract description: **Flooring maintenance**

5. Purpose of contract:

This is a new contract which provides ongoing floor and window cleaning services for state-owned buildings in Southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Payment for services will be made at the rate of \$0.00 per square foot

Other basis for payment: \$.24 -.60 cents not to exceed .60 cents a sq. ft. Floor stripping & waxing all flooring charges will depend on the condition of the floor & carpet; \$.24 - .45 cents not to exceed .45 cents a sq. ft. Carpet cleaning; \$.30 - .75 cents not to exceed .75 cents a sq. ft. Tile & grout cleaning; \$ 42 - \$ 65(high rise) not to exceed \$65.00 hour Window cleaning.

II. JUSTIFICATION

7. What conditions require that this work be done?

Carpets and flooring need to be kept clean.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the personnel to handle floor maintenance of all state-owned buildings in Southern Nevada.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Turbo Carpet Cleaning
A One Rated Carpet Cleaning
WOW Cleaning

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | ssands | 11/29/2017 07:56:14 AM |
| Division Approval | ssands | 11/29/2017 07:56:17 AM |
| Department Approval | ssands | 11/29/2017 07:56:21 AM |
| Contract Manager Approval | ssands | 11/29/2017 07:56:24 AM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 21:09:24 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19416**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: GLOBAL CONSTRUCTION CONSULTING LLC |
| Agency Code: 082 | Contractor Name: GLOBAL CONSTRUCTION CONSULTING LLC |
| Appropriation Unit: 1562-04 | Address: P.O. Box 5238 |
| Is budget authority available?: Yes | City/State/Zip: Edwards , CO 81632 |
| If "No" please explain: Not Applicable | Contact/Phone: Gerald Katz 703-309-2922 |
| | Vendor No.: T32005357 |
| | NV Business ID: NV20131658355 |

To what State Fiscal Year(s) will the contract be charged? **2018**

What is the source of funds that will be used to 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 % Inspection Fees |
| Federal Funds | 0.00 % | | Bonds | 0.00 % |
| Highway Funds | 0.00 % | | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/11/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2018**

Contract term: **200 days**

4. Type of contract: **Contract**

Contract description: **Consultant**

5. Purpose of contract:

This is a new contract to provide professional Construction Contracting Consulting services to include complete document review and update of the current SPWD Owner-Contractor Design-Build Agreements and General Conditions forms, consultations and presentation of recommend document changes.

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 \$450.00 per hour

Other basis for payment: No mark-up on the following charges; reimbursement for long distance charges, computerized legal research (\$35/hr.), copy charges (\$0.25/pp), postage and similar disbursements will be itemized on invoices.

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a review of Owner-Contractor Agreements and General Conditions to advise of any outdated codes or laws that could cause a liability to the state.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise in all areas to perform this task.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Global Construction Consulting, LLC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | ssands | 11/29/2017 10:58:52 AM |
| Division Approval | ssands | 11/29/2017 10:58:56 AM |
| Department Approval | ssands | 11/29/2017 10:58:58 AM |
| Contract Manager Approval | ssands | 12/06/2017 07:55:53 AM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 21:34:37 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19510**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: CROOK, RAYMOND P DBA |
| Agency Code: 082 | Contractor Name: CROOK, RAYMOND P DBA |
| Appropriation Unit: 1585-43 | Address: RPC ROOF CONSULTING 14370 MOUNT SNOW DR. RENO, NV 89511-9185 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-9185 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-336-9396 |
| | Vendor No.: T29013770 |
| | NV Business ID: NV20101198067 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111655

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 208 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 Washoe Valley Forestry Headquarters - Roof Replacement CIP project to include the development of recommendations for the removal of existing roofing materials base flashings and the new installation of new roofing components, development of bid documents, inspections/quality assurance services and a final roof inspection report: CIP Project No. 17-S01-4; SPWD Contract No. 111655.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Lutz, Andrew, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/30/2017 12:21:24 PM |
| Division Approval | Imars1 | 11/30/2017 12:21:27 PM |
| Department Approval | Imars1 | 11/30/2017 12:21:30 PM |
| Contract Manager Approval | Imars1 | 11/30/2017 12:21:32 PM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 21:23:59 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19511**

| | |
|---|---|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: CROOK, RAYMOND P DBA |
| Agency Code: 082 | Contractor Name: CROOK, RAYMOND P DBA |
| Appropriation Unit: 1585-46 | Address: RPC ROOF CONSULTING 14370 MOUNT SNOW DR RENO, NV 89511-9185 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-9185 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-853-7202 |
| | Vendor No.: T29013770 |
| | NV Business ID: NV20101198067 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111654

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 208 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract which provides professional architectural/engineering services for the Nevada National Guard, Office of the Adjutant General Building - Roof Replacement CIP project to include the development of recommendations for the removal of existing roofing materials base flashings and the new installation of new roofing components, development of bid documents, inspections/quality assurance services and a final roof inspection report: CIP Project No. 17-S0G2; SPWD Contract No. 111654.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Lutz, Andrew, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/30/2017 12:37:01 PM |
| Division Approval | Imars1 | 11/30/2017 12:37:04 PM |
| Department Approval | Imars1 | 11/30/2017 12:37:07 PM |
| Contract Manager Approval | Imars1 | 11/30/2017 12:37:09 PM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 21:37:06 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: **19536**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: ROUNDS ENGINEERING LTD DBA |
| Agency Code: 082 | Contractor Name: ROUNDS ENGINEERING LTD DBA |
| Appropriation Unit: 1590-81 | Address: CR ENGINEERING 5434 LONGLEY LN |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-1879 |
| If "No" please explain: Not Applicable | Contact/Phone: 775/826-1919 |
| | Vendor No.: T29024113 |
| | NV Business ID: NV20041355601 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111662

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/11/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 201 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Carson City Supreme Court Building - Central Plant Renovation CIP project to include construction administration and bidding services for the complete renovation of the existing central plant heating and cooling equipment, piping, cooling tower, associated pumps and controls: CIP Project No. 17-M40; SPWD Contract No. 11662.

6. 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?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:
Nipp, Bruce, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 12/08/2017 13:15:57 PM |
| Division Approval | lmars1 | 12/08/2017 13:15:59 PM |
| Department Approval | lmars1 | 12/08/2017 13:16:02 PM |
| Contract Manager Approval | lmars1 | 12/08/2017 13:16:05 PM |
| Budget Analyst Approval | jrodrig9 | 12/11/2017 22:09:32 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19517**

| | |
|---|--|
| Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION | Legal Entity Name: MYRES, MATTHEW DBA |
| Agency Code: 082 | Contractor Name: MYRES, MATTHEW DBA |
| Appropriation Unit: 1592-27 | Address: MMI ENGINEERING 385 GENTRY WAY |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89502 |
| If "No" please explain: Not Applicable | Contact/Phone: 775-750-0849 |
| | Vendor No.: T29037325 |
| | NV Business ID: NV20131132840 |

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of 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 #: 111658

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**

Contract term: **3 years and 208 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract which provides professional architectural/engineering services for the Nevada State Museum - Boiler plant Renovation CIP project to include mechanical and electrical design and construction administration services for the replacement of two exiting boilers, pumps controls and associated piping components: CIP Project No. 17-M59; SPWD Contract No. 111658.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$18,400.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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: Nipp, Bruce, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/30/2017 14:53:00 PM |
| Division Approval | Imars1 | 11/30/2017 14:53:03 PM |
| Department Approval | Imars1 | 11/30/2017 14:53:06 PM |
| Contract Manager Approval | Imars1 | 11/30/2017 14:53:09 PM |
| Budget Analyst Approval | jrodrig9 | 12/04/2017 21:56:30 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: **19259**

| | |
|---|---|
| Agency Name: ADMIN - HEARINGS AND APPEALS DIVISION | Legal Entity Name: BROWN, CARA L DBA |
| Agency Code: 089 | Contractor Name: BROWN, CARA L DBA |
| Appropriation Unit: 1015-04 | Address: CARA L BROWN ESQ 3840 RUSSET FALLS ST |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89129-7644 |
| If "No" please explain: Not Applicable | Contact/Phone: 702/882-0226 |
| | Vendor No.: T27038150 |
| | NV Business ID: NV20151512744 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Charges for Services |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

Due to the critical need and backlog of cases the contractor began work on September 1, 2017. The letter of appointment was signed by the Governor on August 24, 2017 and did not leave ample time to complete the contract.

3. Termination Date: **08/31/2019**

Contract term: **1 year and 364 days**

4. Type of contract: **Contract**

Contract description: **Special Appeals Off.**

5. Purpose of contract:

This is a new contract that continues ongoing services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment Training and Rehabilitation, Department of Education and Medicaid provider matters.

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 \$100.00 per hour

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

Appeals Officer responsibilities include cases related to Division of Human Resources Management in accordance with NRS Chapter 284; Medicaid Provider Matters in accordance with NRS Chapter 422; Department of Training and Rehabilitation in accordance with NRS Chapter 615; Department of Education in accordance with NRS Chapter 391; and other matters as assigned by the Division. Pursuant to the Nevada Administrative Procedures Act (NRS Chapter 233B) decisions issued are subject to judicial review.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Hearing and Appeals does not have attorneys on staff. These are positions appointed by the Governor to conduct hearings for the Hearings Division on a case by case basis; they will be paid by the agencies who those hearings pertain to.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Appointment by the Governor as Special Appeals Officer

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Cara Brown is currently contracted with the State of Nevada starting 09-22-2015 thru 09-06-2017. 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: 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:

null, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | Imars1 | 11/27/2017 08:26:00 AM |
| Division Approval | Imars1 | 11/27/2017 08:26:03 AM |
| Department Approval | Imars1 | 11/27/2017 08:26:05 AM |
| Contract Manager Approval | Imars1 | 11/27/2017 08:26:08 AM |
| Budget Analyst Approval | knielsen | 12/13/2017 08:23:51 AM |



DEPARTMENT OF ADMINISTRATION
ADMINISTRATIVE SERVICES DIVISION

209 E. Musser Street, Room 304
Carson City, Nevada 89701-4204
(775) 684-0273
Fax (775) 684-0275

MEMORANDUM

TO: Executive Branch Budget Officer

FROM: Contracts Unit

DATE: October 4, 2017

SUBJECT: Cara L Brown
Mark Gentile
Paul Lamboley
Victoria Oldenburg
Robert Zentz

Special Hearings and Appeals Officers were appointed on August 24, 2017 by the Governor as a Special Hearings Officer for the Division of Hearings and Appeals.

Due to the critical need and backlog of cases the contractor began work on September 1, 2017. There was not enough time to process a new contract between August 24th and September 1, 2017.

We are confident this is not an ongoing issue and respectfully request a start date for this contract to be September 1, 2017.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19427**

| | |
|---|---|
| Agency Name: ADMIN - HEARINGS AND APPEALS DIVISION | Legal Entity Name: GENTILE, MARK L |
| Agency Code: 089 | Contractor Name: GENTILE, MARK L |
| Appropriation Unit: 1015-04 | Address: 4710 LOS RANCHEROS AVE |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89129-1815 |
| If "No" please explain: Not Applicable | Contact/Phone: 702/523-2653 |
| | Vendor No.: T27038165 |
| | NV Business ID: NV20041510532 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Charges for Services |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

Due to the critical need and backlog of cases the contractor began work on September 01, 2017. The letter of appointment was signed by the Governor on August 24, 2017 and did not leave ample time to complete the contract.

3. Termination Date: **08/31/2019**

Contract term: **1 year and 364 days**

4. Type of contract: **Contract**

Contract description: **Special Appeals Off.**

5. Purpose of contract:

This is a new contract that continues ongoing services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment Training and Rehabilitation, Department of Education and Medicaid provider matters.

6. 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?

Appeals Officer responsibilities include cases related to Division of Human Resource Management in accordance with NRS Chapter 284; Medicaid Provider Matters in accordance with NRS Chapter 422; Department of Training and Rehabilitation in accordance with NRS Chapter 615; Department of Education in accordance with NRS Chapter 391; and other matters as assigned by the Division. Pursuant to the Nevada administrative Procedures Act (NRS Chapter 233B) decisions issued are subject to judicial review.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Hearing and Appeals does not have attorneys on staff. These are positions appointed by the Governor to conduct hearings for the Hearings Division on a cases by case basis; they will be paid by the agencies who those hearings pertain to.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Appointed by the Governor as a Special Appeals Officer.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has previously been under contract (CETS # 17125 from 9/1/15 to 8/31/17) by this agency for similar services, which were performed satisfactorily.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a: Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | lmars1 | 11/21/2017 09:34:02 AM |
| Division Approval | lmars1 | 11/21/2017 09:34:04 AM |
| Department Approval | lmars1 | 11/21/2017 09:34:07 AM |
| Contract Manager Approval | lmars1 | 11/21/2017 09:34:10 AM |
| Budget Analyst Approval | knielsen | 12/27/2017 08:49:38 AM |

Brian Sandoval
Governor

STATE OF NEVADA

Patrick Cates
Director



EVAN DALE
Administrator

DEPARTMENT OF ADMINISTRATION
ADMINISTRATIVE SERVICES DIVISION

209 E. Musser Street, Room 304
Carson City, Nevada 89701-4204
(775) 684-0273
Fax (775) 684-0275

MEMORANDUM

TO: Executive Branch Budget Officer

FROM: Contracts Unit

DATE: October 4, 2017

SUBJECT: Cara L Brown
Mark Gentile
Paul Lamboley
Victoria Oldenburg
Robert Zentz

Special Hearings and Appeals Officers were appointed on August 24, 2017 by the Governor as a Special Hearings Officer for the Division of Hearings and Appeals.

Due to the critical need and backlog of cases the contractor began work on September 1, 2017. There was not enough time to process a new contract between August 24th and September 1, 2017.

We are confident this is not an ongoing issue and respectfully request a start date for this contract to be September 1, 2017.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19332**

| | |
|---|---|
| Agency Name: ADMIN - HEARINGS AND APPEALS DIVISION | Legal Entity Name: OLDENBURG, VICTORIA T DBA |
| Agency Code: 089 | Contractor Name: OLDENBURG, VICTORIA T DBA |
| Appropriation Unit: 1015-04 | Address: OLDENBURG LAW OFFICE PO BOX 17422 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-7422 |
| If "No" please explain: Not Applicable | Contact/Phone: 775/971-4245 |
| | Vendor No.: T29036037A |
| | NV Business ID: NV20141536952 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Charges for Services |

Agency Reference #: 089

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

This contractor was appointed by the Governor on August 24, 2017. Due to the critical need and backlog of cases, the contractor began work on September 1, 2017.

3. Termination Date: **08/31/2019**

Contract term: **1 year and 364 days**

4. Type of contract: **Contract**

Contract description: **Appeals Officer**

5. Purpose of contract:

This is a new contract which provides services as an appointed Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment, Training, and Rehabilitation, Department of Education and Medicaid provider matters.

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 \$100.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Appeals Officer responsibilities include cases related to Division of Human Resource Management in accordance with NRS Chapter 284; Medicaid Provider Matters in accordance with NRS Chapter 422; Department of Training and Rehabilitation in accordance with NRS Chapter 615; Department of Education in accordance with NRS Chapter 391; and other matters as assigned by the Division. Pursuant to the Nevada Administrative Procedures Act (NRS Chapter 233B) decisions to judicial review.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Hearings Division does not have attorneys on staff. These are positions appointed by the Governor to conduct hearings for the Hearings Division on a case by case basis; they will be paid by the agencies who those hearings pertain to.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 had a contract with Hearings and Appeals Division since March 2015 and 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: 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:

Vanessa G. Curiel, LSII Ph: 702-486-2741

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ddav12 | 10/04/2017 09:10:19 AM |
| Division Approval | ddav12 | 10/04/2017 09:10:22 AM |
| Department Approval | ddav12 | 10/04/2017 09:10:26 AM |
| Contract Manager Approval | ddav12 | 11/20/2017 07:02:19 AM |
| Budget Analyst Approval | knielsen | 11/21/2017 08:47:42 AM |



**DEPARTMENT OF ADMINISTRATION
ADMINISTRATIVE SERVICES DIVISION**

**209 E. Musser Street, Room 304
Carson City, Nevada 89701-4204
(775) 684-0273
Fax (775) 684-0275**

MEMORANDUM

TO: Executive Branch Budget Officer

FROM: Contracts Unit

DATE: October 4, 2017

SUBJECT: Cara L Brown
Mark Gentile
Paul Lamboley
Victoria Oldenburg
Robert Zentz

Special Hearings and Appeals Officers were appointed on August 24, 2017 by the Governor as a Special Hearings Officer for the Division of Hearings and Appeals.

Due to the critical need and backlog of cases the contractor began work on September 1, 2017. There was not enough time to process a new contract between August 24th and September 1, 2017.

We are confident this is not an ongoing issue and respectfully request a start date for this contract to be September 1, 2017.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19450**

| | |
|--|---|
| Agency Name: ADMIN - ENTERPRISE IT SERVICES | Legal Entity Name: ENTERPRISE JANITORIAL, INC. |
| Agency Code: 180 | Contractor Name: ENTERPRISE JANITORIAL, INC. |
| Appropriation Unit: 1385-07 | Address: PO BOX 19913 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89511-2559 |
| If "No" please explain: Not Applicable | Contact/Phone: 775/691-2939 |
| | Vendor No.: T32003728A |
| | NV Business ID: NV20141642364 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2019 |

What is the source of funds that will be used to 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 % User Fees |
| Federal Funds | 0.00 % | | Bonds | 0.00 % |
| Highway Funds | 0.00 % | | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2018**

Contract term: **1 year and 30 days**

4. Type of contract: **Contract**

Contract description: **Janitorial Contract**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services for the computer facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$28,626.00**

Payment for services will be made at the rate of \$2,365.50 per Month

Other basis for payment: Additional \$45.00 per hour/per cleaning crew staff member for any extra or emergency cleaning.

II. JUSTIFICATION

7. What conditions require that this work be done?

This facility is used by technicians on a full-time bases, resulting in janitorial services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Premier Janitorial
McNeils Cleaning Service
Enterprise Janitorial Services**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was the lowest bidder.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

2015 Buildings and Grounds. Service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a: Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Dennis Sannebeck, Facility Supervisor 3 Ph: (775) 684-4320

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|---------|------------------------|
| Budget Account Approval | ddav12 | 11/07/2017 11:32:45 AM |
| Division Approval | ddav12 | 11/07/2017 11:32:48 AM |
| Department Approval | ddav12 | 11/16/2017 09:19:42 AM |
| Contract Manager Approval | ddav12 | 11/16/2017 09:19:48 AM |
| Budget Analyst Approval | cmurph3 | 11/27/2017 09:15:01 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: **19141**

| | |
|--|--|
| Agency Name: ADMIN - ENTERPRISE IT SERVICES | Legal Entity Name: Carousel Industries |
| Agency Code: 180 | Contractor Name: Carousel Industries |
| Appropriation Unit: 1387-22 | Address: PO Box 842084 |
| Is budget authority available?: Yes | City/State/Zip: Boston, MA 02284-2084 |
| If "No" please explain: Not Applicable | Contact/Phone: Nancy Rosso-Klorman 702-553-7273 |
| | Vendor No.: PUR0005364A |
| | NV Business ID: NV20061748510 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to 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 % User |
| Federal Funds | 0.00 % | | Bonds | 0.00 % |
| Highway Funds | 0.00 % | | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/21/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2018**

Contract term: **312 days**

4. Type of contract: **Contract**

Contract description: **E911 Services**

5. Purpose of contract:

This is a new contract to provide installation, labor and professional services to implement new E911 services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$26,290.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Software and Maintenance needed for E911 project.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This project contains proprietary information.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 171102

Approval Date: 11/06/2017

c. Why was this contractor chosen in preference to other?

Carousel Industries was awarded the State of Nevada Avaya Communication Services Contract. Under the current contract, it covers Avaya maintenance and support for the State of Nevada Avaya Phone system. The current system provides call routing for all numbers, including digital and analog telephone lines, for 911 calls to be routed correctly to the local PSAP.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | ddav12 | 09/01/2017 12:38:15 PM |
| Division Approval | ddav12 | 09/01/2017 12:38:18 PM |
| Department Approval | ddav12 | 09/01/2017 12:38:22 PM |
| Contract Manager Approval | ddav12 | 11/20/2017 14:17:19 PM |
| Budget Analyst Approval | cmurph3 | 11/21/2017 12:39:25 PM |

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

| | |
|-----------------------------|--------|
| Purchasing Use Only: | |
| Approval#: | 171102 |

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

| | | | |
|----|---|-----------------------|-------------------------------|
| 1a | Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below: | | |
| | State Agency: <i>Department of Administration – Enterprise IT Services</i> | | |
| | <i>Contact Name and Title</i> | <i>Phone Number</i> | <i>Email Address</i> |
| | <i>Frederick Springer, Telecom, ITM</i> | <i>(775) 684-7340</i> | <i>fspringer@admin.nv.gov</i> |

| | | |
|----------------------------|-------------------|--|
| Vendor Information: | | |
| 1b | Identify Vendor: | <i>Carousel Industries</i> |
| | Contact Name: | <i>Nancy Rossa-Klorman</i> |
| | Address: | <i>5474 Longley Lane #100</i> |
| | Telephone Number: | <i>o: 949-797-7948 c: 702-553-7273</i> |
| | Email Address: | <i>nrosso-klorman@carouselindustries.com</i> |

| | | |
|----------------------------|-------------------|--|
| Vendor Information: | | |
| 1b | Identify Vendor: | |
| | Contact Name: | |
| | Address: | |
| | Telephone Number: | |
| | Email Address: | |

| | | |
|---|---------------------------------|-------------------------------------|
| Type of Waiver Requested – Check the appropriate type: | | |
| 1c | Sole or Single Source: | <input checked="" type="checkbox"/> |
| | Professional Service Exemption: | <input type="checkbox"/> |

| | | | | | |
|------------------------------|-------------------------|-----|-------------------------------------|----|--------------------------|
| Contract Information: | | | | | |
| 1d | Is this a new Contract? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| | Amendment: | # | | | |
| | CETS: | # | | | |

| | | |
|--------------|------------------------|--|
| Term: | | |
| 1e | One (1) Time Purchase: | <i>18 Months</i> |
| | Contract: | Start Date: <i>Nov 1, 2017</i> End Date: <i>March 31, 2019</i> |

| | | |
|----------------------|---------------------|--|
| Funding: 1387 | | |
| 1f | State Appropriated: | |
| | Federal Funds: | |

10/30/17

| | |
|------------------|-----------------------|
| Grant Funds: | |
| Other (Explain): | <i>Internal Funds</i> |

| | | |
|----|---|--------------------|
| 1g | Total Estimated Value of this Service Contract, Amendment or Purchase: | |
| | <i>Professional Service</i> | <i>\$26,290.00</i> |
| | <i>Software</i> | <i>\$31,275.00</i> |
| | <i>Maintenance</i> | <i>\$4,635.00</i> |
| | <i>Total</i> | <i>\$62,200.00</i> |

| | |
|---|--|
| 2 | Provide a description of work/services to be performed or commodity/good to be purchased: |
| | <i>The Enhanced 911 (E911) system will route correct VOIP call locations to the correct 911 Public Safety Answering Point (dispatch). Currently, many 911 calls are showing the location as 575 E. Third St in Carson City as the switch trunk location, even if the call was placed in Reno. The requested system will append all 911 calls from a specific range or IP address and show the correct physical location before it is answered at the dispatch location. This information will also contain the specific caller number so dispatch can return calls if necessary.</i> |

| | |
|---|---|
| 3 | What are the unique features/qualifications required for this service or good that are not available from any other vendor: |
| | <i>Carousel Industries was awarded the State of Nevada Avaya Communication Services Contract. Under the current contract, it covers Avaya maintenance and support for the State of Nevada Avaya Phone system. The current system provides call routing for all numbers, including digital and analog telephone lines, for 911 calls to be routed correctly to the local PSAP.</i> |
| | <i>VOIP Telephones require E911 to route calls and display call information to the local PSAP. The E911 system will utilize existing equipment and infrastructure for proper call flow.</i> |

| | |
|---|--|
| 4 | Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source: |
| | <i>The E911 system will utilize the existing telephone core equipment and the SilverNet infrastructure. Based off the recommendation from Carousel and Avaya who hold the telephone contract, the E911 system is the most efficient and practical service for VOIP telephones.</i> |

| | |
|---|--|
| 5 | Were alternative services or commodities evaluated? Check One. Yes: <input checked="" type="checkbox"/> No: <input type="checkbox"/> |
| | a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i> |
| | <i>The E911 system is an addition to the State phone core switch. Product compatibility is important to ensure proper call routing information and call flow. AT&T, Frontier and CenturyLink have offered similar services for their coverage areas, but it was not an optimal solution. It would divide the services to multiple vendors and could possibly isolate rural areas connected to the State switch and effect rural 911 calling abilities.</i> |
| | b. <i>If not, why were alternatives not evaluated?</i> |

| | | | | |
|---|---|------|-----|-------------------------------------|
| 6 | Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany | Yes: | No: | <input checked="" type="checkbox"/> |
| | | | | |

| | | | |
|---|--------------|--------------------------|---|
| <i>this request.</i> | | | |
| a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i> | | | |
| <i>Term</i> | <i>Value</i> | <i>Short Description</i> | <i>Type of Procurement (RFP#, RFQ#, Waiver #)</i> |
| <i>Start and End Dates</i> | | | |
| | \$ | | |
| | \$ | | |
| | \$ | | |
| | \$ | | |
| | \$ | | |

7 What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
If the State does not use a vendor who comprehensively understands the complexities of the EITS telephone enterprise, the result could cause extensive delays, and the other vendors would require an extensive education on our telephone system configuration and network topology. Using a different vendor puts EITS at risk for receiving an improperly and/or incompatible 911 solution. Installation by a different vendor could potentially place the entire telecom core at risk for an enterprise-wide outage if the upgrade is not accurately configured and completed. Using a separate maintenance contract from a different vendor could cause overlap of coverage and create potential conflicts between different maintenance contracts.

8 What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
The E911 system is part of the Avaya phone system, but is not covered under the current contract. Efforts have been made to ensure product compatibility, maintenance and support for the next 18 months. The intent is to incorporate E911 into next Communications Systems Products and Services contract.

9 Will this purchase obligate the State to this vendor for future purchases? Before selecting your answer, please review information included on Page 2, Section 9 of the instructions. Yes: No: X
 a. *If yes, please provide details regarding future obligations or needs.*
The E911 system for VOIP telephones will be added to the next RFP for the Communications Systems Products and Services contract in 2019

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Agency Representative Initiating Request

Print Name of Agency Representative Initiating Request

Date

Signature of Agency Head Authorizing Request

Print Name of Agency Head Authorizing Request

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Administrator, Purchasing Division or Designee

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: **19484**

| | |
|---|--|
| Agency Name: DEPARTMENT OF VETERANS SERVICES | Legal Entity Name: Arboryglyph LTD |
| Agency Code: 240 | Contractor Name: Arboryglyph LTD |
| Appropriation Unit: 2564-10 | Address: 1515 Plumas Street |
| Is budget authority available?: Yes | City/State/Zip: Reno, NV 89509 |
| If "No" please explain: Not Applicable | Contact/Phone: Mike Henderson, Owner 775-762-4058 |
| | Vendor No.: T32005228 |
| | NV Business ID: NV20161011649 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---------------|--------|------------------------|---------------------------------------|
| General Funds | 0.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | X Other funding | 100.00 % Veterans Gift Account |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/18/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/17/2018**

Contract term: **364 days**

4. Type of contract: **Contract**

Contract description: **Website development**

5. Purpose of contract:

This is a new contract to develop a new website duplicating the current design of veterans.nv.gov on the open source WordPress content management system (CMS). This includes developing a custom WordPress theme, porting and formatting all content, setting up hosting, establishing all basic features and training staff on use and maintenance of the new platform.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$23,000.00**

Other basis for payment: \$7,666.67 upon engagement; \$7,666.66 upon 50% completion; and \$7,666.67 upon approval of completed website and submission of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

This will allow for the modernization of the NDVS website that will ensure NDVS is not beholden to reoccurring subscriptions and independent developer updates for continuity.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No state employees are available to perform these tasks.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

The Abbi Agency
Arborglyph, LTD
Argentum Partners

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Local vendor offered the best proposal to meet the needs of NDVS.

d. Last bid date: 11/06/2017 Anticipated re-bid date: 10/01/2018

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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 | agarland | 11/17/2017 08:59:01 AM |
| Division Approval | agarland | 11/17/2017 08:59:04 AM |
| Department Approval | agarland | 11/17/2017 08:59:08 AM |
| Contract Manager Approval | agarland | 11/17/2017 08:59:12 AM |
| EITS Approval | lolso3 | 11/20/2017 08:06:10 AM |
| Budget Analyst Approval | bmacke1 | 11/21/2017 07:40:41 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19469**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | DHHS - AGING AND DISABILITY SERVICES DIVISION | Legal Entity Name: | A 1 MECHANICAL INC DBA A-1 MECHANICAL & ELECTRIC |
| Agency Code: | 402 | Contractor Name: | A 1 MECHANICAL INC DBA A-1 MECHANICAL & ELECTRIC |
| Appropriation Unit: | 3279-07 | Address: | 5985 POLARIS AVE |
| Is budget authority available?: | Yes | City/State/Zip: | LAS VEGAS, NV 89118 |
| If "No" please explain: | Not Applicable | Contact/Phone: | JIM VAN 702-363-6222 |
| | | Vendor No.: | T32004626 |
| | | NV Business ID: | NV20031352518 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|----------------|---------------|--------|
| X General Funds | 50.20 % | Fees | 0.00 % |
| X Federal Funds | 49.80 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2018**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2021**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **In/Outdoor Lighting**

5. Purpose of contract:

This is a new contract to provide ongoing lighting repair both indoor and outdoor and maintenance services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: Per invoice after job completion per term of contract

II. JUSTIFICATION

7. What conditions require that this work be done?

Per the Code of Federal Regulations Title 42, Chapter 483.70 Physical Environment - the facility must be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public.

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 exceed the skills of state employees.

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):

Robertson Bright
Young Electric Sign Co.
A-1 Mechanical

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor is able to provide the needed services at the best cost.

d. Last bid date: 10/02/2017 Anticipated re-bid date: 08/02/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Christine Cochran, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dbowma1 | 11/20/2017 10:01:50 AM |
| Division Approval | dbowma1 | 11/20/2017 10:01:54 AM |
| Department Approval | vmilazz1 | 11/20/2017 17:48:51 PM |
| Contract Manager Approval | ltuttl1 | 11/22/2017 12:06:22 PM |
| Budget Analyst Approval | bwooldri | 11/27/2017 13:52:50 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19463**

| | | | |
|---------------------------------|--|--------------------|----------------------------------|
| Agency Name: | DHHS - AGING AND DISABILITY SERVICES DIVISION | Legal Entity Name: | CASHMAN EQUIPMENT COMPANY |
| Agency Code: | 402 | Contractor Name: | CASHMAN EQUIPMENT COMPANY |
| Appropriation Unit: | 3279-07 | Address: | 3300 SAINT ROSE PKWY |
| Is budget authority available?: | Yes | City/State/Zip: | HENDERSON, NV 89052 |
| If "No" please explain: | Not Applicable | Contact/Phone: | JEFF HAYEK 702-540-5347 |
| | | Vendor No.: | PUR0000249 |
| | | NV Business ID: | NV19601000406 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---|----------------|---------------|--------|
| <input checked="" type="checkbox"/> General Funds | 50.20 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> Federal Funds | 49.80 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2018**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2021**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Generator Maint/Insp**

5. Purpose of contract:

This is a new contract to provide ongoing generator inspection and maintenance services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,784.00**

Other basis for payment: (8) semi annual payments at \$1,223.00 as invoiced for inspections and up to \$12,000 for repairs as invoiced as needed over term of contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

Per the Code of Federal Regulations Title 42, Chapter 483.70 Physical Environment - The facility must be designed, constructed, equipped and maintained to protect the health and safety of residents, personnel and the public.

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. Agency staff do not have the required certifications for working on life safety emergency power generators.

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):

Gen-Tech
Cashman Equipment
Cummins

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Cashman is able to provide the needed services at the best cost.

d. Last bid date: 09/11/2017 Anticipated re-bid date: 08/02/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 for ADSD, but shows history in DAWN they are setup as a vendor for other State agencies.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Christine Cochran, null Ph: null

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dbowma1 | 11/30/2017 14:13:35 PM |
| Division Approval | dbowma1 | 11/30/2017 14:13:38 PM |
| Department Approval | vmilazz1 | 12/06/2017 09:36:08 AM |
| Contract Manager Approval | ltuttl1 | 12/06/2017 14:51:17 PM |
| Budget Analyst Approval | bwooldri | 12/07/2017 09:22:38 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18872**

| | |
|---|---|
| Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH | Legal Entity Name: DELTA FIRE SYSTEMS |
| Agency Code: 406 | Contractor Name: DELTA FIRE SYSTEMS |
| Appropriation Unit: 3162-07 | Address: 1655 Marietta Way #106 |
| Is budget authority available?: Yes | City/State/Zip: Sparks, NV 89431 |
| If "No" please explain: Not Applicable | Contact/Phone: HARRY GLEDHILL 775-359-0396 |
| | Vendor No.: T80922753A |
| | NV Business ID: NV19691001803 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|-----------------|---------------|--------|
| X General Funds | 100.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: C 16021

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 12/2017

Retroactive? **Yes**

If "Yes", please explain

This contract process was started in June 2017 and was sent to the vendor for signature. The vendor had taken a long time to sign the contract. In the meantime, the annual inspection required by JCAHO was performed in September 2017. This is a safety service contract and if not allowed to be retroactive, will prevent Northern Nevada Adult Mental Health Services from keeping the consumers and employees in a safe environment.

3. Termination Date: **06/30/2019**

Contract term: **1 year and 302 days**

4. Type of contract: **Contract**

Contract description: **Alarm Inspection**

5. Purpose of contract:

This is a new contract to provide ongoing quarterly/annual fire alarm inspections of Buildings 25 and 26 on the agency campus pursuant to Nevada State Fire Marshal licensing and Joint Commission accreditation requirements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,290.00**

Other basis for payment: Per Attachment AA

II. JUSTIFICATION

7. What conditions require that this work be done?

The National Fire Protection Association (NFPA) requires that all fire protection systems be tested by personnel that are qualified and experienced in the inspection, testing and maintenance of fire systems. It is imperative these inspections be carried out to ensure the life, safety and well being of staff and patients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have certification for this type work.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Delta Fire Systems
Ferguson and Fire
Desert Fire

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor is an authorized manufacturer repair and service company. It also provided the lowest cost for the services required.

d. Last bid date: 04/08/2017 Anticipated re-bid date: 04/01/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | rmorse | 11/13/2017 15:53:10 PM |
| Division Approval | rmorse | 11/13/2017 15:53:16 PM |
| Department Approval | vmilazz1 | 11/17/2017 16:11:09 PM |
| Contract Manager Approval | rmorse | 11/20/2017 09:52:18 AM |
| Budget Analyst Approval | nhovden | 11/21/2017 09:50:54 AM |

BRIAN SANDOVAL
Governor

RICHARD WHITLEY, MS
Director

STATE OF NEVADA



AMY ROUKIE, MBA
Administrator

LEON RAVIN, MD
Acting Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

Lake's Crossing Center
500 Galletti Way
Sparks, NV 89431

Telephone: (775) 688-1900 · Fax: (775) 688-1909

November 9, 2017

MEMORANDUM

TO: **Nikki Hovden**
Budget Analyst
Budget Division

THROUGH: **Mark Winebarger**
Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: **Christina Brooks**
Agency Director
Northern Nevada Adult Mental Health Services

SUBJECT: **REQUEST FOR RETROACTIVE START DATE OF CONTRACT –September 1, 2017 (CETS #18872)**

This memorandum requests that the contract between Northern Nevada Adult Mental Health Services and Delta Fire Systems for fire system inspections be approved for a retroactive start date effective September 1, 2017. This contract provides fire system inspection to Northern Nevada Adult Mental Health Services for safety of the employees and consumers and is a Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

This contract process was started in June 2017 and was sent to the vendor for signature. The vendor had taken a long time to sign the contract. In the meantime, the annual inspection required by JCAHO was performed in September 2017.

In the future, more time will be given to complete the contract process and more prompts to the vendor to have the signature process completed in a timelier manner.

We therefore request that this contract be accepted with a retroactive date of September 1, 2017. This is a safety service contract and if not allowed to be retroactive, will prevent Northern Nevada Adult Mental Health Services from keeping the consumers and employees in a safe environment.

Thank you for your consideration in this matter.

CC: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19262**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | DHHS - PUBLIC AND BEHAVIORAL HEALTH | Legal Entity Name: | ENVIRONMENTAL RESOURCES, INC. |
| Agency Code: | 406 | Contractor Name: | ENVIRONMENTAL RESOURCES, INC. |
| Appropriation Unit: | 3162-07 | Address: | DBA EASY ROOTER 125 London Drive Sparks, NV 89434-5600 |
| Is budget authority available?: | Yes | City/State/Zip: | Sparks, NV 89434-5600 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Dennis Smock 775/331-3636 |
| | | Vendor No.: | T81092524A |
| | | NV Business ID: | NV19901008172 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|-----------------|---------------|--------|
| X General Funds | 100.00 % | Fees | 0.00 % |
| Federal Funds | 0.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

Agency Reference #: C 16016

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2019**

Contract term: **1 year and 221 days**

4. Type of contract: **Contract**

Contract description: **PLUMBING SERVICE**

5. Purpose of contract:

This is a new contract that continues ongoing plumbing services on a 24/7 basis for Northern Nevada Adult Mental Health Services and Lake's Crossing Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00**

Payment for services will be made at the rate of \$24,000.00 per Attachment AA

II. JUSTIFICATION

7. What conditions require that this work be done?

Northern Nevada Adult Mental Health Services and Lake's Crossing Center sewer lines are old and get clogged with tree root requiring heavy machinery to clear blockages. Due to the old interior plumbing, lines get blockages that require clearing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Maintenance staff can clean and/or service minor problems. The facility does not have the necessary equipment for severe problems.

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):

Environmental Resources Inc, dba Easy Rooter
Jet Plumbing
Roto Rooter

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor gives both facilities a preferred customer discount on labor and agreed to the labor costs over term of contract.

d. Last bid date: 07/18/2017 Anticipated re-bid date: 05/14/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Chao, Yeng, ASO II Ph: 775-688-2032

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | rmorse | 11/13/2017 11:15:58 AM |
| Division Approval | rmorse | 11/13/2017 11:16:01 AM |
| Department Approval | vmilazz1 | 11/15/2017 12:36:23 PM |
| Contract Manager Approval | slabranc | 11/16/2017 15:13:28 PM |
| Budget Analyst Approval | nhovden | 11/20/2017 10:55:25 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: **19501**

| | |
|---|--|
| Agency Name: DHHS - DIVISION OF CHILD AND FAMILY SERVICES Agency Code: 409 Appropriation Unit: 3179-04 Is budget authority available?: Yes If "No" please explain: Not Applicable | Legal Entity Name: Donna Lynn dba Cut'z by Donna Contractor Name: Donna Lynn dba Cut'z by Donna Address: 414 Mountain View Street City/State/Zip: Pioche, NV 89043 Contact/Phone: Donna Lynn 775-962-2700 Vendor No.: NV Business ID: NV20171743809 |
|---|--|

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | | |
|----------|---------------|----------|---------------|--------|
| X | General Funds | 100.00 % | Fees | 0.00 % |
| | Federal Funds | 0.00 % | Bonds | 0.00 % |
| | Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**
 Anticipated BOE meeting date 02/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/31/2019**
 Contract term: **1 year and 322 days**

4. Type of contract: **Contract**
 Contract description: **Barber Services**

5. Purpose of contract:
This is a new contract to provide ongoing barber services for the youth.

6. NEW CONTRACT
 The maximum amount of the contract for the term of the contract is: **\$20,000.00**
 Payment for services will be made at the rate of \$7.25 per Haircut
 Other basis for payment: This is a Not to Exceed rate for each haircut.

II. JUSTIFICATION

7. What conditions require that this work be done?
Youth in resident require routine barber services by licensed professionals to maintain appropriate grooming.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
The division does not employ a licensed barber.

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):
Cutz by Donna
Ballin Fades
Amanda Lamb

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The agency contracted with all vendors that met the minimum qualifications.

d. Last bid date: 08/28/2017 Anticipated re-bid date: 08/06/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Sheryl Johnson, Admin Services Officer 1 Ph: 775-726-8200

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dander16 | 11/29/2017 08:56:19 AM |
| Division Approval | pcolegro | 12/06/2017 11:17:33 AM |
| Department Approval | vmilazz1 | 12/10/2017 14:05:30 PM |
| Contract Manager Approval | sknigge | 12/11/2017 10:09:07 AM |
| Budget Analyst Approval | nhovden | 12/12/2017 10:44:54 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19486**

| | |
|---|--|
| Agency Name: ADJUTANT GENERAL & NATIONAL GUARD | Legal Entity Name: FLORENCE FENCE, INC. |
| Agency Code: 431 | Contractor Name: FLORENCE FENCE, INC. |
| Appropriation Unit: 3650-10 | Address: 2597 NOWLIN RD |
| Is budget authority available?: Yes | City/State/Zip: MINDEN, NV 89423-8903 |
| If "No" please explain: Not Applicable | Contact/Phone: Mike Florence 775-228-2244 |
| | Vendor No.: T29036140 |
| | NV Business ID: NV20061553949 |

To what State Fiscal Year(s) will the contract be charged? **2018**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|-----------------|---------------|--------|
| General Funds | 0.00 % | Fees | 0.00 % |
| X Federal Funds | 100.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**
Anticipated BOE meeting date **01/2018**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2018**

Contract term: **221 days**

4. Type of contract: **Contract**

Contract description: **Security Fence**

5. Purpose of contract:

This is a new contract for the installation of 560 linear feet of security fencing around a newly acquired parcel at the National Guard Facility in Fallon.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to install additional security fencing around a newly acquired parcel at the National Guard Facility in Fallon to reestablish original boundary of the parcel.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the necessary equipment nor time to provide the installation of fencing.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Tholl Fence
Florence Fence
Artistic Fence**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor provided a quote that was economically better than the other vendors.

d. Last bid date: 10/05/2017 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a: Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ctyle1 | 11/17/2017 13:40:02 PM |
| Division Approval | ctyle1 | 11/17/2017 13:40:05 PM |
| Department Approval | ctyle1 | 11/17/2017 13:40:07 PM |
| Contract Manager Approval | ctyle1 | 11/17/2017 13:40:10 PM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 16:01:53 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19485**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | ADJUTANT GENERAL & NATIONAL GUARD | Legal Entity Name: | PRECISION CRANE & HOIST SERVICES, INC. |
| Agency Code: | 431 | Contractor Name: | PRECISION CRANE & HOIST SERVICES, INC. |
| Appropriation Unit: | 3650-10 | Address: | 2047 Pabco Road |
| Is budget authority available?: | Yes | City/State/Zip: | HENDERSON, NV 89011 |
| If "No" please explain: | Not Applicable | Contact/Phone: | Roger Caubill 702-979-3834 |
| | | Vendor No.: | T29005556A |
| | | NV Business ID: | NV20051280421 |

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|-----------------|---------------|--------|
| General Funds | 0.00 % | Fees | 0.00 % |
| X Federal Funds | 100.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/14/2021**

Contract term: **3 years and 360 days**

4. Type of contract: **Contract**

Contract description: **Crane Services**

5. Purpose of contract:

This is a new contract to provide crane repair, maintenance and inspection services for cranes used at all Nevada Guard sites statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,996.00**

Payment for services will be made at the rate of \$12,499.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a new contract to provide crane services that range from repair, service work, annual inspections and certifications, maintenance works, load or system testing and all other services associated with cranes for all of the National Guard locations statewide.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agency personnel do have the equipment or the requisite skills and certifications to perform this service.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Atlas Crane
Langford Crane Service Inc.
Houston's Crane Service
Crane West Service
Inquipco
Dielco Crane Service
Silver State Wire Rope and Rigging
Kone Cranes
American Equipment
Precision Crane & Hoist
Lift Equipment Certification Company Inc.
Walker Crane

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as the lowest bidder for this service.

d. Last bid date: 09/12/2017 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | ctyle1 | 11/17/2017 12:58:01 PM |
| Division Approval | ctyle1 | 11/17/2017 12:58:04 PM |
| Department Approval | ctyle1 | 11/17/2017 12:58:07 PM |
| Contract Manager Approval | ctyle1 | 11/20/2017 10:21:54 AM |
| Budget Analyst Approval | jrodrig9 | 11/20/2017 15:30:42 PM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19374**

| | |
|--|---|
| Agency Name: DEPARTMENT OF CORRECTIONS | Legal Entity Name: RIDGE HOUSE, INC |
| Agency Code: 440 | Contractor Name: RIDGE HOUSE, INC |
| Appropriation Unit: 3711-22 | Address: 900 W. 1ST ST STE 200 |
| Is budget authority available?: Yes | City/State/Zip: RENO, NV 89503-5587 |
| If "No" please explain: Not Applicable | Contact/Phone: Denise Everett 775-322-8941 |
| | Vendor No.: T80938781 |
| | NV Business ID: NV19821007967 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2019 |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|------------------------|-----------------|---------------|--------|
| General Funds | 0.00 % | Fees | 0.00 % |
| X Federal Funds | 100.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

The Bureau of Justice approved funding an additional year for Nevada's Second Chance Act Strategic Recidivism Reduction (SRR) grant starting October 1, 2017 to September 30, 2018. This contract will give the department the additional time to meet the SRR grant deliverables.

3. Termination Date: **09/30/2018**

Contract term: **364 days**

4. Type of contract: **Contract**

Contract description: **Re-Entry Services**

5. Purpose of contract:

This is a new contract that continues ongoing offender assessments for a minimum of 48 NDOC inmates housed at Northern Nevada Transitional Housing. Provided services are part of Nevada's strategic recidivism reduction developed for targeted offenders with substance abuse issues and convicted of property crimes to assist with the completion of a re-entry plan as they prepare for release from incarceration. Measures of success will follow the targeted population through the program as part of the Second Chance Act Re-Entry Grant.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$28,156.48**

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada was awarded the Second Chance Grant Act Implementation Funding which requires the department to work with a community organization that will provide a range of services for offenders close to being released. Services include: employment, recovery, housing, education and as needed behavioral health, substance abuse and counseling services. This also meets the grant requirements for integrated service and to ensure continuity of care into the community with NDOC Parole and Probation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Historically, the department has outsourced these services in an effort to provide offenders with much needed tools from a qualified professional to reduce recidivism. The NDOC Re-Entry program does not perform these services and no other state agency offers these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor is a required partner as approved under the Federal Grant Award.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Indirect cost rate is 10%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Previous 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 | amonro1 | 11/29/2017 10:57:26 AM |
| Division Approval | sewart | 11/30/2017 11:40:33 AM |
| Department Approval | sewart | 11/30/2017 11:40:37 AM |
| Contract Manager Approval | ahailey | 11/30/2017 14:40:06 PM |
| Budget Analyst Approval | bmacke1 | 12/13/2017 13:41:24 PM |

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9938



**State of Nevada
Department of Corrections**

Brian Sandoval
Governor

James Dzurenda
Director

Sheila Lambert
Administrator

MEMORANDUM

Date: October 16, 2017
To: Bridgette Garrison, Governor's Finance Office
Through: Scott Ewart, Chief of Fiscal Services
From: Sheila Lambert, Administrator
SUBJECT: **Retroactive Contract: Ridge House, Inc. – CETS # 19374**

The Bureau of Justice provided the notice of grant award (NOGA) on September 20, 2017 at 6:02 p.m. for Year 2 of the Second Chance Act Grant Award.

The Nevada Department of Corrections (NDOC) responded to the GMS Award 2016-CZ-BX-0015 on September 21, 2017, and immediately moved the processes forward for the completion of the grant awards and contracts as part of the Year 2 program activities.

The grant award required NDOC to continue the efforts underway, as part of the year one project period October 1, 2016, through September 30, 2017. NDOC is not able to utilize funds for Year 1 of the Second Chance Act Grant for Year 2. NDOC's contracts, based on the original Year 1 award, ended on September 30, 2017. However, all activities are continuous and on-going.

NDOC is requesting retroactivity of the contracts to October 1, 2017, in compliance with the United States Department of Justice Grants Financial Guide. Recipients and sub-recipients are prohibited from comingling funds on either a program-by-program or project-by-project basis, which requires the NDOC to consider this as a "new" award. Funds specifically budgeted and/or received for one project may not be used to support another. The request of retroactivity works to ensure NDOC is compliant with the activities of the federal award.

Please accept this information as justification for contract # 19374 to be effective October 1, 2017.

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: **19518**

| | |
|--|--|
| Agency Name: DEPARTMENT OF AGRICULTURE | Legal Entity Name: MIA CONSULTING LLC |
| Agency Code: 550 | Contractor Name: MIA CONSULTING LLC |
| Appropriation Unit: 4545-17 | Address: 4059 E 73 N |
| Is budget authority available?: Yes | City/State/Zip: RIGBY, ID 83442 |
| If "No" please explain: Not Applicable | Contact/Phone: Becca VanKampen 208-569-1371 |
| | Vendor No.: |
| | NV Business ID: NV20151603845 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2020 |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | | |
|---------------|--------|----------|---------------|-----------------|
| General Funds | 0.00 % | X | Fees | 100.00 % |
| Federal Funds | 0.00 % | | Bonds | 0.00 % |
| Highway Funds | 0.00 % | | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **Yes**

If "Yes", please explain

Previous contract expired during Department personnel transitioning; vendor continued work as outlined in scope requiring a retroactive contract.

3. Termination Date: **12/31/2019**

Contract term: **2 years and 91 days**

4. Type of contract: **Contract**

Contract description: **EDDMAPS**

5. Purpose of contract:

This is a new contract to provide continued work with the expansion of the current mapping application to include rangeland monitoring in conjunction with invasive plant mapping.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$33,475.00**

Other basis for payment: Upon completion of project; iPhone app \$7,500; Android app \$4000; GIS Development \$5000; App support \$2880; GIS Support \$5760; Hardware and hosting \$3600; Project fees \$4735.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Department of Agriculture Noxious Weed Program now has an internal up-to-date Nevada invasive plant database and now requires expansion of the current function of EDDMAPS (front end application) and the Nevada EDDMAPS GIS (back end application) in order to include rangeland monitoring in conjunction with invasive plant mapping. NDA and its customers find the EDDMAPS apps very useful for locating weed infestations in or near to prime sage grouse habitats.

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, nor the time to create a database and other applications that could share data with the national EDDMaps.org database and allow for query capabilities that could be useful by the Noxious Weed Program.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

MIA Consulting is the only firm, at this time, that has a contract with EDDMaps to develop geodatabases connected to the EDDMaps server online (which is what we need to be connected to the national map for invasive weed management). The other more local firms do not have the needed relationship with the creators of EDDMaps out of the University of Georgia and it would cost much more for them to work from ground zero than it will be to work through MIA consulting who has already created similar databases for the states of ID and UT connected to the existing EDDMaps.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The contractor has performed contract work for NDA, to build the custom invasive plant database. The Department is very 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:

Meghan Brown, Deputy Administrator Ph: 775-778-0274

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|--------|------------------------|
| Budget Account Approval | bbel1 | 12/01/2017 09:22:42 AM |
| Division Approval | bbel1 | 12/01/2017 09:22:45 AM |
| Department Approval | bbel1 | 12/01/2017 09:22:49 AM |
| Contract Manager Approval | bbel1 | 12/11/2017 16:08:22 PM |
| EITS Approval | lolso3 | 12/12/2017 08:44:57 AM |
| Budget Analyst Approval | hfield | 12/12/2017 09:24:15 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: **19436**

| | |
|--|--|
| Agency Name: DEPARTMENT OF WILDLIFE | Legal Entity Name: WEHTJE, WALTER |
| Agency Code: 702 | Contractor Name: WEHTJE, WALTER |
| Appropriation Unit: 4464-12 | Address: 3125 LAREDO LN |
| Is budget authority available?: Yes | City/State/Zip: FORT COLLINS, CO 80526-4259 |
| If "No" please explain: Not Applicable | Contact/Phone: 757/332-0688 |
| | Vendor No.: T32004438 |
| | NV Business ID: NV20161559425 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2020 |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | | | |
|------------------------|----------------|----------|---------------|----------------|-----------------|
| General Funds | 0.00 % | X | Fees | 25.00 % | Predator |
| X Federal Funds | 75.00 % | | Bonds | 0.00 % | |
| Highway Funds | 0.00 % | | Other funding | 0.00 % | |

Agency Reference #: 18-32

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/27/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2019**

Contract term: **2 years and 34 days**

4. Type of contract: **Contract**

Contract description: **Raven Capture**

5. Purpose of contract:

This is a new contract to provide common raven captures, banding and recording and maintenance of information.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00**

Other basis for payment: As invoiced by the vendor and approved by the state.

II. JUSTIFICATION

7. What conditions require that this work be done?

Develop a protocol to estimate common raven populations and increase the understanding of common raven density and distribution.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capturing common ravens is very laborious and time consuming. It is also specialized work, no one with Nevada Department of Wildlife has this experience.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Bryan Bedrosian
Walter Wehtje
Jonathan Fusaro

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was the only one to submit a proposal.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been under contract with the department and has had satisfactory service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
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:

Pat Jackson, Wildlife Staff Specialist Ph: (775)688-1676

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dwendell | 11/02/2017 13:39:43 PM |
| Division Approval | gpincoli | 11/14/2017 14:48:26 PM |
| Department Approval | eobrien | 11/15/2017 11:06:04 AM |
| Contract Manager Approval | dwendell | 11/16/2017 10:07:30 AM |
| Budget Analyst Approval | hfield | 11/27/2017 10:09:00 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: **19382**

Agency Name: **DEPARTMENT OF WILDLIFE**
 Agency Code: **702**
 Appropriation Unit: **4467-15**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **JERRY L. WILSON, DBA**
 Contractor Name: **JERRY L. WILSON, DBA**
 Address: **THE RELOCATOR, LLC
 PO BOX 2139
 MYRTLE CREEK, OR 97457-0174**
 City/State/Zip: **MYRTLE CREEK, OR 97457-0174**
 Contact/Phone: **JERRY WILSON 541/863-7693**
 Vendor No.: **T29014921**
 NV Business ID: **Exempt**

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to 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 % Upland Game Stamp |
| Federal Funds | 0.00 % | | Bonds | 0.00 % |
| Highway Funds | 0.00 % | | Other funding | 0.00 % |

Agency Reference #: 18-28

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/21/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2019**

Contract term: **1 year and 71 days**

4. Type of contract: **Contract**

Contract description: **Quail capture**

5. Purpose of contract:

This is a new contract to provide the capture and translocation of approximately 150 mountain quail and approximately six (6) Ruffed grouse from Oregon to Nevada in order to further establish and expand populations in the Fish Creek Mountains.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$27,600.00**

Other basis for payment: Payment for services may be made in three installments: each payment made after 50 mountain quail have been captured and delivered to the Oregon Department of Fish and Wildlife's regional office in Roseburg, Oregon.

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract will help to expand mountain quail populations in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Employees do not have the required licenses in the state of Oregon.

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):

University of Oregon
The Relocator, LLC
Oregon State University

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor has the proper license and skills to complete this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Shawn Espinosa, Upland Game Staff Specialist Ph: (775) 688-1523

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dwendell | 10/13/2017 09:19:48 AM |
| Division Approval | tdoucett | 10/24/2017 08:52:30 AM |
| Department Approval | eobrien | 11/01/2017 15:54:28 PM |
| Contract Manager Approval | dwendell | 11/02/2017 08:07:03 AM |
| Budget Analyst Approval | hfield | 11/21/2017 13:21:06 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: **18563** Amendment Number: **1**

Agency Name: **DCNR - DIVISION OF WATER RESOURCES** Legal Entity Name: **McMillen Jacobs Associates**

Agency Code: **705** Contractor Name: **McMillen Jacobs Associates**

Appropriation Unit: **4171-15** Address: **4894 Sparks Boulevard**

Is budget authority available?: **Yes** City/State/Zip: **Sparks, NV 89436**

If "No" please explain: **Not Applicable** Contact/Phone: **Dr. E. George Robinson 775-391-5857**

Vendor No.:
NV Business ID: **NV20091399986**

To what State Fiscal Year(s) will the contract be charged? **2017-2018**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

| | | | |
|---|----------------|---------------|--------|
| <input checked="" type="checkbox"/> General Funds | 50.00 % | Fees | 0.00 % |
| <input checked="" type="checkbox"/> Federal Funds | 50.00 % | Bonds | 0.00 % |
| Highway Funds | 0.00 % | Other funding | 0.00 % |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2017**

Anticipated BOE meeting date 01/2018

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **12/10/2017**

Termination Date:

Contract term: **1 year and 51 days**

4. Type of contract: **Contract**

Contract description: **Dam Engineering Svcs**

5. Purpose of contract:

This is the first amendment to the original contract to provide engineering services that will support the agency in completing proposed repairs and maintenance activities at South Fork Dam. This amendment adds seepage consultation to the scope of services, extends the termination date from December 10, 2017 to June 30, 2018 and increases the maximum amount from \$63,580 to \$77,065 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: | \$63,590.00 | \$63,590.00 | \$63,590.00 | Yes - Action |
| 2. Amount of current amendment (#1): | \$13,475.00 | \$13,475.00 | \$13,475.00 | Yes - Info |
| 3. New maximum contract amount: | \$77,065.00 | | | |
| and/or the termination date of the original contract has changed to: | 06/30/2018 | | | |

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is needed as the objective of these repairs, maintenance, enhancements, and the review of South Fork Dam is to restore the dam to its original operating condition and create a plan to accommodate these items in the future as well. All of these efforts are to ensure the safety of the public and continued beneficial use of the South Fork Reservoir.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Division of Water Resources does not have the expertise needed for this type of work.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen due to their experience, resources, and knowledge of the specific issues and projects as well as their cost proposal.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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 | bkordono | 11/27/2017 11:23:51 AM |
| Division Approval | bkordono | 11/27/2017 11:24:08 AM |
| Department Approval | pmisch | 11/27/2017 13:36:05 PM |

Contract Manager Approval
Budget Analyst Approval

bkordono
cpalme2

11/27/2017 13:47:43 PM
11/28/2017 10:25:32 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: **19361**

| | |
|---|--|
| Agency Name: DETR - REHABILITATION DIVISION | Legal Entity Name: BURNEYS COMMERCIAL SERVICE |
| Agency Code: 901 | Contractor Name: BURNEYS COMMERCIAL SERVICE |
| Appropriation Unit: 3253-10 | Address: 1528 LINDA WAY |
| Is budget authority available?: Yes | City/State/Zip: SPARKS, NV 89431 |
| If "No" please explain: Not Applicable | Contact/Phone: Paul J. Boyer 775-355-9111 |
| | Vendor No.: T80909486A |
| | NV Business ID: NV19791004978 |
| To what State Fiscal Year(s) will the contract be charged? 2018-2021 | |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Business Enterprise Set-Aside |

Agency Reference #: **3116-21-BEN**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2018**

Anticipated BOE meeting date **11/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2020**

Contract term: **3 years**

4. Type of contract: **Contract**

Contract description: **Burney's Commerical**

5. Purpose of contract:

This is a new contract to provide repair and maintenance service of the commercial kitchen equipment for the Blind Business Enterprise located in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$19,000.00**

Other basis for payment: Standard Hours: 7:30am-4:00pm (M-F), \$95/hr., \$45 Truck Fee; Saturdays and Non-Standard Hours: 4:00pm-7:30am (M-F), \$142.50/hr., \$45 Truck Fee; Sunday and Holidays: \$190/hr., \$45 Truck Fee. The contract shall not exceed \$19,000 for the term of the contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

BEN has an on-going need for repairs and maintenance of the commercial kitchen appliance located at various locations in northern Nevada. These services are essential to the health and safety of the staff and the public. The services are mandated by various city, county and state health codes.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained to perform the services.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Burney's Comm. Svc.
Hilltop Refrigeration
Central Sanitary Supply
CVirtual

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor to respond to the solicitation.

d. Last bid date: 08/28/2017 Anticipated re-bid date: 06/01/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been supplying satisfactory service to the Rehabilitation Division since 2005,

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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 | bmartin7 | 11/22/2017 08:18:08 AM |
| Division Approval | jmcentee | 11/28/2017 15:00:33 PM |
| Department Approval | jmcentee | 11/28/2017 15:00:37 PM |
| Contract Manager Approval | jmcentee | 11/28/2017 15:00:41 PM |
| Budget Analyst Approval | tgreenam | 11/30/2017 08:37:29 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19428**

| | |
|--|--|
| Agency Name: DETR - REHABILITATION DIVISION | Legal Entity Name: DCR CORPORATION |
| Agency Code: 901 | Contractor Name: DCR CORPORATION |
| Appropriation Unit: 3253-10 | Address: DESERT CASH REGISTER CORP 6010 BOULDER HWY |
| Is budget authority available?: Yes | City/State/Zip: LAS VEGAS, NV 89122-7458 |
| If "No" please explain: Not Applicable | Contact/Phone: 702/454-2328 |
| | Vendor No.: T27012754 |
| | NV Business ID: NV19951090270 |
| To what State Fiscal Year(s) will the contract be charged? | 2018-2020 |

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Business Enterprise Set-Aside |

Agency Reference #: **3115-20-BEN**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**

Anticipated BOE meeting date **11/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2019**

Contract term: **2 years and 19 days**

4. Type of contract: **Contract**

Contract description: **Cash Reg. Repair - S**

5. Purpose of contract:

This is a new contract to provide maintenance and programming of electronic cash registers, point-of-sale terminals, merchant services, and program monitors for kitchen systems at all existing and new southern Nevada Business Enterprises of Nevada locations, including the 3 sites at the Hoover Dam.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: Payment for services, as approved by authorized personnel, will be made at the rate of \$20,000.00 per Contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

Computerized equipment is needed for maintaining accurate records at various BEN facilities, which are operated by blind vendors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agency staff are not trained in the expertise needed for maintenance and repair of specialized cash register equipment needed by BEN operators.

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):

Alexco POS
Western Cash Register System
Desert Cash Register
ECR Sales & Service

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only vendor who responded

d. Last bid date: 08/22/2017 Anticipated re-bid date: 10/01/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has been providing satisfactory service for the DETR, Public Safety and Conservation and Natural Resources since 2001.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

David Furse, BEO II Ph: 702-486-2960

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | bmartin7 | 11/22/2017 09:16:00 AM |
| Division Approval | jmcentee | 12/01/2017 12:37:32 PM |
| Department Approval | jmcentee | 12/01/2017 12:37:34 PM |
| Contract Manager Approval | jmcentee | 12/01/2017 12:37:36 PM |
| Budget Analyst Approval | tgreenam | 12/12/2017 07:56:07 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: **19338**

| | |
|--|---|
| Agency Name: DETR - ADMINISTRATIVE SERVICES | Legal Entity Name: CONVERGEONE INC |
| Agency Code: 908 | Contractor Name: CONVERGEONE INC |
| Appropriation Unit: 3274-26 | Address: 3344 HIGHWAY 149 |
| Is budget authority available?: Yes | City/State/Zip: EAGAN, MN 55121-2316 |
| If "No" please explain: Not Applicable | Contact/Phone: 702-400-2579 |
| | Vendor No.: T32004231 |
| | NV Business ID: NV20011490185 |

To what State Fiscal Year(s) will the contract be charged? **2018**

What is the source of funds that 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 #: **3109-18-ADMSVS**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/28/2017**

Anticipated BOE meeting date **11/2017**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2018**

Contract term: **213 days**

4. Type of contract: **Contract**

Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide planning, design and execution services to support the installation of the Cisco Ace F5 4600 network equipment.

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 Contract

Other basis for payment: The State will initiate payment upon receipt of an approved invoice and on approval of authorized personnel.

II. JUSTIFICATION

7. What conditions require that this work be done?

These professional services are needed to install the new F5 network equipment purchased in FY17,

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees have no experience, skills or licensing in the installation and conversion process.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Purchasing Division solicited for an invitation to bid for the purchase of the F5 network equipment, no. 8572. Requisition No, 908 S407093.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or 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:

Kimberly Gaa, Administrator Ph: 775-684-3949

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | dohl0 | 11/17/2017 12:07:54 PM |
| Division Approval | dohl0 | 11/17/2017 12:08:01 PM |
| Department Approval | dohl0 | 11/17/2017 14:18:44 PM |
| Contract Manager Approval | dohl0 | 11/17/2017 14:20:01 PM |
| Budget Analyst Approval | tgreenam | 11/28/2017 08:18:40 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: **19457**

| | | | |
|---------------------------------|--|--------------------|---|
| Agency Name: | DETR - ADMINISTRATIVE SERVICES | Legal Entity Name: | C&W LOCK GLASS & SAFE DBA |
| Agency Code: | 908 | Contractor Name: | C&W LOCK GLASS & SAFE DBA |
| Appropriation Unit: | All Budget Accounts - Category 04 | Address: | ABC LOCK GLASS & SAFE 5755 PEAK RD |
| Is budget authority available?: | Yes | City/State/Zip: | RENO, NV 89510-9557 |
| If "No" please explain: | Not Applicable | | |
| | | Contact/Phone: | 775/842-6322 |
| | | Vendor No.: | T29024610A |
| | | NV Business ID: | NV20091593318 |

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % All DETR Budget Accounts |

Agency Reference #: 3127-20-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2017**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2019**

Contract term: **1 year and 361 days**

4. Type of contract: **Contract**

Contract description: **LOCKSMITH SERVICES**

5. Purpose of contract:

This is a new contract to provide locksmith services for various state and non-state owned buildings located in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,500.00**

Other basis for payment: \$85/hr. regular hrs. 8:00 a.m. to 5:00 p.m. (Monday through Friday); Plus \$69.00 trip charge \$127.50/hr. for emergency, after hours, weekends and holidays

II. JUSTIFICATION

7. What conditions require that this work be done?

The department requires locksmith services on various occasions.

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 work.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

All American Lock
Alpine Lock
Livona A Lopshire DBA Desert Locksmiths
C&W Locksmiths BA ABC Lock & Glass

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only Vendor to respond.

d. Last bid date: 10/05/2017 Anticipated re-bid date: 06/30/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

As displayed in DAWN.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brandon Taylor, Facilities Manager Ph: 775-684-3901

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|----------|------------------------|
| Budget Account Approval | jbende2 | 11/16/2017 15:23:59 PM |
| Division Approval | kdesoci1 | 11/27/2017 15:27:09 PM |
| Department Approval | jmcentee | 11/28/2017 12:47:21 PM |
| Contract Manager Approval | jmcentee | 11/28/2017 15:25:35 PM |
| Budget Analyst Approval | tgreenam | 12/04/2017 08:43:30 AM |

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19194**

| | |
|--|---|
| Agency Name: BDC LICENSING BOARDS & COMMISSIONS | Legal Entity Name: Eduloka Limited |
| Agency Code: BDC | Contractor Name: Eduloka Limited dba inLumon |
| Appropriation Unit: B007 - All Categories | Address: 9645 Gateway Drive, Suite A |
| Is budget authority available?: Yes | City/State/Zip: Reno, NV 89521 |
| If "No" please explain: Not Applicable | Contact/Phone: B. Kartha Raj 7753240938 |
| | Vendor No.: |
| | NV Business ID: NV20101126878 |

To what State Fiscal Year(s) will the contract be charged? **2018-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Licensing Fees |

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2018**

Anticipated BOE meeting date 12/2017

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2018**

Contract term: **364 days**

4. Type of contract: **Contract**

Contract description: **Software Services**

5. Purpose of contract:

This is a new contract to provide software support for licensing software previously approved.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,200.00**

Payment for services will be made at the rate of \$2,100.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board currently utilizes inLumon for its licensing software and would like an additional contract for the support and maintenance of the software system.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Dental Board employees do not have in house IT with expertise to maintain and support the existing software system.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

[Empty text box]

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Legal Entity Name is Eduloka with DBA doing business as inLumon

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

| Approval Level | User | Signature Date |
|---------------------------|--------|------------------------|
| Budget Account Approval | vwind1 | 10/24/2017 11:30:15 AM |
| Division Approval | vwind1 | 10/24/2017 11:30:20 AM |
| Department Approval | vwind1 | 10/24/2017 11:30:26 AM |
| Contract Manager Approval | vwind1 | 10/24/2017 11:30:33 AM |
| Budget Analyst Approval | lfree1 | 12/04/2017 14:39:03 PM |

Brian Sandoval
Governor

James R. Wells, CPA
Director




Paul Nicks
Deputy Director

STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: December 19, 2017

To: James R. Wells, Clerk of the Board
Governor's Finance Office

From: Katrina Nielsen, 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.

GOVERNOR'S FINANCE OFFICE - BUDGET DIVISION

Agenda Item Write-up:

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of December 12, 2017.

Additional Information:

The TORT Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency supplement funding for eligible agencies within statutory authority.

BA 1348 TORT Claim Fund
NRS 331.187
FY 2018 (as of December 12, 2017)

| | | |
|------------------------|--------------|-------------------------|
| Beginning Cash | 5,890,728.00 | |
| Insurance Premiums - A | 611,042.17 | |
| Insurance Premiums | 3,709,958.90 | |
| AG Loan Repayment | 5,000.00 | |
| Total Revenue | | \$ 10,216,729.07 |

| | | |
|---------------------------|------------------------|------------------------|
| <u>Paid Claims:</u> | | |
| Attorney General's Office | (3,457,768.36) | |
| | Payments | \$ (3,457,768.36) |
| | Account Balance | \$ 6,758,960.71 |

| | | |
|--------------------------------------|------------------------|------------------------|
| <u>Claims Submitted for Payment:</u> | | |
| Tort Claim 18257, Moonin | (225,000.00) | |
| | Submitted for Payment | \$ (225,000.00) |
| | Account Balance | \$ 6,533,960.71 |

| | | |
|--|------------------------|------------------------|
| <u>Projected Outstanding Claims:</u> | | |
| Attorney General's Office (projection) | (232,087.50) | |
| | Total Pending Claims | \$ (232,087.50) |
| | Account Balance | \$ 6,301,873.21 |

**BA 4888 Stale Claims Account
NRS 353.097
FY 2018 (as of December 12, 2017)**

Beginning Cash 1,761,451.00

Total Revenue **\$ 1,761,451.00**

Paid Claims:

| | |
|--|--------------|
| Post Conviction Stale Claims | (2,643.00) |
| Governor's Office | (31,394.59) |
| Attorney General's Office | (363.93) |
| Department of Taxation | (1,481.35) |
| Veteran's Affairs | (1,116.73) |
| Department of Education | (185,211.29) |
| Department of Administration | (1,725.76) |
| Department of Employment Training & Rehabilitation | (4,817.75) |
| Department of Health & Human Services | (154,034.50) |
| Department of Business & Industry | 22.76 |
| Department of Conservation & Natural Resources | (15,532.00) |
| Department of Corrections | (2,651.68) |
| Department of Public Safety | (3,085.90) |
| Judicial Branch | (1,050.00) |
| Commission on Judicial Discipline | (1,380.00) |

Payments \$ (406,465.72)
Account Balance **\$ 1,354,985.28**

Claims Submitted for Payment:

Department of Health & Human Services - ADSD (71,386.02)

Submitted for Payment **\$ (71,386.02)**
Account Balance **\$ 1,283,599.26**

Projected Outstanding Claims :

Total Pending Claims \$ -
Estimated Account Balance - Including all Claims **\$ 1,283,599.26**

**BA 1335 Disaster Relief Account
NRS 353.2735
FY 2018 (as of December 12, 2017)**

| | |
|-------------------------------------|--------------|
| Beginning Cash | 7,748,418.00 |
| Treasurer's Interest | 22,003.37 |
| 1st Qtr Transfer Per NRS 353.288(4) | 500,000.00 |

| | |
|----------------------|------------------------|
| Total Revenue | \$ 8,270,421.37 |
|----------------------|------------------------|

Paid Claims:

| | |
|--|--------------|
| Department of Public Safety - Division of Emergency Mgmt | (231,663.79) |
|--|--------------|

| | |
|------------------------|------------------------|
| Payments | \$ (231,663.79) |
| Account Balance | \$ 8,038,757.58 |

Claims Submitted for Payment:

| | |
|------------------------|------------------------|
| Submitted for Payment | \$ - |
| Account Balance | \$ 8,038,757.58 |

Projected Outstanding Claims :

| | |
|---|------------------------|
| Total Pending Claims | \$ - |
| Estimated Account Balance - Including all Claims | \$ 8,038,757.58 |

**IFC Contingency Fund Restricted
NRS 353.266
FY 2018 (as of December 7, 2017 Meeting agenda)**

Restricted General Fund

Beginning Cash:

| | |
|---|---------------|
| Office of Economic Development - Nevada Main Street Program | 350,000.00 |
| Governor's Office of Finance - Enterprise Resource Planning Project | 11,664,000.00 |
| Department of Health and Human Services - Aging and Disability Services - Autism | 1,392,066.00 |
| Desert Research Institute - Cloud Seeding Program | 683,656.00 |
| Department of Public Safety - Division of Parole & Probation - Pilot Re-entry Program | 370,235.00 |
| Establishment of a Fine Arts Museum in LV & Expansion of Reno NV Museum of Art | 1,000,000.00 |
| NSHE - UNLV Medical School Building | 25,000,000.00 |

| | |
|----------------------|-------------------------|
| Total Revenue | \$ 40,459,957.00 |
|----------------------|-------------------------|

Paid Claims:

| | |
|---|-----------------|
| Office of Economic Development - Nevada Main Street Program | (350,000.00) |
| Governor's Office of Finance - Enterprise Resource Planning Project | (1,447,883.00) |
| NSHE - UNLV Medical School Building | (25,000,000.00) |
| NSHE - Desert Research Institute | (682,684.00) |

| | |
|------------------------|---------------------------|
| Payments | \$ (27,480,567.00) |
| Account Balance | \$ 12,979,390.00 |

Pending Claims February 7, 2017 IFC Meeting:

| | |
|------------------------|-------------------------|
| Total Pending | \$ - |
| Account Balance | \$ 12,979,390.00 |

Restricted Highway Fund

Beginning Cash:

| | |
|---|--------------|
| Governor's Office of Finance - Enterprise Resource Planning Project | 2,736,000.00 |
|---|--------------|

| | |
|----------------------|------------------------|
| Total Revenue | \$ 2,736,000.00 |
|----------------------|------------------------|

Paid Claims:

| | |
|---|--------------|
| Governor's Office of Finance - Enterprise Resource Planning Project | (339,627.00) |
|---|--------------|

| | |
|------------------------|------------------------|
| Payments | \$ (339,627.00) |
| Account Balance | \$ 2,396,373.00 |

Pending Claims February 7, 2017 IFC Meeting:

| | |
|------------------------|------------------------|
| Total Pending | \$ - |
| Account Balance | \$ 2,396,373.00 |